

Keeping History Alive

Kalona Historical Society

2021 Summer Day Camp Registration

June 14 - 19 (M - Th)

Morning 9:00 - 12:00

Grades completed

K, 1, 2

Afternoon 1:00 - 4:00

Grades completed

3, 4, 5

June 21 -24 (M - Th)

Morning 9:00 - 12:00

Grades completed

3, 4, 5

Afternoon 1:00 - 4:00

Grades completed

K, 1, 2

June 28 - July 1 (M - Th)

Morning 9:00 - 12:00

Grades completed

K, 1, 2

Afternoon 1:00 - 4:00

Grades completed

3, 4, 5

First choice of session dates (circle one) **June 14 - 19** **June 21 - 24** **June 28 - July 1**

Second choice of session dates (circle one) **June 14 - 19** **June 21 - 24** **June 28 - July 1**

Camper's Name: _____ Grade completed (please circle) **K 1 2 3 4 5**

Students in the same grade will be grouped together. Grade levels may be combined at the discretion of the camp director.

Parent/Guardian(s) Name: _____

Parent/Guardian(s) Mailing Address: _____

Parent/Guardian Phone Number(s): _____

Email address(es) to be used for all camp-related communication: _____

Adult(s) authorized to pick up child: _____

Emergency contact (name and phone number) in case parent/guardian cannot be reached:

Allergies and/or dietary restrictions. (We will be cooking or baking during camp as it fits into our curriculum.)

Please share any other information we need to know to make camp successful for your child:

(continued on the back)

Policies and Permissions

Please read this entire page. There are several places for you to check yes or no. Your signature is required at the bottom. Failure to complete this form entirely may cause a delay in your child's registration.

Camp Fees

Camp is \$100 per camper. A discount for multiple children in the same family will be as follows: Camper 1 - \$100, Camper 2 - \$90, Camper 3 - \$80, etc. Additionally, a camp discount will be offered for Kalona Historical Society members. Those with a family membership will receive a discount of 10% per child. Those with a single or senior membership can designate one camper to receive a 10% discount.

A 50% deposit is required by May 10, or within 5 days of returning this registration. The remaining 50% is due by May 28. Please mail this form and check to KHS - Summer Camp, 715 D Ave., Kalona, IA 52247. For credit card payment, contact Nancy Roth at 319.656.3232. Confirmation of registration and payment will be emailed to you. Cancellations made by May 14 will receive a 100% refund. Cancellations made between May 15 and May 28 will receive a 50% refund. Refunds will not be given after May 28.

Scholarships

We have a limited amount of scholarships available which are provided by donors of the Kalona Historical Village. Scholarships are open to everyone. Please check out the "Scholarships" tab on the website.

Covid-19

By sending your child to camp, you agree to abide by all of the museum's policies and procedures regarding Covid-19. *Campers are required to wear face masks or face coverings. *Each group will have a maximum of 6 campers, plus 2 teachers. *Groups will be distanced from each other as much as possible. *Handwashing and/or hand sanitizer will be available. *Camp areas will be cleaned and disinfected between each group. *Any additions and/or changes to the policies will be communicated with you via email.

**I agree with the Covid-19 policy. yes no

Photos and Videos

By participating in Kalona Historical Society Camp, I acknowledge that the museum has permission to use photos and videos of my child to promote the camp. Your child's name will never be linked with the photo or video.

**I agree with the photography policy. yes no

Medication

Medication **will not** be administered at camp. The only exception is with medications the camper can use by themselves (i.e. asthma inhalers.) An additional form will need to be completed. This form is available on the "Medication" tab on the website.

Authorization for Treatment

In case of an emergency and I cannot be reached, the camp director will contact the emergency contact listed. In the case of a medical emergency, Kalona First Responders will be called. If no one can be reached, the camp director has my authority to allow the First Responders to administer care. If further treatment is needed, the camp director has my permission to make decisions on transportation, x-rays, routine tests, and treatments.

**I agree with the authorization for treatment policy. yes no

Parent/Guardian's Signature _____ Date _____

Any questions? Please contact the Kalona Historical Society at 319.656.3232 or kalonatours@gmail.com