

Cameron House
920 Sacramento St.
San Francisco, CA
94108

CAMERON VENTURES 2010

June 21 to July 30, 2010

ENROLLMENT Open to all children entering **1st through 5th grades** in Fall 2010.

WHEN Six weeks, June 21 - July 30, Monday through Friday (Closed Monday July 5th).
Program time is from 9:00 a.m. to 4:30 p.m.
Extended Care is from 8:00 a.m. - 9:00 a.m. and 4:30 p.m. - 5:30 p.m.

COST \$535 per child for all six weeks (June 21 - July 30)

OR

\$105 per week's enrollment

Lunch is **NOT** provided except for weekly cookouts.

Scholarship assistance is available to families who qualify. Scholarship applications are due Friday, May 7th.

Call (415) 781-0401 ext. 124 for more information.

TO REGISTER Mail or submit in person completed Registration Form along with payment to:

CAMERON HOUSE, Ventures 2010
920 Sacramento Street
San Francisco, CA 94108

Please complete one registration form per child.

Payment may be made by check, credit card, or cash. Checks should be made payable to "**Donaldina Cameron House**". Please indicate your child's name on the check.

CHECK-IN / CHECK-OUT **Cameron House** (Chinatown) 920 Sacramento St. (between Stockton & Powell Sts)
Covenant Presbyterian Church (Sunset District) 321 Taraval Street (at Funston)
Lincoln Park Presbyterian Church (Richmond District) 417 31st Avenue (at Clement)

For all sites, CHECK-IN is 8:00 a.m. – 9:00 a.m. and SIGN-OUT is 4:30 p.m. – 5:30 p.m.

Pick-up after 5:30 p.m. is subject to a late pick-up fee of \$1.00 per minute.

For your safety, Cameron Ventures follows a strict system for check-in and check-out. Please help us by instructing your child to check-in and check-out with our designated supervisors. You can also help us by making sure your child knows which site they will be picked up from in the afternoons.

Questions? Contact Cameron House (415) 781-0401 ext. 124 or email youthministries@cameronhouse.org

Cameron House is a 501(c)(3) organization. Tax Identification Number 94-1618605.

Cameron Ventures 2010

Program Overview

For over 55 years, Cameron Ventures has provided children with safe and rewarding summer experiences! Campers will be challenged to increase their mental, physical, spiritual, and social skills through games, songs, field trips, devotions, cookouts, arts & crafts, and other exciting educational and recreational activities.

1st through 5th grade children will learn how to have fun safely in the outdoors, how to appreciate and feel comfortable with nature, and how to get along with other children their own age in a cooperative group environment. We help children relate to their peers in a healthy way and provide experiences that form a foundation for lasting friendships. This positive outdoor experience shows them that they can have fun without television or video games.

Participants will take part in weekly field trips and cookouts. Newsletters will be distributed weekly so that you can read about what your child did the week before and what they can look forward to the following week.

SAVE THE DATE!!!

Elementary School Programs Family Night on Wednesday, July 28th! See you there!

CAMERON VENTURES 2010
Registration Form - Complete One Form Per Child (Please Print Legibly)

LAST NAME	FIRST NAME	MI	MALE (circle one)	FEMALE (circle one)
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ADDRESS	CITY	STATE	ZIP CODE
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HOME PHONE NUMBER (with area code)	DATE OF BIRTH (Month/Day/Year)
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GRADE IN FALL 2010	SCHOOL
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MOTHER'S / GUARDIAN'S NAME	Work Phone	Cell Phone	E-mail
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FATHER'S / GUARDIAN'S NAME	Work Phone	Cell Phone	E-mail
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BROTHERS OR SISTERS ENROLLING IN CAMERON HOUSE 2010 SUMMER PROGRAMS

NAME	PROGRAM	GRADE IN FALL 2010
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NAME	PROGRAM	GRADE IN FALL 2010
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ENROLLMENT: PLEASE CHECK THE APPROPRIATE BOXES (NOTE: NO PROGRAM MONDAY, JULY 5TH)

COST \$535 per child for enrolling in all six weeks (June 21 - July 30 , 2010)
 \$105 per weeks' enrollment (please check the appropriate weeks below) # of weeks ____ x \$105 = ____

Week 1 6/21 - 6/25	Week 2 6/28 - 7/2	Week 3 7/6 - 7/9	Week 4 7/12 - 7/16	Week 5 7/19 - 7/23	Week 6 7/26 - 7/30
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Payment may be made by check, credit card, or cash. Checks should be made payable to **DONALDINA CAMERON HOUSE**. Please indicate your child's name on the check.

EMERGENCY MEDICAL INFORMATION AND RELEASE

MEDICAL INSURANCE NAME AND POLICY NUMBER

PHYSICIAN NAME AND PHONE NUMBER

PLEASE LIST ANY FOOD OR MEDICINES YOUR CHILD IS ALLERGIC TO, ANY MEDICATION YOUR CHILD IS TAKING, OR ANY OTHER SPECIAL HEALTH CONDITIONS OR BEHAVIORAL ISSUES OUR STAFF SHOULD BE AWARE OF.

IN CASE OF EMERGENCY, PLEASE CONTACT:

NAME	RELATIONSHIP	HOME / WORK / CELL PHONE (include area code)
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NAME	RELATIONSHIP	HOME / WORK / CELL PHONE (include area code)
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In case of emergency, I hereby give permission to the Cameron House staff and / or leaders to use their best judgment in seeking professional medical care if deemed necessary for the participant named on this form. I also understand that Cameron House staff, leaders, or participants will not be held liable for accidental injuries and / or illness that occur during any Cameron House activity.

SIGNATURE of PARENT or GUARDIAN _____ **DATE** _____

OFFICE USE ONLY

CASH CC CHECK # _____ AMOUNT _____ DATE _____ INITIALS _____

SCHOLARSHIP APPLICATION: DATE RECEIVED: _____ AMT GIVEN: _____

APP COMP. _____ MON SUB _____ CONF LET _____

(PLEASE COMPLETE AND SIGN THE REVERSE SIDE)

CAMERON VENTURES 2010 – Registration Form

LAST NAME	FIRST NAME	MI	MALE	FEMALE	GRADE IN FALL 2010
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CHECK – IN / CHECK – OUT

MORNING DROP-OFF (8:00 A.M. – 9:00 A.M.)

My child will be dropped off at (please check one):

- Cameron House
920 Sacramento St.
 Covenant Presbyterian Church
321 Taraval St.
 Lincoln Park Presbyterian Church
417 – 31st Avenue

AFTERNOON PICK-UP (4:30 P.M. – 5:30 P.M.)

My child will be picked up at (please check one):

- Cameron House
920 Sacramento St.
 Covenant Presbyterian Church
321 Taraval St.
 Lincoln Park Presbyterian Church
417 – 31st Avenue

Please be prompt in dropping off and picking up your child. **After 5:30 p.m., a late pick-up fee will be charged: \$1.00 per minute.** This fee will be used to compensate the site supervisor for the additional time to supervise your child.

My child (please choose one of the following options):

may go straight home on his / her own after reaching the afternoon pick-up site as indicated above.

will be picked up from the afternoon pick-up site indicated above at the end of each day.

Approx. pick-up time _____ p.m.

Picked up by _____ Relationship _____

Picked up by _____ Relationship _____

For your child’s safety, please help us by reminding your child to sign-in and sign-out with our designated supervisors each day.

If there is an occasion where your child must leave early or will be picked up by someone other than the names designated on this form, please send a note with your child. Include instructions and a phone number where you can be reached in the event the designated supervisor has any questions.

I have read and understand all of the above “check-in” and “check-out” information.

SIGNATURE of PARENT or GUARDIAN

DATE

MEDIA RELEASE

My child has permission to be filmed or photographed at Cameron House or off-site as a participant of Cameron Ventures, Bilingual Summer Youth Program and / or Solid Ground Program for publicity / educational purposes. I understand that no compensation will be provided.

YES NO

SIGNATURE of PARENT or GUARDIAN

DATE

Please complete the information below if applying for financial assistance.

Please circle the number of persons living in your household:

2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons
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Please circle your household annual income level:

\$24,450	\$27,500	\$30,550	\$33,000	\$35,450	\$37,850	\$40,300
\$40,700	\$45,800	\$50,900	\$54,950	\$59,050	\$63,100	\$67,200
\$65,150+	\$73,300+	\$81,450+	\$87,950+	\$94,450+	\$101,000+	\$107,500

(PLEASE COMPLETE AND SIGN THE REVERSE SIDE.)