



VPK: \_\_\_\_\_ Yes \_\_\_\_\_ No

# Summer Camp Application

First Child \_\_\_\_\_ Age \_\_\_\_\_  
 (Last) (First) (Middle) (Years)

Home Address \_\_\_\_\_ Phone (Home) \_\_\_\_\_  
 (Street) (City)

Phone (Work) \_\_\_\_\_ Cell Phone \_\_\_\_\_ Pass code \_\_\_\_\_

Email address \_\_\_\_\_

Second Child \_\_\_\_\_ Age \_\_\_\_\_  
 (Last) (First) (Middle) (Years)

I hereby give permission to Lycée Franco-Américain Camp and/or its designee to ensure that medical intervention/treatment of my child is given by Emergency personnel to ensure that my child receives the proper medical treatment, under the provisions of the Medical Practice Act, in my absence should an injury occur. I understand that due to insurance regulations, paramedics or ambulance must transport injured or ill children to a hospital, when necessary. School van or school personnel cannot transport them. It is also my intent to grant authority to administer and perform any and all examinations, X-ray examinations, treatments, anesthetics, and diagnostic procedures that may in the course of my child's care be deemed advisable and necessary. I also understand and agree that I will be responsible to pay for any and all charges incurred as a result of my child's treatment at the treating hospital and/or expense for transportation to a hospital.

**I have read and understand the above Lycée Franco-Américain Camp Policy**

\_\_\_\_\_  
 Signature Date

List all Allergies 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

List all Medical conditions: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Please list below all people (Including Parents) allowed to pick up your child. These will be the only people to whom the school will release the child.

- Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_
- Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_
- Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_
- Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Session	Dates	Hours	Price F/T - P/T	
Session I (2 weeks)	June 13 - June 24	9:00 A.M. – 5:00 P.M.	\$300	\$230-\$190
Session II (2 weeks)	June 27 - July 8	9:00 A.M. – 5:00 P.M.	\$300	\$230-\$190
Session III (2 weeks)	July 11 - July 22	9:00 A.M. – 5:00 P.M.	\$300	\$230-\$190
Session IV (2 weeks)	July 25 – August 5	9:00 A.M. – 5:00 P.M.	\$300	\$230-\$190

**Enclosed** is a check of \$ \_\_\_\_\_  
 (# of sessions X \$300 + \$50 registration fee). Full payment is due upon registration.

**Mail to: Lycée Franco Américain, 8900 Stirling Road, Cooper City, FL 33024**

**You are responsible to pay for the session(s) that you have chosen. There will be no reimbursement or adjustment even if your child misses days!**



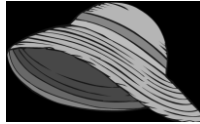


# SUMMER CAMP 2016

*Lycée Franco-Américain has created a wonderful summer of fun for our students. We offer an extensive combination of activities and events for the summer. Campers will also organize a performance or expositions of projects at the end of each two-week session.*

**V P K**  
**SUMMER**  
**CAMP**

**AGES two (2) to fourteen (14)**  
8900 Stirling Road  
Cooper City, Florida 33024



Two weeks Sessions from .....  
**June 13 – August 5**



This year, we offer.....

- ✓ Intensive & Remedial Spanish Lessons (Optional)\*
- ✓ Intensive & Remedial English Lessons (Optional)
- ✓ Fun & Cultural Field Trips
- ✓ Arts & Crafts
- ✓ Basketball
- ✓ Dance
- ✓ Cookout
- ✓ Volleyball
- ✓ Sewing



- ✓ Optional Swimming Lessons aquatic fun and games provided by a certified swimming instructor
- ✓ French Immersion
- ✓ Intensive & Remedial



Program  
French Lessons (Optional)

And much, much more ...

\* Will be offered based on registration.



**CALL NOW TO RESERVE YOUR CHILD'S SPOT FOR THE SUMMER !**

**FEES\***

**Each Session: Full/Time (2 weeks) \$300**  
**Part/Time (3 days) \$230 - (2 days) \$190**

**REGISTRATION FEE: \$50**

- 1) Rates cover all normal camp costs except Lunch
- 2) 10 % Second Child Discount (Must be Sibling)
- 3) Extended camp fees:
  - \$60 per week Morning care 7:00 a.m. - 8:30 a.m.
  - \$60 per week for Afternoon care 5:00 p.m. - 6:00 p.m.

**Camp session fees are due upon enrollment!**

**\*Note: There will be a \$5 per minute charge for late pick-up after 6:05 PM**

**FOR MORE INFORMATION, CALL NOW (954) 237-0356**



## SUMMER CAMP 2016



### HOW DO I REGISTER?

- For your convenience, a registration form is included in this brochure.
- To register, simply fill out the registration form and return it with your registration fee and session(s) payment.
- Bring the child's Health Examination Form and the Certification of Immunization completed by physician.
- The registration fee is not refundable.
- Payment in full of all camp/session fees is due at the time of registration.



### WHAT SHOULD I BRING TO CAMP?

Your child should bring the following on daily basis

- Sun Block
- Extra Snacks with drinks
- Special clothing and supplies (swim suit, towel, etc.) will be announced as needed



### CAMP HOURS

CAMP PROGRAM HOURS 9:00 a.m. - 5:00 p.m.

EXTENDED CAMP HOURS AM.....7:00 - 8:30

PM.....5:00 - 6:00



### LYCEE FRANCO-AMERICAIN

8900 Stirling Road

Cooper City, Florida 33024

**TELEPHONE (954) 237-0356**

**SPACES ARE LIMITED!**



# INTENSIVE & REMEDIAL FRENCH, ENGLISH AND SPANISH



This program is designed to help students who are having difficulties in French, English and Spanish and to students who want to attain the next level. The classes will be offered 2 days weekly for 3 hours from 9:00 A. M. - 12:00 P.M. Each session will last two weeks. These classes will include 2 hours of grammar, writing and reading, and one hour of conversation and/or oral presentation. There is a minimum of 4 students to start the class and a maximum of 6 students per class. These classes will be taught by our elementary teachers and/or other qualified elementary teachers. If you are interested, please complete the registration form, circle the session(s) and return it with you payment.




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## INTENSIVE & REMEDIAL FRENCH, ENGLISH AND SPANISH PROGRAM

First child \_\_\_\_\_ Age \_\_\_\_\_  
 (Last) (First) (Middle) (Years)

Home Address \_\_\_\_\_ Phone (H) \_\_\_\_\_  
 (Street) (City)

Phone (W) \_\_\_\_\_ Cell \_\_\_\_\_ Pass code \_\_\_\_\_

Second child \_\_\_\_\_ Age \_\_\_\_\_  
 (Last) (First) (Middle) (Years)

Session	Dates	Hours	Price
Session I (2 weeks)	June 13 - June 24	9:00 A.M. - 12:00 P.M.	\$160
Session II (2 weeks)	June 27- July 8	9:00 A.M. - 12:00 P.M.	\$160
Session III (2 weeks)	July 11 - July 22	9:00 A.M. - 12:00 P.M.	\$160
Session IV (2 weeks)	July 25 - August 5	9:00 A.M. - 12:00 P.M.	\$160

**Enclosed** is a check of \$ \_\_\_\_\_  
 (# of sessions X \$160 + \$25 registration fee). Full payment is due upon registration. You are responsible to pay for the session(s) you have chosen even your child do not attend the session(s)

**\*Students who are already enrolled in our regular summer camp program will receive 50% discount if they attend this program on the days that it is being offered. However, they need to choose the session(s) that they are currently enrolled in our regular summer camp.**

