

Summer Camp 2018

SIX WEEKS: June 11 to July 20
Monday through Friday from 9am to 2:30pm

Camp takes place at Cheltenham Elementary, 1580 Julian St., Denver, CO 80204



In addition to these activities, Mi Casa will have amazing opportunities to learn, play, and grow!

CHOOSE A LEARNING PATHWAY

Soccer | Improve your soccer skills
Youth Entrepreneurship | Start your own small business & make money
Art | Explore all types of creative art
Culinary | Learn how to prepare different cuisines & dishes
Science & Tech | Create robots, learn to code, and play on the 3D printer

WHO IS ELIGIBLE?

All students must be a rising 6th, 7th, 8th, or 9th grader

IMPORTANT DETAILS

- Mi Casa Summer Camp is totally **FREE!**
- Breakfast and lunch are provided every day for students.
- To sign up, fill out the attached registration form and rank your preferred pathway for June. Turn the form into a Mi Casa staff member or your school office staff.
- Once your registration form has been received by a Mi Casa staff member, you'll receive a confirmation phone call.
- Hurry, space is limited!



**Mi Casa Resource Center
YOUTH REGISTRATION FORM – SUMMER 2018**

YOUTH INFORMATION					
First Name: _____	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other: _____	Race/Ethnicity <i>(check all that apply):</i> <input type="checkbox"/> Asian <input type="checkbox"/> African-American <input type="checkbox"/> Caucasian <input type="checkbox"/> Native American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Other: _____	School for 2018-2019: <input type="checkbox"/> Lake International <input type="checkbox"/> STRIVE Prep at Lake <input type="checkbox"/> Other: _____	Student's T-shirt Size: <input type="checkbox"/> XS <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> XL <input type="checkbox"/> XXL	<div style="border: 1px solid black; padding: 5px;"> <p align="center">Rank your June Pathway:</p> <p>_____ Youth Entrepreneurship Soccer</p> <p>_____ Science & Tech</p> <p>_____ Culinary</p> <p>_____ Arts</p> </div>
Last Name: _____					
Student ID: _____					
Date of Birth: ____/____/____					
Entering Grade in 2018-2019: _____					

Address: _____ **City/State/Zip Code:** _____ **Telephone:** _____

Parent(s)/Guardian(s):

Name: _____ Phone number: _____ Email: _____
 Name: _____ Phone number: _____ Email: _____

Emergency Contact (if we cannot get in contact of the parent(s)/guardian(s) listed above):

Name: _____ Relationship to Student: _____ Cell/work phone number: _____

PARTICIPANT SPECIAL NEEDS (allergies, diet, medication, etc.)

PARENT/GUARDIAN PERMISSIONS

****Please Read Carefully****

Liability, Transportation, & Medical Emergency: I hereby give permission for the participant above to take part in Mi Casa Resource Center (Mi Casa) activities, which include on and off-site events. I understand the activities may have an element of hazard & inherent danger, & I take full responsibility for the actions & physical condition of my child. I hereby release & forever discharge Mi Casa and Mi Casa's officers, directors & employees of any liability, claim or damage for any injury or loss which my child or I may incur by our participation. I give my permission to Mi Casa to transport my child as needed. In the event of an emergency, I give permission to transport my child to a hospital & to secure medical care.

Drop-In Policy: I understand that Mi Casa allows my middle school child to leave the Mi Casa site if my child wishes. My child shall sign-out with the Mi Casa representatives before leaving. If my child leaves Mi Casa, whether my child has signed out or not, I shall be fully responsible for my child's care.

Data Collection: I give permission to Denver Public Schools & other partner organizations to release educational records and/or delinquency/criminal records to Mi Casa for the purposes of evaluating the success of the program & to be able to more effectively serve my child. I also give permission for my child to respond to questions that assess my child's experience & any impact the program may have had on my child. I understand that all information collected will be kept confidential and will be shared internally only as needed. However, I give permission to Mi Casa staff to release pertinent & relevant information with those who have a legitimate need to know internally & externally.

Media Release: I give my consent to Mi Casa & its partners to use photographs, video footage, audio recordings, and written testimonials of my child and me for the purpose of advertising, marketing, or discussing the organization's work.

Grievances: Should you or your child have a problem or complaint regarding Mi Casa's programming or staff, please contact Mi Casa's Director of Youth Development at (303) 573-1302.

I hereby certify that I have read and understand the above information.

Signature: _____ Print Name: _____ Date: _____