



# 2021 SUMMER REGISTRATION

## SUMMER CAMPS

6 weeks of Summer Camp

Monday - Thursday

8:45AM - 11:45am

Cost: \$120/week

\*Registration is due weekly - the Thursday  
before the 1st day of camp.

## STAY AND PLAY

Extended care is available Monday through  
Thursday directly following Summer Camps.

11:45am - 1:45pm

Cost: \$20/day

\*Registration is due weekly - the Thursday  
before the 1st day of camp.

**ALL OPTIONS REQUIRE A ONE-TIME \$25 REGISTRATION FEE PER CHILD**

Child's Name \_\_\_\_\_ Birthday \_\_\_\_\_

Parents' Names \_\_\_\_\_ Is your child potty trained? Yes or No

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Yes/No My family attends worship services on a regular basis. Name of Church: \_\_\_\_\_

Yes/No I give God's Garden my permission to use my child's photograph/video on Social Media

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE MARK AN "X" NEXT TO THE CAMP WEEKS THAT YOU ARE INTERESTED IN**

WEEK/THEME	MON-THURS CAMP	STAY AND PLAY (PLEASE SPECIFY DAYS)
June 14-17: Up, Up, and Away; Adventure to Outer space		
June 21-24: Lego Building		
June 28-July 2: Step into STEAM		
July 5-8: Explore Dinosaurs and Volcanoes		
July 12-15: Lego Building		
July 19-22: Under the Sea		

**TO SECURE A SPACE FOR YOUR CHILD, PAYMENT IS DUE THE THURSDAY BEFORE CAMP STARTS**

**For more information:**

God's Garden  
 1401 E. Liberty Lane  
 Phoenix, AZ 85048  
 480-460-0081  
 www.godsgarden.com

Number of Weekly Camps = \_\_\_\_\_ x \$120/week = \_\_\_\_\_

Stay and Play = \_\_\_\_\_ x \$20/day = \_\_\_\_\_

Registration Fee = \$25

Total = \_\_\_\_\_

**\*Advanced Registration for Summer Camp is required. No walk-ins accepted!**

# GOD'S GARDEN PRESCHOOL 2021 SUMMER CAMPS



## **June 14-17: UP, UP AND AWAY; ADVENTURE TO OUTER SPACE**

We will be going out of this world this week as we explore space. Children will learn about stars, planets, aliens, and the moon! You will not want to miss this adventure as we discover new worlds!

## **June 21-24: LEGO BUILDING**

Does your child love playing and exploring with Legos? This week is meant to enhance your child's fine motor skills, problem solving, cooperation, and creativity. Children will work together to build amazing Lego structures – robots, sky scrapers, Noah's ark – the options are endless.

## **June 28- July 2: STEP INTO STEAM**

Put on your lab coats, pull out the test tubes, and let's explore some hands-on STEAM activities! Children learn to solve problems, ask questions, come up with new solutions, and explore the world around us by experimenting with materials. Children will work on teamwork & imagination!

## **July 5-8: EXPLORE DINOSAURS AND VOLCANOES**

Join us for a week of Dino-diggin' fun as we explore all things dinosaurs. Has your child ever wanted to see how big a T-Rex footprint really is? The children will learn all about these prehistoric animals through hands on exploration and science discovery. They will read, create, observe, dig, measure, stomp and dance their way through many fun dinosaur activities.

## **July 12-15: LEGO BUILDING**

Does your child love playing and exploring with Legos? This week is meant to enhance your child's fine motor skills, problem solving, cooperation, and creativity. Children will work together to build amazing Lego structures – robots, skyscrapers, Noah's ark – the options are endless.

## **July 19-22: UNDER THE SEA**

Dive under the sea and explore the Ocean. Sandcastles, Mermaids, shells, fish, whales, and did we mention SHARKS abound as we explore life under the ocean through nature, arts and crafts, and storytelling. You will not want to miss the adventures we explore this week – from the beach to the deepest parts of the ocean!

Camps are for children ages 2-years-old to 8-years-old. Children do not have to be potty-trained to attend. Advanced Registration is required. Space is limited.



CDC/SGH# or name: \_\_\_\_\_

**Arizona Department of Health Services  
Bureau of Child Care Licensing  
Emergency, Information and Immunization Record Card**

<b>Child's Name:</b>	<b>Date Enrolled:</b>	<b>Updated:</b>
<b>Home Address (#, Street, City, State, Zip Code):</b>		<b>Date Disenrolled:</b>
<b>Home Phone:</b>	<b>Date of Birth:</b>	<b>Sex:</b> <input type="checkbox"/> male <input type="checkbox"/> female

<b>Parent or Guardian Name:</b>	<b>Home Address (#, Street, City, State, Zip Code):</b>
<b>Cell Phone (optional):</b>	<b>Contact Telephone Number:</b>

<b>Parent or Guardian Name:</b>	<b>Home Address (#, Street, City, State, Zip Code):</b>
<b>Cell Phone (optional):</b>	<b>Contact Telephone Number:</b>

**I authorize the following individuals to collect my child from the facility in case of emergency or if I cannot be contacted: (Pursuant to R9-5-304.B, at least two contact persons are required.)**

<b>Name:</b>	<b>Contact Telephone Number:</b>
<b>Name:</b>	<b>Contact Telephone Number:</b>
<b>Name:</b>	<b>Contact Telephone Number:</b>
<b>Name:</b>	<b>Contact Telephone Number:</b>

**If Medical care is necessary, call:**

<b>Health Care Provider*</b>	<b>Name:</b>	<b>Contact Telephone Number:</b>
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\*A Health Care Provider is a physician, physician assistant or registered nurse practitioner.

I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time for his/her health and safety.

<b>In case of injury or sudden illness, I request that this individual be called first:</b>	
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**The following individual(s) may NOT remove my child from the facility:**

<b>Name(s):</b>
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Custody papers have been provided and are on file at the facility.  yes  no

Telephone Authorization Code (optional): \_\_\_\_\_

**Immunization Information**

(A licensee shall attach an enrolled child's written immunization record or exemption affidavit to the enrolled child's Emergency, Information and Immunization Record card.)

For information regarding current immunization requirements go to:

[www.azdhs.gov/phs/immun/index.htm](http://www.azdhs.gov/phs/immun/index.htm) or contact the Arizona Immunization Program Office at (602)364-3630.

One of these items must accompany the EIIR card at all times:

<input type="checkbox"/>	Copy of current official documented immunization record attached
<input type="checkbox"/>	Religious Beliefs exemption form signed by parent/guardian attached
<input type="checkbox"/>	Medical Exemption form signed by physician and parent/guardian attached
<input type="checkbox"/>	Signed Laboratory Proof of Immunity form attached

Notification of immunizations needed sent to Parent(s) or Guardian(s):	mo /day/ yr	mo /day/ yr	mo /day /yr
Updated immunizations received and attached:	mo /day/ yr	mo /day/ yr	mo /day /yr

**Medical Information**

<p>Is child allergic to food or other substances? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, describe symptoms, name foods or substances to be avoided, and the procedure to follow if reaction occurs:</p>
<p>Is child usually susceptible to infections and if so, what precautions need to be taken? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, list precautions:</p>
<p>Is child subject to convulsions and what should be our procedure if one occurs? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, specify procedure:</p>
<p>Is there any physical condition that we should be aware of and what precautions should be taken (heart trouble, foot problem, hearing impairment, hernia, etc.)? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, list precautions:</p>
<p>Additional comments:</p>
<p>Other special instructions:</p>

This Emergency Information and Immunization Record Card is accurate and complete, front and back, and was provided by:

Parent/Guardian PRINTED Name:	SIGNED Name:	DATE: