Nyumburu Cultural Center

CAMP SHULE

Summer 2009

(This is a seven page document)

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; four divisions—

<table>
<thead>
<tr>
<th>Group</th>
<th>Grade Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pathfinders</td>
<td>K, &amp; 1st graders</td>
</tr>
<tr>
<td>Warriors</td>
<td>2nd, &amp; 3rd graders</td>
</tr>
<tr>
<td>Trailblazers</td>
<td>4th &amp; 5th graders</td>
</tr>
<tr>
<td>Explorers</td>
<td>6th, &amp; 7th graders</td>
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<tr>
<td>Pioneers</td>
<td>8th graders</td>
</tr>
<tr>
<td>Navigators</td>
<td>9th, 10th &amp; 11th graders</td>
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</tbody>
</table>

**** These groups are susceptible to change due to the number of campers we get for each group.

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 making choices about their daily schedules builds self-confidence, independence and maturity.

PROGRAM OFFERINGS
Academic courses: Reading, Math, and Computer skills.
Enrichment courses offer “hands on workshops on a variety of subjects not normally part of any Elementary school curriculum. Mini-courses are designed to be fun and stimulating. Each group takes four workshops daily. Mini workshops offer skill-based instruction in a variety of areas. Workshops include: Art, Public Speaking, Drama, Music, Vocabulary, Stepping and Etiquette. Mini workshops are offered every day of the week.”

DAILY SCHEDULE
The camp will be in session for seven weeks from June 22, 2009 to August 7, 2009. Campers can be dropped off as early as 7:00am and picked up no later than 6:00pm. Drop-off and pick-up will always take place at 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 and play games. Camp activities will begin at 9:00am with morning affirmations with all campers. Morning is spent in three academic classes (except on days scheduled for field trips). Lunch & Play is 12pm to 2:45pm. Snack time is from 3:00pm to 3:30pm. Mini-workshops, reflective writing and free time will conclude the day.

Please fax applications to: Ms. Anne Reese Carswell, Camp Director 301-314-0383-FAX
You may call me at 301-314-7759 or e-mail- carswell@umd.edu.
NYUMBURU CULTURAL CENTER
CAMP SHULE
(Summer 2009)

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

The total cost for the 7 weeks sessions per child is $785.00.
Distribution is as follows:

- **Non-refundable Registration Fee** - $75.00 required at time of Registration Sat. February 21, 2009
- **Non-refundable Field Trips** -- due by Saturday, March 14, 2009. $150.00 to be paid in CASH.
- **Tuition** $80.00 per week (7 weeks) --- $560.00  **Deadline May 9, 2009**  no refunds after 2nd week.

Registration fee:  **$75.00** (non refundable) per child, **due by February 21, 2009** to secure position as a Camper. Camp fee is **$80.00** a week per camper. All checks or money orders are to be made payable to the **University of Maryland**.

**Full payments are due by May 9, 2009.**
*We hire our Camp Counselors based on the number of campers that are enrolled.*

*** $560.00 per child for seven weeks plus $75.00 registration fee, and $150.00 for Field trips and transportation per child= Total **$785.00**

Field Trips

There will be approximately 7 off-campus field trips and 7 on-campus outings and/or events (i.e. swimming, bowling, etc.). Total cost for field trips and transportation will be **$150.00**.

It is recommended that the Field Trip fee be paid at the Parent Orientation Session or you may visit the Center to make payment in advance. (Please remember CASH only for Field Trips). Receipts will be available.

Payment may be made weekly or bi-weekly, however the full **payment is required** no later than May 9, 2009.

Camp tee shirts must be worn on **ALL** Field Trips.

Campers **should** bring their lunch on field trips days.

*See page 7 for more details*
NYUMBURU CAMP SHULE
Registration Form
(Summer 2009)

Please Print
Camper’s Name____________________________ Female__________ Male________

Age___ School Grade going to (Fall 2009) _____________ Birthdate____________

Name of last school attended____________________ City & State__________________

Name of Upcoming School Fall 2009________________ 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______________________________

3.
NYUMBURU CAMP SHULE  
Summer 2009  
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

__________________________                                 ______________________
(PARENT OR GUARDIAN)                                        (PARENT OR GUARDIAN
___________________________                                  ____________________________
Address                                                                 Address
City                          State     Zip                                   City                          State       Zip
____________________________
(Work Phone)                                                        (Work Phone)
__________________________                   _____________________________
(Home Phone)                                                        (Home Phone)
PARENT AUTHORIZATION FOR CHILD PICK-UP

CHILD’S NAME: ________________________________________________________________

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 #
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 child 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 reason.

______________________________
Parent or Guardian

______________________________
Date

**** Camp Tee Shirts must be worn on all Field Trips. Child size ____ S - M - L - XL
Adult size ___ S - M - L - XL - 2X - 3X
(Please give both sizes if applicable)
NYUMBURU CAMP SHULE
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 _____________________________________

Please attach the following medical immunization records to this form:

- Diphtheria
- Tetanus
- Pertussis
- Poliomyelitis
- Measles (Rubula)
- 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.
Nyumburu Cultural Center, University of Maryland, College Park, MD.

Camp Shule Important Information:

1. **Checks** should **be made to the** University of Maryland **for Tuition for 7 weeks $560.00 by May 9, 2009**

2. A CASH payment for $75.00.00 non refundable Registration Fee **MUST** be paid to start the process **on February 21, 2009 10am to 12noon Nyumburu Cultural Center, University of MD.**

3. Field Trip Fees due no later by Saturday, **March 14, 2009** non refundable CASH ($150.00). **DO NOT Send Cash in Mail. Nyumburu open for payment 10am to 12 noon on March 10, 2009.**

4. Even though your forms can be faxed you must send or bring in the original (page 4, 5, & 6).

5. In additional to page 4, 5, & 6 pages 7 should be completed by Non-Maryland Students.

6. Page 5 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 that section) and sign.

7. Parent Orientation Day **Thursday, June 18, 2009 at 6:00pm** in the Nyumburu Cultural Center Multi-Purpose Room.


9. Campers can be dropped off as early as **7:00am** and pick-up no later than **6:00pm**.

10. Campers should bring lunch or buy lunch in the Stamp Student Union.

11. Campers should bring a snack or money to get a snack from the vending machine.

12. Campers will need a binder note book ($1.00 at dollar store).

13. Most field trips will be on Tuesdays and Thursdays.

14. Camp Tee Shirts must be worn on **ALL** Field Trips included in fee.

15. Campers Presentation Ceremony will be August 6th at 5:00pm. Parents, Family, & Friends are invited. **DINNER**

16. **Total Payment for 7 weeks $785.00 (including Field trips and Registration Fee)**

    Tuition 7 weeks $560.00 Check or Money Orders
    Registration Fee $75.00 Cash (non refundable) Field Trips $150.00 Cash (non refundable) = $785.00

17. You can start immediately making payments to the UNIVERSITY OF MARYLAND weekly or bi-weekly.

Mail Payments to:

Nyumburu Cultural Center
Suite 1120-Nyumburu Bldg. #232
University of Maryland
College Park, Maryland 20747
Attention: Anne Carswell