

DRUM the Program Juneteenth Youth Summer Camp June 12-17,
2023 8:30AM-5:30PM - 2307 County Road 46 Montevallo, AL 35115

Student Intake and Registration Form

Child

First _____ Middle _____ Last _____ Grade _____

Birth date ____/____/____ Age ____ Street Address _____

Town/City _____ State _____ Zip code _____ Child's Home Phone _____

Parent/Guardian Contact Information

First _____ Last _____

Street _____

Address _____

Town/City _____ State ____ Zip Code _____ Phone _____

Email Address _____

Emergency Contact Information

First Name _____ Last Name _____ Phone _____

_____ Relation to child _____

Medical Release Information : The purpose of the information below is to ensure that the camp affiliates have details of any medical problems the child may have, during their time in the camp.

Primary Physician _____

Address _____

Phone _____

Please list any medical problems, including any requiring maintenance medication (i.e. Diabetic, Asthma,

Seizures). Medical Problem Required treatment Should paramedic be called?

_____ Yes/No

_____ Yes/No

_____ Yes/No

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Is your child on any medication?

Yes__ No__ If yes, please state the medication and what the side effects are:

If your child is on any medication (diabetic, asthma, seizure, epi-pen, etc.), please initial that they will bring the medication with them to the camp/program daily. Parent's/Guardian's Initials: _____

Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason? Yes__ No__ If yes, explain: _____

Is your child allergic to any type of food (peanuts, etc.)?

Yes__ No__ If yes, explain: _____

Is your child allergic to bees?

Yes__ No__ If yes, please explain how to care for them in the event of a bee sting? _____

Does your child require a special diet or have health restrictions?

Yes__ No__ If yes, explain/the solution: _____

In case of medical emergency, please list additional contacts:

Contact Name Phone #	Relationship to Child
Contact #1	
Contact #2	
Contact #3	

I understand that I will be notified in the case of a medical emergency involving my child. In the event that I cannot be reached, I authorize the calling of a doctor and the providing of necessary medical services in the event my child is injured or becomes ill.

Parent's/Guardian's Initials _____

I understand that *John and Elvie Schooley, Drum the Program, and Alliance Community Development* will not be held responsible for the medical expenses incurred, but that such expenses will be my responsibility as parent/guardian.

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Terms of Agreement

Media Release: I hereby give permission for my child to be photographed/video during the **Juneteenth Youth Summer Program**. I understand the photos will be used to keep a journal of activities, to share during powerpoint presentations and/or reports to our donors and for promotional purposes including flyers, brochures, newspapers and on the internet/social media. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed, I do not expect compensation and that all photos are the property of DRUM the Program and its affiliates.

Parent's/Guardian's Initials _____

Transportation Release: I hereby give permission for the transportation of my child from Birmingham, Calera or Alabaster, Alabama to Montevallo, Alabama for the official functions of **Juneteenth Youth Summer Camp**. **Transportation services are provided by Tours D'Jour**, by modes of transportation established by the camp organizers.

Parent's/Guardian's Initials _____

Swimming Pool and Fishing: Juneteenth Summer Camp ends each day with the opportunity for students to swim in the above ground pool and engage in Structured Fishing at the lake. Does your youth know how to swim? Yes _____ No _____. Do you give them permission to swim? Yes _____ NO _____

No Lifeguards Are On Duty. By signing below you release John & Elvie Schooley of ALL responsibility, liability and fault for accidents or death due to drowning.

Parent's/Guardian's Signature _____

Alternate Pickup Release

Please list those people including in addition to parents/guardians who are permitted to pick up your child at the conclusion of the

camp: 1: _____ 2: _____ 3: _____

Juneteenth Summer Camp Cost Breakdown

Actual Student Enrollment Cost per child is \$150 per day x 6 days = \$900.

The fees covers the following:

- Five High Quality Art Classes per day,
- Two Chef Prepared Home Cooked Meals per day + Healthy Snacks
- Transportation for Six days
- Parnell Library Theater Usage
- Production Cost: Stage Manager, Sound & Lighting
- Performance Costume
- Drum Rental Fee
- Art Supplies
- Camp T-shirt
- Camp Staffing
- Post Performance Dinner for Youth *Free*
- DRUM Barn Facility Utilities

We have been successful in our fundraising efforts. However, to cover **all camp operating costs** there is an additional charge per child. **That enrollment fee is \$150 per child.** Please consider giving more to support others to enroll.

Check or Money order payable to; DRUM the Program mail to DRUM the Program 2307 County Rd 46 Montevallo, AL 35115
PayPal -- drumtheprogram@gmail.com
\$Cash App -- \$DRUM5678

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Transportation Option from Birmingham, Calera Elementary or Alabaster by Tours D'Jour Transportation

Please indicate if you are in need of transportation from Birmingham, Alabaster or Calera. **Yes** ___ **No** ___

From Where _____

Juneteenth Youth Summer Camp Important Information & Dates

Please download the PDF document. Once you have completed and signed the PDF please email it to drumtheprogram@gmail.com. You may print and mail your registration to DRUM the Program 2307 County Road 46 Montevallo, AL 35115

Registration Is Limited to 25 youth.

- **First Come First Served.**
 - **Registration Closes on Saturday, April 15th.**
 - **Your registration is *Not* complete until we have received your Completed Application & Enrollment Fee.** •
- You can email your completed PDF Registration to drumtheprogram@gmail.com.
- **You may also mail your Registration. We are not responsible for lost mail.**

Juneteenth Daily Summer Camp

Location: DRUM the Program Dance Barn 2307 County Road 46 Montevallo, AL 35115

Dates: June 12-16th, 2023

Times: 8:30 - 5:30 Daily

Summer Camp T-shirt Day

- **Wednesday, June 14th / Photos & Videos**
- **Youth T-Shirt Size: Youth _____ or Adult _____**

Juneteenth Jamboree Student Showcase All White Event

Location: Parnell Memorial Library Theater 277 Park Dr. Montevallo, AL 35115 (Free Admission)

Dates: June 17th, 2023

- **Costumes:** All White Top & Bottom; African Print Shirts & Skirts are covered in Camp Fee
 - **Girls Skirts:** Youth sm ___ med ___ lg ___ xlg ___ Women sm ___ med ___ lg ___ xlg ___ xxlg ___ • **Boys**
 - Shirts:** Youth sm ___ med ___ lg ___ xlg ___ Men sm ___ med ___ lg ___ xlg ___ xxlg ___ xxxlg ___ • **Time:**
- Student Drop Off @ 1:00
- **Doors Open @ 2:15**
 - **Performance: @ 3-4:30**

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Camp Operating Policy

If you would like to volunteer to help with the daily operations of the camp please reach out to Elvie Schooley to schedule an interview to assess your offerings and the needs of the camp.

Parents are *Not* allowed to attend the camp with their children. If you feel that your child needs your support in this manner we ask that you Do Not enroll your child in the *Juneteenth Summer Camp*. We seek to foster a space where children are empowered to operate independently and navigate the Summer Camp through positive reinforcement from camp facilitators and their peers.

Release of Liability Statement

While your child is attending the *Juneteenth Youth Summer Camp*, note that **John and Elvie Schooley, DRUM the Program, and/or Alliance Community Development** are not responsible for any self-caused accidents, death or injuries, medical expenses concurred, or lost or damaged to personal property. All scheduled events are subject to change. I understand that no fees will be refunded or transferred unless a child is unable to participate due to an accident or illness per physician orders. Children's photos and quotes may be used for publicity purposes. In case of an emergency, and if a family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e. EMT, First Responder, and/or Physician).

Guardian Signature: _____ Date: _____

Printed Name of Parent/Guardian: _____

Please circle how you heard about *our Juneteenth Youth Summer Program*:

DRUM the Program, Alliance Community Development: Facebook/Instagram, Word of Mouth, or Flier... Other _____

Questions or concerns please email to drumtheprogram@gmail.com

You may also contact

Elvie Schooley,

DRUM the Program Executive Director

832.465.8807