

2021 XL LAKE NONA SUMMER CAMP

ENROLLMENT FORMS



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AT XL SUMMER CAMP WE PRIDE OURSELVES ON BEING..

SAFE
ACCOMODATING
AFFORDABLE
ENGAGING

2021 SUMMER CAMP REGISTRATION CHECKLIST

PARENTS, PLEASE USE THIS CHECKLIST TO ENSURE THAT ALL CAMP PAPERWORK IS COMPLETED.

PLEASE KEEP A COPY OF ALL PAPERWORK FOR YOUR RECORDS.

_____ \$25 SUMMER CAMP MEMBERSHIP
_____ PAYMENT ENCLOSED OR _____ REGISTERED AND PAID THROUGH DASH

_____ ENROLLMENT CONTRACT FORM (2 PAGES)
IN ORDER TO ALLOW WEEKLY PAYMENTS TOWARDS CAMP. A CREDIT CARD **MUST** BE PROVIDED ON THE REGISTRATION OR SAVED ON YOUR DASH PROFILE. OTHERWISE, FULL PAYMENT WILL BE REQUIRED.

_____ HEALTH & WELLNESS RECORD FORMS (2 PAGES)

_____ A RECENT SMALL PHOTO OF YOUR CHILD
(YOU CAN ATTACH OR E-MAIL TO LAUREN@XLSPORTSWORLD.COM)
PLEASE INCLUDE NAME OF CHILD ON PICTURE OR IN THE EMAIL.

_____ IMMUNIZATION RECORDS (IF SUBMITTED PRIOR TO 2020 OR A NEW CAMPER)

_____ AUTHORIZATION FOR CHILD RELEASE

_____ BEHAVIOR MANAGEMENT POLICY

ALL AGES - ENROLLMENT CONTRACT XL LAKE NONA
PAGE 1 OF 2 (ONE FORM PER CAMPER REQUIRED)

CHILD'S NAME: _____

GRADE AS OF JANUARY 2021: _____

PLEASE PUT AN X IN THE BOXES OF ANY DATES, FIELD TRIPS OR SWIMMING TRIPS YOU WOULD LIKE TO RESERVE.

Dates	Monday	Tuesday	Wednesday	Thursday	TRY IT Friday's
5/26 - 5/28			€ May 26th	€ May 27th	€ May 28th CANVAS PAINTING
5/31 - 6/4	€ May 31st MATH PROGRAM	€ June 1st	€ June 2nd LEARN SPANISH	€ June 3rd	€ June 4th BREAK DANCING
6/7 - 6/11	€ June 7th CODING CLASS	€ June 8th	€ June 9th LEARN SPANISH	€ June 10th	€ June 11th COOKING CLASS
6/14 - 6/18	€ June 14th	€ June 15th	€ June 16th LEARN SPANISH	€ June 17th	€ June 18th VOLLEYBALL CLASS
6/21 - 6/25	€ June 21st CODING CLASS	€ June 22nd	€ June 23rd LEARN SPANISH	€ June 24th	€ June 25th TIE DYING
6/28 - 7/2	€ June 28th MATH PROGRAM	€ June 29th	€ June 30th LEARN SPANISH	€ July 1st	€ July 2nd SCIENCE EXPERIMENTS
7/5 - 7/9	€ July 5th CODING CLASS	€ July 6th	€ July 7th LEARN SPANISH	€ July 8th	€ July 9th TALENT SHOW
7/12 - 7/16	€ July 12th MATH PROGRAM	€ July 13th	€ July 14th LEARN SPANISH	€ July 15th	€ July 16th OLYMPIC SPORTS
7/19 - 7/23	€ July 19th CODING CLASS	€ July 20th	€ July 21st LEARN SPANISH	€ July 22nd	€ July 23rd MAGIC LESSONS
7/26 - 7/30	€ July 26th MATH PROGRAM	€ July 27th	€ July 28th LEARN SPANISH	€ July 29th	€ July 30th COLOR WARS
8/2 - 8/6	€ August 2nd CODING CLASS	€ August 3rd	€ August 4th LEARN SPANISH	€ August 5th	€ August 6th MOVIE ON FIELD
8/9					

REMINDER: ALL FIELD TRIPS MUST BE PAID FOR NO LESS THAN 2 WEEKS BEFORE THE TRIP DAY.

Camp Enrollment Contract - Page 2 of 2 (One form per camper required)

Childs Name: _____ Grade as of January 2021: _____

Email: _____ Phone: _____

Credit Card #: _____ Expiration: _____ CVV: _____

Is this Credit Card # different than siblings? Y / N

To enroll your child in the XL Summer Camp, put an X in the box to indicate each day you would like to enroll. You will be notified if any days you have selected are unavailable when we process your contract. To reserve your days/weeks, you MUST include your credit card information or pay for all tuition and field trips in full at the time of enrollment.

We are unable to hold your dates without CC or payment in full. You have the option of paying weekly by cash, check or we will automatically run your credit card each Wednesday for the following week.

Camp Enrollment Policies: (Please make all checks payable to: XL SOCCER WORLD LAKE NONA)

- **Due to current COVID-19 precautions, there are NO WALK INS (ON THE DAY REGISTRATIONS) PERMITTED**
- **THE DEADLINE TO REGISTER FOR THE NEXT WEEK IS FRIDAY AT MIDNIGHT. A late registration fee will be charged for registrations Saturday-Sunday for the following week.**
- Daily rate for campers: \$80/day (Full), \$50/day (Half)
- For those that register for multiple weeks, a payment plan is available. Parents will register for the required weeks and each week, a portion of the total invoice will be charged automatically. For this convenience, a credit card MUST be sorted on file. Your card will be charged each Wednesday by 9:00AM for the following camp week.
- **You are responsible to pay for all days selected on your Enrollment Contract. There are no refunds, cancellations, substitutions, make up days or credits on enrollments. If your child is absent for any reason, other than illness, you will not receive a refund or credit for that day. Illness requires a Dr. Note and will be applied as credit to be used for another camp day only.**
- Payment in the amount of \$30 will be charged to your account for all checks that are returned for any reason.
- A \$25 late fee will be charged to your account if payment is not received by 9:00AM on Wednesday for the following week's camp tuition. This applies to credit card payments that are denied. If your credit card payment does not go through, you will be charged a late fee.
- Payment for all field trips, is due NO LATER THAN 2 WEEKS BEFORE THE TRIP DATE. We will automatically run your credit card on file for any unpaid field trips.
- Campers must be enrolled in camp for the FULL day to attend a field or swim trip.
- **There are no refunds, credits, substitutions, or cancellations of any field trips for any reason.**
- Campers that are removed from camp for any reason will not be refunded for tuition for the camp week in which the incident occurred. Campers that are removed from camp for any reason will not be refunded for any field trips that have been paid in advance.
- Any photos/video footage taken while your child is at camp may be used for promotional purposes in print media and/or internet promotion. No financial compensation is available should such a picture/video be used.
- Please make a copy of your Enrollment Contract(s) to keep for your records. A copy with your phone works best so your schedule is readily available

PARENT/GUARDIAN AGREEMENT:

I, the parent/guardian of _____ have read the above Camp Enrollment Contract which shall become my obligation to XL SOCCER WORLD - LAKE NONA. I fully understand this obligation and the reasons for its implementation. By signing below, I am indicating that I have read and agree to abide by all policies listed in the Parent Handbook and Camp Enrollment Contract.

Parent/Guardian Signature: _____ Date: _____

HEALTH AND WELLNESS – Page 1 of 2 (One form per camper required)

--Camper Information--

Child's Name: _____ Boy/Girl _____

D/O/B: _____ Grade as of January 2021: _____

Home Address: _____ City/Zip: _____

____ Returning Camper ____ New Camper ____ Sibling of Returning Camper

Camper's Shirt Size (circle one): YS YM YL AS AM AL AXL

Child Lives With: ____ Both Parents ____ Mother ____ Father ____ Other

If other, please explain: _____

Referred by: _____ (Must be listed at time of Enrollment)

How did you hear about our camp? _____

Please include a photo of your child for our records. You may also email a photo.

(PLEASE INCLUDE CAMPER'S NAME ON THE BACK OF PHOTO)

--Parent/Guardian Information--

Parent/Guardian (1) Name: _____ Home #: _____

Home Address: _____ City/Zip: _____

Work #: _____ Ext.: _____ Cell#: _____

Email: _____ (This email will receive all camp information and notices)

Parent/Guardian (2) Name: _____ Home #: _____

Home Address: _____ City/Zip: _____

Work #: _____ Ext.: _____ Cell#: _____

Email: _____ (This email will receive all camp information and notices)

Please answer all the questions (1-5) below (Use additional paper if necessary)

- What does your child like to do in his/her free time?

- Describe how your child interacts with his/her peers: _____
- Have there been any major changes in your family situation in the past year (family move, separation, divorce, death, new school, birth, etc.) If so, what effect did this have on your child?

- Is your child or family receiving any special help with emotional concerns or behavior at school or home? (Psychiatrist, counselor, social worker, etc.)

If so, please explain. (Use additional sheet if necessary) _____
- Is there anything else you would like us to know about your child that will aide us in helping him/her have a safe and enjoyable summer? Any specific concerns about your child? (Use additional sheet if necessary) _____

HEALTH AND WELLNESS – Page 2 of 2 (One form per camper required)

Please Answer All Boxes (1-10) Below (Use additional paper if necessary)

1	In the event of an emergency, please have an ambulance take my child to: _____
2	<p>Has your child been identified as needing support or supplemental services during the school year in any of the following areas?</p> <p>Please check all that apply: <input type="checkbox"/> Academic <input type="checkbox"/> Behavioral (i.e. ADD/ADHD)</p> <p style="padding-left: 150px;"><input type="checkbox"/> Speech/ Language <input type="checkbox"/> Personal/Social</p> <p>Please describe the nature of these services: _____</p>

3 Does your child have an EpiPen? <input type="checkbox"/> YES <input type="checkbox"/> NO	4 Does your child use an inhaler? <input type="checkbox"/> YES <input type="checkbox"/> NO
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5	<p>ALLERGIES: Is your child allergic to any medications, animals or insect stings? If so, please explain:</p> <p>_____</p> <p>_____</p> <p>FOOD ALLERGIES: All campers that have food allergies will be seated at a table designated for food allergies. Please list any/all foods that your child is allergic to. Any items listed here will not be given to your child in any form.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Please list any foods that you do not wish your child to have: _____</p>
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6	Does your child take any daily medications? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list the medication and dosage: _____
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7	Does your child have any medical/physical restrictions? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please explain: _____
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8	<p>Does your child suffer from any of the following?</p> <p style="text-align: center;"><input type="checkbox"/> Asthma <input type="checkbox"/> Hearing Loss <input type="checkbox"/> Diabetes <input type="checkbox"/> Convulsions <input type="checkbox"/> Other</p> <p>If other, please explain: _____</p>
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I certify that the health history information provided on this form is correct. My child has permission to engage in all camp activities and be transported to and from field trips that I have selected for him/her. If I cannot be reached in an emergency, I give permission to the physician selected by the camp to hospitalize and secure proper treatment for my child as named above. I will notify the Camp Director if there are any changes to my child's medical information in writing.

Parent/Guardian Signature: _____ **Date:** _____

AUTHORIZATION FOR CHILD RELEASE

Child's Name: _____ Grade as of January 2021: _____

Child's Name: _____ Grade as of January 2021: _____

Child's Name: _____ Grade as of January 2021: _____

Child's Name: _____ Grade as of January 2021: _____

In addition to the parents listed on the Health and Wellness form, XL Summer Camp requires that parents/guardians provide a list of authorized persons who may pick up their child from XL Summer Camp. The names of all authorized persons must be on file with the Camp Office prior to your child's attendance. Only authorized persons will be permitted to pick up children from the camp. To make changes to this form you may do so by emailing the Camp Administrator. Please make sure that any person (including parents) picking up your child always has proof of identification. Any changes/additions to this list MUST be done in writing.

PLEASE NOTE: Under no circumstances will we release campers to anyone who is not listed below.

I authorize the following individuals to pick up my child from XL Summer Camp:

Name: _____ Relationship: _____

Home/Work #1: _____ Cell #2: _____

Name: _____ Relationship: _____

Home/Work #1: _____ Cell #2: _____

Name: _____ Relationship: _____

Home/Work #1: _____ Cell #2: _____

Name: _____ Relationship: _____

Home/Work #1: _____ Cell #2: _____

Name: _____ Relationship: _____

Home/Work #1: _____ Cell #2: _____

Name: _____ Relationship: _____

Home/Work #1: _____ Cell #2: _____

PARENT/GUARDIAN AGREES TO:

I understand and agree that XL Summer Camp's staff may release my child at the end of the day only to the above-named individuals. I also understand that no one will be permitted to pick up my child without identification.

Parent/Guardian Signature: _____ Date: _____

BEHAVIOR MANAGEMENT POLICY
(One form per camp family)

Child's Name: _____ Grade as of January 2021: _____

Child's Name: _____ Grade as of January 2021: _____

Child's Name: _____ Grade as of January 2021: _____

Child's Name: _____ Grade as of January 2021: _____

The XL Summer Camp wants all our campers to have a rewarding and memorable experience. For this to take place, there are a few rules campers are expected to follow. Please review the following rules and discipline measures with your child to ensure that he/she has a fun, positive, and most importantly, safe summer.

Camp Rules:

1. Be kind and respectful to yourself, others, and camp property.
2. Listen and follow directions.
3. Keep hands, feet, all other body parts, and objects to yourself.
4. Be responsible for your personal belongings always
5. Leave expensive toys/cell phone at home. We are not responsible for the loss or theft of these items.
6. If you have a problem always tell a counselor or a director immediately.
7. Adhere to COVID-19 rules and regulations

Camper Consequences:

1. Redirection of camper
2. Verbal warning or time-out
3. Visit to Camp Director and phone call home (Child will speak to parents at that time)
4. If a second phone call is necessary, the child may be suspended from camp.
5. Parent will be notified in writing of the date the child will be permitted to return to camp.
6. In the event of severe, consistent, or excessive failure to follow the rules, the camper will be suspended or removed from camp. Camper must be picked up within 1 hour of parent notification.
7. There are no refunds, credits, or substitutions for any days a child has been suspended from camp.
8. If the camper severely endangers the physical, mental, or emotional health of another individual, the camper will be expelled from the camp.
9. XL Summer Camp reserves the right to terminate a child's enrollment at our discretion.

PARENT/GUARDIAN AGREEMENT:

I, the undersigned, have carefully read and gone over the above rules and consequences with my child. I agree with the above policy and understand that in the event my child is suspended or expelled from camp for failure to follow the rules, I will not receive a refund for any camp monies for that time. If my child is removed from the camp for any reason, I will not receive a refund for that week or for any field trips paid in advance. My contract will be terminated at the end of the week that the camper was removed.

Parent/Guardian Signature: _____ Date: _____