

2018 SUMMER SCHOOL & SUMMER ENRICHMENT PROGRAMS for K - 8th



Student: _____

Grade Recently Completed: _____

May 29th - June 29th

Check all that apply

<p><u>All Day: Tue, Wed, Thur</u> 8am - 3pm Tuesday, Wednesday, Thursday <i>Lunch is Provided</i> Transportation Provided from in-district daycares only! (Morning pickup and afternoon dropoffs)</p> <p>Summer School 8am - 11:30am Lunch 11:30am - 12:30pm Enrichment 12:30pm - 3pm</p> <p><u>Enrichment Programming provided by:</u> Iowa State Extension Jackson County Conservation Maquoketa YMCA Any Many Others!</p> <p><u>Program Meets on:</u> May 29, 30, 31. June 5, 6, 7, 12, 13, 14, 19, 20, 21, 26, 27, 28</p>	<p><u>Half Day: Mon. & Fri</u></p> <p><u>ENRICHMENT PROGRAMS:</u></p> <p><u>Mondays: 8am - NOON</u> June 4th, 11th, 18th, 25th</p> <p><u>Fridays: 8am - NOON</u> June 1st, 8th, 15th, 22nd, 29th</p> <p>*Each Monday and Friday will be a different adventure as we get out and explore Jackson County and the surrounding area! Swimming at the YMCA, Grand Harbor, Kayaking, River Museum, Mines of Spain, Matter Adventure Lab, Helium Jump Park, and more!</p> <p><i>Transportation not provided to and from school on Mon. & Fri</i></p>	<p><u>Attending:</u> *Check all that apply!</p> <p><u>Tues, Wed, Thur</u></p> <p><input type="checkbox"/> All Day (8am - 3:00pm) OR <input type="checkbox"/> Morning (8am - 11:30am) <input type="checkbox"/> Afternoon (11:30am -3:00pm)</p> <p><u>Monday Enrichments</u></p> <p><input type="checkbox"/> 8am - Noon</p> <p><u>Friday Enrichment</u></p> <p><input type="checkbox"/> 8am - Noon</p>
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SUMMER LEADERSHIP ACADEMY:

August 16th, 17th, 20th, 21st, 22nd: 8am - 12pm

The Leadership Academy will provide students with an opportunity to review the 7 Habits in fun and engaging ways. Students will also begin to make plans on how they can integrate the Habits into their everyday experiences at Andrew. Students will be able to develop leadership roles, plan the first assembly of the school year, participate in a service project and plan future service projects. This is a wonderful opportunity for your student to demonstrate leadership skills and implement their ideas before the school year even begins!



I would like to participate in the LEADERSHIP ACADEMY!

Parent / Guardian Contact Form

All participants must be checked out with the program supervisor when parents/guardians arrive if being picked up.

Parent / Guardian name(s) _____

Home Phone _____ Cell Phone _____

Emergency Contact _____

_____ Please check here if your child may walk home after the session.

_____ Please check here if your child has food allergies. You will be contacted to learn more.

Volunteers

_____ Please check here if you are interested in helping with programs in anyway.

Name _____

Phone _____ Email: _____

WAIVER AND RELEASE OF LIABILITY

The undersigned parents of our child, _____ [insert name of child], hereby give permission to participate in the following program/activity sponsored by the Andrew Community School District:

Andrew Community Schools: After School Programs

We hereby release, waive and forever discharge Andrew Community School District, and its officers, agents, employees and representatives, from any and all claims or liability for bodily injury or death, on our behalf and on behalf of our child, arising out of our child's participation in the above-described program/activity, including, but not limited to, claims for medical expenses, loss of services, companionship, society and lost wages.

I hereby certify that I am of lawful age (18 years or older) and otherwise legally competent and authorized to sign this release and waiver. In signing this release and waiver we acknowledge reading the foregoing release and waiver and have voluntarily signed it on behalf of ourselves and our child.

Dated: _____

Signature of Parent/ Guardian: _____

Printed Name: _____

Photo Release

Andrew CSD, the Community Foundation of Jackson County and the Community Foundation of Greater Dubuque, sometimes collect images of children they serve in order to publicize their programs. By signing this form, unless otherwise noted, you agree that your child may be photographed, filmed, and/or voice recorded in any format (collectively called "Recordings") and that SCHOOL DISTRICT, the Community Foundation of Jackson County and the Community Foundation of Greater Dubuque, will own and may use such recordings in any format without compensation to your child or your child's parents or guardians

Dated: _____

Signature of Parent/ Guardian: _____

Printed Name: _____