

LEAPSSPORTS.COM 225-665-7200

30113 EDEN CHURCH RD DENHAM SPRINGS

SUMMER CAMP 2021

AT LEAPS & BOUNDS SPORTS CENTER



CAMP UNPLUGGED

MAY 24TH-AUGUST 10TH



EARLY BIRD SIGN UP:
FEBRUARY 15TH-MARCH 13TH!

welcome!

This packet has been compiled to acquaint you with Leaps & Bounds Camp Unplugged and to explain the necessary procedures, fees, structure, and to answer some of your questions regarding your child attending our camp. Please retain this packet for future reference.

camp description

We offer an action-packed Summer Camp that rotates activities throughout the day. Our weekly schedule includes: morning theme parties, on-site swimming, tumbling, acrobatics, outdoor sports, cheerleading, active games, line dancing, arts and crafts.

camp costs

Registration Fee \$50 Deposit per week \$10	<i>Register Feb.15th - March 13th</i>	<i>Register March 15th—end of Summer</i>
Cost Per Child	Weekly Cost	
1st child	\$160/WK	\$170/WK
2nd child	\$152/WK	\$162/WK
The week of June 1st & Aug 9th will be prorated.		

Registration Fee and a weekly deposit of \$10 for each week is due upon registering. Registration Fees and camp deposits are **not refundable**.

- [1] On your registration form, you commit to the number of weeks you want for the summer. You will be billed for the entire amount that you select unless we receive a written 2 week drop notice from you.
- [2] Your credit card will be charged on the Thursday prior to the week of summer camp. If the credit card declines, there will be a \$10 decline fee.
- [3] If you would like to pay ahead, call the front desk or email janet@leapssports.com.
- [4] A WRITTEN drop notice must be given 2 weeks prior to your last day at camp. Any money paid and not used, not including the registration fee or deposit will be refunded to you. If there is not a drop notice turned into the office, you will be billed for the weeks remaining. This drop notice allows us to call another client to set up camp for them.

sign in and out procedure

Parents must come in each morning and sign their child into camp. Camp begins at 6:30 am. Please try to have your kids here by 8:30 am so that they can be here for the morning theme party and to know what activities are going on for the week. This also gives us time to review the rules with them and prepare them for the days events.

Carpool will now be in the back parking lot by the pool. Carpool will begin at 4:30. If you arrive **before 4:30** to pick your child up please pull up to the fence and call **225-243-6610 and we will bring your child out to you.**

Anytime **after 4:30** just place the car number you have been given in the driver side dash board of your vehicle. You may make copies for anyone else who will pick up your child. We will read the number and radio your child's counselor to send them to the back gate. You may be asked to pull through and circle around so we can get the next child to start coming to the front as well. This will work out faster than one person waiting for their child to finish what they are doing, gather their items, and head to the front. Please do not give our carpool worker a hard time, they will do everything they can to help keep things moving quickly.

apparel

Campers should come prepared for an active day. Your child must wear tennis shoes daily. We do a lot of running and flip flops, sandals, and slides are hazards. Pool shoes must be worn only to and from the pool. No dresses please, as we are often going upside down! Girls should have their hair in a ponytail and if a skirt is worn shorts must be worn underneath. Please make sure that they are dressed correctly. Hats are allowed, but we are not responsible for lost hats.

backpacks

Each camper will be responsible for providing their own backpack that they must keep with them throughout each day. These backpacks will hold everything the camper needs, water bottle, swim suit, towel, sun screen, etc. Please do not place bulky or unnecessary items in their backpacks. No blankets. We have lots of fun activities planned, so NO electronics or toys from home will be allowed. We will not be responsible for them.

swimming

Your child will swim 2x a week. Your child should bring swimwear everyday because we will also do water games as well. This includes swim suit, flip flops, towel, spray sunscreen, and ear plugs if necessary. These items need to fit in the backpack, so be sure to send only the necessities. Counselors will assist your child with applying spray sunscreen. **PLEASE PUT YOUR CHILD'S NAME ON EVERYTHING!**

We offer swimming lessons in addition to camp if your child needs to learn how to swim. Our pool is 4ft deep –5ft deep and is completely covered. Campers are supervised by CPR- WOW certified swimming staff.

If your child can not swim, please send a life vest. He/she will be required to wear a life vest.

medicine and illness

All medications MUST be left with the front desk office worker and documented on our Medication Dosage Form. Medication will NOT be administered on an “as needed” basis. All medication must have a prescription label and have specific instructions on the bottle. This includes any type of medication, including over the counter remedies such as aspirin or Tylenol. Prescription medications MUST be in the original container with the physician's name and dosage instructions included. No child will be allowed to carry any type of medication with him or her.

If your child is running a fever, do not send them to camp. Anyone with a fever must go home to prevent other children from becoming sick. If your child has a staph infection, lice, or other communicable ailment, do not send them to camp.

If you have medicine that you want to leave with us for the summer like asthma inhalers, or Epi pens it must be left with an office worker at the front desk.

lunch and snacks

Each child must bring their lunch and two snacks with drinks every day and bring a water bottle. Their lunches should be “ready to eat” and not require the use of a microwave or refrigerator. You may also put money in a concession account for your child and they can purchase a snack instead of bringing it from home. Campers can only buy snacks in the morning when they arrive and put them in their book sack.

items from home

Campers should not bring toys or any electronics from home. We have plenty of items to play with and extra items will not fit in their backpacks. We also can not be responsible for lost, stolen, or broken items. This includes trading cards and playing cards. We do a lot of jumping and playing and things can fall out of pockets. This goes for money as well.

For the younger campers, you can put an extra set of clothes in a ziplock bag with their name on it and leave it for the summer. This is optional.

field trips

At this time all field trips will be done “in house”. We will have vendors and activities brought in for the children.



Leaps & Bounds Summer Camp

Car # : _____

Grade Entering _____



Information Sheet

Must be 5 by start of camp

Please use a separate form for each camper.

Child's Name _____ Sex _____ Date of Birth _____ Age: _____

Guardian Name: _____ Cell: _____ Relationship: _____

Email Address: _____ Employer: _____ Wk Phone: _____

Home Address: _____ City _____ Zip Code _____

Guardian Name: _____ Cell: _____ Relationship: _____

Email Address: _____ Employer: _____ Wk Phone: _____

Home Address: _____ City _____ Zip Code _____

Person with whom the child lives with: _____

Emergency Contact: _____ Phone: _____

Child's Doctor: _____ Doctor's Phone: _____

Does your child have any food/other allergies? No Yes, _____

Does your child have any medical, physical or mental conditions? No Yes _____

Will we need to administer medication during the day? No Yes, _____

Swimming

The pools at Leaps & Bounds are 4ft deep -5ft deep. If your child can not swim or touch the bottom of the pool, he or she will be required to wear a life vest. It is your responsibility to provide a life vest. Arm floaties will not be allowed.

My child needs a life vest in order to swim. (circle one) YES NO

My child has permission to be released to the following individuals, child care facilities, or transportation services in addition to emergency contact person listed above. (Please notify these individuals that they may be asked to show proof of identity.)

Name: _____ Relationship: _____ Phone# _____

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Leaps & Bounds Summer 2021 Week Selections

(Initial the weeks that your child will be attending)

Child's Name _____

- _____ Wk 1 May 24-28
- _____ Wk 2 June 1 - 4*
- _____ Wk 3 June 7-11
- _____ Wk 4 June 14-18
- _____ Wk 5 June 21-25
- _____ Wk 6 June 28– July 2
- _____ Wk 7 July 5-9
- _____ Wk 8 July 12-16
- _____ Wk 9 July 19-23
- _____ Wk 10 July 26-30
- _____ Wk 11 Aug 2-6
- _____ Wk 12 Aug-9-10*

Camp Costs:

Registration Fee: \$50 +\$10 per week deposit

Weekly Camp Cost: After March 13th
1st Child: \$160/week 1st Child: \$170/week
2nd Child: \$152/week 2nd Child: \$162/week

Weeks 2 & 12 will be prorated.

A family discount of \$8 off per child applies to the 2nd and 3rd child attending camp during the same week. There will be no discounts for different weeks attended.

By signing your child up for Leaps & Bounds Camp Unplugged, you are agreeing to take care of all financial responsibilities. The following statements outline each of these responsibilities. Please carefully read each item and put your initials in the blanks provided.

- I understand that I will be responsible for the entire amount of Summer Camp that I have selected. If for any reason I must drop out of Summer Camp, I understand that I will be billed for the remaining weeks I selected. A **two week** drop notice will relieve me of any future payments once the final 2 weeks have been fulfilled. Any money paid, not including the registration fee and weekly deposits will be refunded to me.
- I understand that my registration fee and weekly deposits will not be refunded for any reason.
- For weekly payments, I understand that my credit card will be charged on the Thursday prior to the week of camp attended. I understand that if the credit card does not go through, a \$10 late fee will be assessed.

Please read and sign. I have read and understand all of the above statements. I agree to pay for any and all of the above items that are applicable to me.

Signature: _____ Date: _____

Assumption of Risk & Medical Authorization

As a legal guardian of _____, hereafter, child(ren), I recognize the severe injuries including permanent paralysis or death can occur in sports or activities involving height or motion, those activities including but not limited to martial arts, dance, gymnastics, tumbling, trampoline, cheerleading, ball sports and swimming. In addition, I recognize that swimming or any activities around water can result in brain damage or drowning. I am also aware that participation in day camp involves transportation to and from various field trips and as a result my child could be injured or killed in an accident. Being fully aware of these dangers, I voluntarily give consent to the aforementioned person(s) participating in all Leaps & Bounds Sports Center programs and activities and **I ACCEPT ALL RISKS** associated with that participation.

In the event of an accident or emergency I would like the above mentioned child(ren) to be taken to a hospital for medical treatment and I hold Leaps & Bounds Sports Center and its representatives harmless in their execution of this action.

I have read and understand the Assumption of Risk and Medical Authorization and I voluntarily affix my name in agreement.

Parent/Legal Guardian's Signature _____ Date _____

MARKETING QUESTIONS:

How did you learn about Leaps & Bounds? _____

I am aware that individual and group photos/videos are taken throughout camp and that my child's picture may appear in LBSC publicity or advertising and by my initials I hereby grant my permission to use these photos or videos. _____

I have chosen _____ # of weeks. My registration fee, plus deposit is _____.
My cost per week is _____. With the exception of weeks 2 & 12, which will be prorated.

Credit Card Authorization	Electronic Funds Transfer Authorization
Credit Card type* _____ Exp. Date* _____ CCV# _____ Credit Card Number* _____ _____ Cardholder's Name* _____ Billing Address of Cardholder* (street, city, state, zip) _____	Complete or attach blank VOIDED check Financial Institution* _____ Branch* _____ City* _____ State* _____ Zip Code* _____ Transit/ABA* No. _____ Account No.* _____
**This authorization is to remain in full force and effect until Leaps & Bounds Sports Center has received written notification of its termination in such time and in such manner as to afford Leaps & Bounds a reasonable opportunity to act on it or until the term of authorization expires. Authorizing Signature* _____ Date* _____ Print Name* _____ Date of Birth _____	