



# Nyumburu Cultural Center CAMP SHULE



Summer 2011

**Registration will stay open until all slots are full.**

Availability ON A FIRST COME BASIC.

**(The information pages are A, B, & C and Registration pages are 1- 4)**

The Nyumburu Camp Shule (Shule-Swahili word meaning “School”)

Camp Shule combines fun, friendships, and adventure of camp with the excitement of intellectual inquiry and discovery. Participants: Coeducational and nondenominational, and six divisions:

<i>Pathfinders</i>	<i>K, &amp; 1<sup>st</sup></i>	<i>Graders</i>
<i>Warriors</i>	<i>2<sup>nd</sup>, &amp; 3<sup>rd</sup></i>	<i>Graders</i>
<i>Trailblazers</i>	<i>4<sup>th</sup> &amp; 5<sup>th</sup>,</i>	<i>Graders</i>
<i>Explorers</i>	<i>6<sup>th</sup>, &amp; 7<sup>th</sup>,</i>	<i>Graders</i>
<i>Pioneers</i>	<i>8<sup>th</sup>, &amp; 9<sup>th</sup></i>	<i>Graders</i>
<i>Navigators</i>	<i>9<sup>th</sup>, 10<sup>th</sup>, &amp; 11<sup>th</sup></i>	<i>Graders</i>

## BACKGROUND AND PHILOSOPHY

Camp Shule provides an opportunity for youth to explore academic, artistic, and athletic interests in a relaxed and creative environment. Camp Shule encourages a life-long love-of-learning with a combination of the best aspects of traditional camps—close friendships, activities, and adventure—with an element of intellectual inquiry and exploration. Camp Shule is based on the fundamental belief that children are good-decision makers, and make choices about their daily schedules which builds self-confidence, independence and maturity.

## PROGRAM OFFERINGS

Academic courses: **Reading, Math, & Writing** (Monday, Wednesday & Friday)

Enrichment courses offer “hands on workshops in a variety of subjects. Mini-courses are designed to enhance academic skills, and stimulate abilities in a fun setting environment. All of this offers skill base instruction in a variety of areas.

**Field Trips and Mini Workshops are Tuesday’s and Thursday’s.**

Mini Workshops include: Public Speaking, Drama, Music, Vocabulary, Stepping, Etiquette and Computer skills. Arts and Craft are offered for Kindergarten through 4<sup>th</sup> grade.

## DAILY SCHEDULE

Before care is 7:00am to 9:00am. Aftercare is 4:00pm to 6:00pm and is included in the Registration fee. The camp is in session for eight weeks from June 20, 2011 to August 12, 2011. Campers can be dropped off as early as 7:00am and picked up no later than 6:00p.m. Drop-off and pick-up will always take place at the Nyumburu Cultural Center. There will be a charge of \$1.00 per minute per child for pick-up after 6:00pm. Early arrival campers will watch videos, visit computer lab, and play games. The Camp planned curricular begins at 9:00am with Morning Affirmations. Monday, Wednesday, and Friday is spent in three academic courses. Lunch is 12pm to 12:45pm. Outdoor Recreation is 1pm to 2:30pm. Snack time is from 2:35 to 2:55pm. Academics with games 3:00pm to 3:55pm. Aftercare is 4:00pm to 6:00pm

**Please fax applications to:** Ms. Anne Reese Carswell, Camp Director (301) 314-0383-FAX  
You may call (301) 314-7759 or e-mail- carswell@umd.edu.

**NYUMBURU CULTURAL CENTER**  
**CAMP SHULE**  
(Summer 2011)

Meals

Nyumburu Cultural Center /Camp Shule will not be responsible for providing lunches or snacks for campers. Campers may bring their lunch and/or purchase their meals from the retailers in the Stamp Student Union. Campers may bring their breakfast to eat prior to 9:00am.

**Fees**

**NO Personal CHECKS**

**The total cost for the 8 weeks sessions per child is \$880.00.**

*Distribution is as follows:*

- Registration Fee-** Non-refundable **-\$80.00** required at time of Registration.
  - Tuition -** \$80.00 per week (8 weeks) - \$640.00 Availability ON A FIRST COME BASIC.  
50% refund after 1st week of camp. No refund after 2<sup>nd</sup> week of Camp.
  - Tee shirt- \$10.00.**
  - Field Trips-** Non-refundable - due by April 5, 2011, **\$150.00** to be paid in CASH.  
Receipts will be available.
- Money orders** are to be made payable to the **University of Maryland.**  
*Please put Camper name on Money Order*

**\*\* NO Personal CHECKS \*\***

**DO NOT Send Cash in Mail.**

Field Trips

There will be approximately 7 off-campus field trips and 9 on-campus outings and/or events (i.e. swimming, bowling, etc.). Total cost for Field trips which includes the transportation fee will be \$150.00.

(Please remember CASH only for Field Trips). Receipts will be available.

Tuition Payment may be made weekly or bi-weekly, by April 5, 2011.

Camp Tee shirt is required to be worn on *ALL Field Trips*.

Campers must bring their lunch on field trips days.

B.

**Nyumburu Cultural Center  
University of Maryland  
College Park, MD.**

*CAMP SHULE Important Information:*

1. Although forms can be faxed you must send or bring in the original (pages 1, 2, and 3).
2. Non-Maryland Students are required to complete pages 1, 2, 3, and 4.
3. **Page 2** should be notarized by at least one parent (If only one parent is going to be available for the Notary then only that parent or guardian should complete the Notary section).
4. **Parent Orientation Day Thursday, May 12, 2011 from 6:00pm to 7:00pm** in the Nyumburu Cultural Center Multipurpose Room –Univ. of Md. College Park, Md.
5. Please remember:
  - A. Dates for Camp: June 20, 2011 to August 12, 2011. (Depending on PG School SNOW decision)
  - B. Campers can be dropped off as early as 7:00am and pick-up no later than 6:00pm.
  - C. Campers should bring lunch or can purchase lunch in the Stamp Student Union.
  - D. Campers should bring a snack or bring money to get snack from the vending machine.
  - E. Campers will need a binder note book (\$1.00 at dollar store).
  - F. All field trips will be on Tuesdays and Thursdays, except for Camp Day at the Verizon Center.
  - G. Camp Tee Shirts are required to be worn on *ALL Field Trips*.
  - H. Campers **Presentation Ceremony** is Thursday, August 11, 2011 from 3:00pm to 5:00pm. Parents, Family, & Friends are invited. Refreshments will be served.
  - I. Grand Total for Camp Shule \$880.00 for 8 weeks. This includes everything except Lunch and Snack. No Personal Checks
  - J. You can start immediately making Tuition payments to the UNIVERSITY OF MARYLAND weekly or bi-weekly. Tuition which must be completed by **April 5, 2011**.

Mail Payments to:

Nyumburu Cultural Center  
Suite 1120-Nyumburu Bldg. #232  
University of Maryland  
College Park, Maryland 20742  
Attention: Anne Carswell

# NYUMBURU CAMP SHULE

## Registration Form

(Summer 2011)

Please Print

Camper's Name \_\_\_\_\_ Female \_\_\_\_\_ Male \_\_\_\_\_

Age \_\_\_ Grade going to in the (August 2011) \_\_\_\_\_ Birthdate \_\_\_\_\_

Name of last school attended \_\_\_\_\_ City & State \_\_\_\_\_

Name of Upcoming School for August 2011 \_\_\_\_\_ City & State \_\_\_\_\_

Home Address \_\_\_\_\_ Home# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mother Name \_\_\_\_\_ Father Name \_\_\_\_\_

Mother wk # \_\_\_\_\_ Father wk # \_\_\_\_\_

Mother (cell) \_\_\_\_\_ Father (cell) \_\_\_\_\_

Mother e-mail \_\_\_\_\_ Father e-mail \_\_\_\_\_

Mother Place of Employment \_\_\_\_\_

Father Place of Employment \_\_\_\_\_

Emergency Person Name \_\_\_\_\_ Home # \_\_\_\_\_

Cell # \_\_\_\_\_ work # \_\_\_\_\_

Emergency person is a relative, neighbor, etc.? \_\_\_\_\_

Medical Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_

Special Request: \_\_\_\_\_

The above named Camper hereby applies for admission to Camp Shule. In applying to Camp Shule, the undersigned agrees to abide by Camp regulations. I hereby consent to the participation of my child in the activities of the Camp during the current camp session, except for the following (if any): Also note any special needs or limitations:

\_\_\_\_\_  
Parent/Guardian Signature(s)

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

NYUMBURU CAMP SHULE  
Summer 2011  
**EMERGENCY MEDICAL CONSENT FORM**

Date: \_\_\_\_\_

If my child, \_\_\_\_\_, born \_\_\_\_\_ becomes ill or involved in an accident and I cannot be contacted, I hereby give my consent to the Camp Shule staff to take my child for emergency medical treatment. I give permission for qualified medical administrators to administer diagnostic and therapeutic procedures deemed necessary for the well being of my son/daughter. I also agree to present information concerning his/her medical condition to other responsible University Officials when required. No major operation will be performed, except in extreme emergency, without parents being contacted and fully informed.

Physician: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Hospital Affiliation: \_\_\_\_\_

(A child may be taken to the nearest hospital emergency room or to the one that is least crowded.)

Health Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

**Child's Known Allergies:** \_\_\_\_\_

(Including medications)

**Child's Ongoing Medications:** \_\_\_\_\_

**Child's Known Physical Conditions:** \_\_\_\_\_

In the case of such an emergency, I can be reached at: \_\_\_\_\_

SIGNATURES MUST BE NOTARIZED by at least one Parent or Guardian

\_\_\_\_\_  
(PARENT OR GUARDIAN)

\_\_\_\_\_  
(PARENT OR GUARDIAN)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State      Zip

\_\_\_\_\_  
City                      State      Zip

\_\_\_\_\_  
(Work Phone)

\_\_\_\_\_  
(Work Phone)

\_\_\_\_\_  
(Home Phone)

\_\_\_\_\_  
(Home Phone)

# Nyumburu Camp Shule

University of Maryland  
Summer 2011

## PARENT AUTHORIZATION FOR CHILD PICK-UP

**CHILD'S NAME:** \_\_\_\_\_

Please PRINT

Parent	Relationship	City/State	work #	Cell#
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Parent	Relationship	City/State	work #	Cell#
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I authorize the following person (s) to pick up my child from Nyumburu Camp Shule

I understand that it is my responsibility to inform the camp of any changes related to this authorization.

Complete all Five.

Authorized Person	Relationship	City/State	Work #	Home #
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

- Please inform authorized persons that they must show identification to pick-up Camper.
- If anyone other than the Parent is to pick-up the Camper, please telephone well in advance.
- There will be a charge of \$ 1.00 per minute per Camper for pick-up after 6:00pm.
- Please be advised that Camp Shule has the right to dismiss a Camper and request immediate pick-up at any time during the entire camp. Camp Shule can also permanently excuse your child from the Camp for any unruly reason.

Parent or Guardian

\_\_\_\_\_

Date \_\_\_\_\_

**\*\*\*\*Must show ID to Pick-Up CAMPER\*\*\*\***

# NYUMBURU CAMP SHULE 2011

## Emergency Medical Consent Form

**\*\* NON-MARYLAND STUDENTS \*\***

Complete this part of the form if your child DOES NOT attend a public or private school in the state of Maryland.

(Signatures must be notarized)

Name \_\_\_\_\_

Name of School Camper attends \_\_\_\_\_

Parents/Guardians Name \_\_\_\_\_

Parents/Guardians Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Physician \_\_\_\_\_ Physician's Phone \_\_\_\_\_

Physician Address \_\_\_\_\_

Hospital Affiliation \_\_\_\_\_

(A child may be taken to the nearest hospital emergency room or to the room or to the one that is least crowded).

Health Insurance Company: \_\_\_\_\_ Policy No. \_\_\_\_\_

Date of Child's last Tetanus Immunization: \_\_\_\_\_

Child's Known Allergies (including medications) \_\_\_\_\_

Child's Ongoing Medications \_\_\_\_\_

Child's Known Physical Conditions \_\_\_\_\_

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Please attach the following medical immunization records to this form:

- Diphtheria
- Tetanus
- Pertussis
- Poliomyelitis
- Measles (Rubeola)
- Rubella (German Measles)
- Mumps

Parent/Guardian check these only if they apply:

- If there is a medical reason that your child is not, or is not able to be in compliance with the immunization requirements please include a letter from a licensed physician or a local health officer which indicates this.
- If you object to your child being immunized against any/all listed diseases upon the grounds that they conflict with your bona fide religious beliefs and practices we will provide you with the appropriate form requesting exemption from these requirements.