

Valley Forge Elementary PTO proudly presents....

# FALCON FUN CAMP

## Afternoon Summer Camp at Valley Forge Elementary with Mr. Johnson & Mr. Diamond

The Valley Forge Elementary PTO will be conducting summer afternoon day camp from 1pm to 4pm with 3<sup>rd</sup> grade teacher, Matt Diamond, and Physical Education teacher, Alex Johnson, for any child who currently attends VFE or NEES in grades Kindergarten (must be completing kindergarten this year and entering First Grade in Fall '12) through Fourth Grade (entering Fifth Grade in Fall '12).

- ❑ Session #1 Monday, June 25<sup>th</sup> – Thursday, June 28<sup>th</sup> (1pm-4pm)
- ❑ Session #2 Monday, July 2<sup>nd</sup>, 3<sup>rd</sup>, 5<sup>th</sup> and Friday, July 6<sup>th</sup> (1-4pm)
- ❑ Session #3 Monday, July 9<sup>th</sup>- Thursday, July 12<sup>th</sup> (1pm-4pm)
- ❑ Session #4 Monday, July 16<sup>th</sup> – Thursday, July 19<sup>th</sup> (1pm-4pm)

Children who enroll should bring a snack, hat, sunscreen, water bottle, bathing suit and towel. We will provide Popsicle and water breaks.

### **Why you should attend:**

- ◆ Get to hang out with Mr. Diamond & Mr. Johnson
  - ◆ Play your favorite PE games
- ◆ Practice cooperation, team-building and social skills
  - ◆ Water activities, arts and crafts
- ◆ Physical activity in a comfortable stress free environment
- ◆ A portion of proceeds go back to the PE department for equipment
  - ◆ Affordable alternative for Summer fun

**Registration forms may be returned starting February 20<sup>th</sup>, 2012. The deadline/cut-off date for sign up is June 10<sup>th</sup>, 2012 (and you will be guaranteed a Falcon Fun Camp t-shirt!)** Families are encouraged to sign up **AS SOON AS POSSIBLE**. There will be a **maximum number of 60 students** allowed to attend camp per day. Falcon Fun Camp **Registration Forms with Signed Permission Slip and payment in full can be turned into Falcon Fun Camp drop-off box, in the main office, in an envelope marked "Falcon Fun Camp"**. **Space is limited and strictly a "first come first serve" basis.** Questions may be directed to Mr. Johnson (610-240-2687/ [johnsona@tesd.net](mailto:johnsona@tesd.net)) or Mr. Diamond (610-240-2411/ [diamondm@tesd.net](mailto:diamondm@tesd.net))

## Falcon Fun Camp Registration Form and Permission Slip

(A confirmation/receipt will be sent to you via email)

Please make checks payable to "VFES PTO".

### Cost:

- Each Child/per day = \$30
- Each Child /per Full "Sessions 1, 2, 3, 4" = \$110 per session

Check which session you plan on attending. If you can not attend the entire session then

**CIRCLE** the days you wish to attend.

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Session 1: June 25<sup>th</sup> - June 28<sup>th</sup> **\$110**

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Session 1: Monday, Tuesday, Wednesday, Thursday

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Session 2: July 2<sup>nd</sup>, 3<sup>rd</sup>, 5<sup>th</sup> & 6<sup>th</sup> **\$110**

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Session 2: Monday, Tuesday, Thursday, Friday

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Session 3: July 9<sup>th</sup> - July 12<sup>th</sup> **\$110**

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Session 3: Monday, Tuesday, Wednesday, Thursday

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Session 4: July 16<sup>th</sup> - July 19<sup>th</sup> **\$110**

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Session 4: Monday, Tuesday, Wednesday, Thursday

Total Full Sessions Cost = \$ \_\_\_\_\_  
(cost per student for full week sessions)

Total Days \_\_\_\_\_ @ **\$30 per Day** = \$ \_\_\_\_\_  
(cost per student if **not** attending the full week session)

**Total Amount Enclosed: \$ \_\_\_\_\_ Checks payable to "VFES PTO"**

Student Name(s) (**Please Print**): 1. \_\_\_\_\_

2. \_\_\_\_\_

Current Grade (2011-2012 school year): \_\_\_\_\_

### Waiver:

*I wish to have my child participate in Falcon Fun Camp. I recognize that risk of accident and/or injury are possible consequences of participation in any activity. I also understand that severe injuries are possible. I appreciate the character of the risks involved and I voluntarily assume all risk of injury. In accepting this risk, I expressly and explicitly release, discharge and waive any and all responsibility of employees of Tredyffrin-Easttown School District, and Valley Forge PTO of any and all of the foregoing, pertaining or related to, or arising from, in any manner, injuries to my child as a result of participation in this activity.*

Parent/Guardian Name (**Please Print**): \_\_\_\_\_

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

Phone number \_\_\_\_\_ Cell number \_\_\_\_\_

Emergency Contact name and number \_\_\_\_\_

Email address for confirmation/receipt: \_\_\_\_\_

Any pertinent health information (asthma, allergies, etc):

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