

# "STEAMY SUMMER CAMPS"

## 2019 Student Application Form

Each camp is limited to 25 campers and acceptance into a camp will be based on order of payment. Parents will be notified by May 31 regarding acceptance into the program. The camps may not be able to accommodate all students that apply. *Please refer to our STEAMy Summer Camp website [asd2summercamps.weebly.com](http://asd2summercamps.weebly.com) for availability updates.* Bus transportation will not be available; parents will be responsible for providing transportation to and from camps. Lunch and snacks will be provided. Each camp runs Monday-Thursday from 8:30-2:30 at Marshall Primary School and costs \$115.

### Student Information

Student's Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Current School: \_\_\_\_\_ Current Grade: \_\_\_\_\_  
Guardian(s) Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_

### Contact Information

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_  
Email: \_\_\_\_\_

### Emergency Contacts

Name and Relation to Student: \_\_\_\_\_ Number: \_\_\_\_\_

Please include any important information that we need to know about your child including special needs or medication: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Camp Registration (please check all that apply)

- ☐ **Coding, Jr.** (rising K-2)  
June 10-13 – 8:30-2:30 (\$115)
- ☐ **Coding Crash Course** (rising 3-8)  
June 10-13 – 8:30-2:30 (\$115)
- ☐ **Cooking** (rising 3-8)  
June 17-20 – 8:30-2:30 (\$115)
- ☐ **LEGO My Art** (rising K-5)  
June 17-20 – 8:30-2:30 (\$115)
- ☐ **DIY Jewelry and Charms** (rising 3-8)  
July 22-25 – 8:30-2:30 (\$115)

#### Application Contract:

I, the parent or legal guardian, understand that there will be no refunds of tuition in the event of absence or withdrawal, change of family plans, minor illness, or dismissal from the program if my child's conduct is unsatisfactory. I have reviewed the camp website ([asd2summercamps.weebly.com/application-formpermission](http://asd2summercamps.weebly.com/application-formpermission)) and give permission for my child to participate in the activities listed therein.

I, the parent or legal guardian, release Anderson School District Two (ASD2) or any other person acting on their behalf, from liability for any bodily injury sustained and loss or damage of any personal article while on the premises or participating in any activity sponsored by ASD2. I also permit ASD2 to seek medical treatment as deemed appropriate.

*Full payment is due with the application form. Please make checks payable to Anderson School District Two.*

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Send payments to: Anderson School District Two, ATTN: Kim Murray 10990 Belton-Honea Path Hwy, Honea Path, SC 29654

**Questions/Concerns:** Contact Kim Murray – email: [kmurray@asd2.org](mailto:kmurray@asd2.org) phone - 864-369-4626

More information: [asd2summercamps.weebly.com](http://asd2summercamps.weebly.com)