



## REDEEMER LUTHERAN SCHOOL - SUMMER CAMP REGISTRATION 2026

Camp Theme Hours: 10:30AM - 4:30PM | Full Days are Available: 7:30AM-4:30PM

Camp Offered for Students entering Kindergarten - 8th Grade (2026-2027 school year)

**Camper's Name:** \_\_\_\_\_ **Grade (26/27 School Year):** \_\_\_\_\_

**Camper's Age:** \_\_\_\_\_ **Camper's Birthdate:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**2025-2026 School Attended:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Cell/Home Phone:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Cell/Home Phone:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

Camper's Name: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Please list emergency contact information in case you cannot be reached using the above information. Please mark if the named person is permitted to pick up your child from Redeemer's summer camp.

Name	Relationship	Phone Number	Pick Up? (Y/N)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

1. Does your child have any activity restrictions?  Yes  No

If yes, please list specific limitations:

2. Does your child have an IEP or Behavior Plan?  Yes  No

If yes, a copy of the IEP must be received before registering for any camps.

3. Does your child have other medical / behavioral conditions that camp staff must know about?  Yes  No

If yes, please explain:

*Withholding information regarding a medical or behavioral diagnosis will result in immediate expulsion from camp. The camp staff may ask you for a meeting prior to camp to discuss these medical or behavioral conditions. Camp Staff is not medically trained or trained in special education.*

**EMERGENCY MEDICAL INFORMATION:**

4. Does your child have any allergies?  Yes  No

If yes, list them specifically:

5. Is your child taking medication?  Yes  No

If yes, please list the type of medication and purpose:

*\*Withholding information regarding medical information, IEPs, or Behavior plans will result in immediate expulsion from camp.*

Camper's Name: \_\_\_\_\_

*Redeemer Lutheran School has permission to render necessary medical care in the event of an emergency during the camp day, this could include first aid and/or emergency transportation to a hospital or clinic.*

Physician's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\*Our staff is not permitted to dispense medication. Please make arrangements accordingly.

Parent's Name Please Print: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Parent commitment to health and safety of campers and staff:**

To ensure the health and safety of the children and staff during summer camp, parents must agree to the following:

1. Their children will not come to camp with a fever, cough, or stomach virus.
2. They (or an authorized person) will pick-up their child within 30 minutes of a call home due to fever - over 100.4, or illness.
3. Parents will bring their children into the building and sign-in.
4. Children will not bring toys and/or other items to camp.
5. Parents will provide snacks, lunch, and water bottles for their child(ren).
6. Parents will adhere to any other guidelines, policies, or procedures that are set by the camp director which may change week to week.
7. Their children will adhere to any guidelines, policies, expectations, procedures and rules that are set by the camp director and camp teacher.

I understand following rules are critical to the safety and well-being of all campers. Children who do not follow camp rules and expectations will be sent home and cannot return to camp.

Parent's Name Please Print: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Photography Agreement:**

My child/children's photos and work can be published on Redeemer's website. \_\_\_\_ Yes \_\_\_\_ No

A photograph including my child may be included in printed school information. \_\_\_\_ Yes \_\_\_\_ No

My child/children's photograph can be published in the local newspaper. \_\_\_\_ Yes \_\_\_\_ No

My child's photograph may be published on social media (including, but not limited to, RLS Facebook, RLS website, YouTube). \_\_\_\_ Yes \_\_\_\_ No

## Camp Reminders:

- Your child should dress comfortably for the summer heat! We recommend socks and tennis shoes.
- Your child needs a labeled **snack, lunch, and water bottle each day.**
- Your child should not bring any other items to camp.
- Camp payment for the week is due at drop-off each Monday.
- Parents/caregivers are required to sign-in each camper every day with the camp counselor.
- Campers cannot stay at any camp unless all fees are paid for the week.

## Camp Tuition & Fees:

(Parent/guardian agrees to pay the fee for the camp tuition on their application once summer camp week has started. They cannot change in the middle of the week once camp has started.)

- A non-refundable payment of \$25 per child per week is required to register for Redeemer's Summer Camps. **For Example: If you sign up your child for four weeks, \$100 would be due with the registration form.** Registration fees are non-refundable and required to hold your child's spot for each week signed up.
- Make checks payable to Redeemer Lutheran School.
- The remaining payment is due by the first day of camp - **children are not permitted to stay unless camp is paid in full.** Camp can be paid on a weekly basis if your child is attending more than one week. Registration fees are deducted from the weekly rate.


The Camp Theme hours are from 10:30am-4:30pm.  
There is also before camp activity time if needed.

Camp Hours	Per Day Rates	Full Week Pricing
10:30 - 4:30 Camp Theme	\$48	\$200
7:30 - 4:30 Before Camp + Camp Theme	\$63	\$252
Discount for 7:30 - 4:30 siblings		\$252 / \$205 / \$142 1st Child / 2nd Child/ 3rd or More

\*Sibling discount is for families enrolling for a full week only 7:30am-4:30pm hours. There is no sibling discount for partial hours or per day options.

Child's Name: \_\_\_\_\_ Grade/Age \_\_\_\_\_

Please place a checkmark on the hours and days your child will attend camp.

<b>Week 1 - June 22-26 - STEAM</b>	<b>Week 3 - July 13-17 - Game On</b>
Theme Camp - 10:30am-4:30pm _____ OR Full Day - 7:30am-4:30pm _____	Theme Camp - 10:30am-4:30pm _____ OR Full Day - 7:30am-4:30pm _____
Full Week Rate: (5 days) _____ OR Day Rate: (Mark days of your choice) M ___ T ___ W ___ Th ___ F ___	Full Week Rate: (5 days) _____ OR Day Rate: (Mark days of your choice) M ___ T ___ W ___ Th ___ F ___
<b>No Camp</b>  <b>June 29th - July 3rd</b>	<b>Week 4 - July 20-24 - Art Exploration</b>
	Theme Camp - 10:30am-4:30pm _____ OR Full Day - 7:30am-4:30pm _____
	Full Week Rate: (5 days) _____ OR Day Rate: (Mark days of your choice) M ___ T ___ W ___ Th ___ F ___
<b>Week 2 - July 6-10 - Sports/Wacky Water</b>	<b>Week 5 - July 27 -31 Olympics</b>
Theme Camp - 10:30am-4:30pm _____ OR Full Day - 7:30am-4:30pm _____	Theme Camp - 10:30am-4:30pm _____ OR Full Day - 7:30am-4:30pm _____
Full Week Rate: (5 days) _____ OR Day Rate: (Mark days of your choice) M ___ T ___ W ___ Th ___ F ___	Full Week Rate: (5 days) _____ OR Day Rate: (Mark days of your choice) M ___ T ___ W ___ Th ___ F ___
 <p><b>REDEEMER</b> LUTHERAN SCHOOL <small>Honoring Christ through Excellence</small></p>	<b>Week 6 - August 3-7 - Robotics/Coding</b>
	Theme Camp - 10:30am-4:30pm _____ OR Full Day - 7:30am-4:30pm _____
	Full Week Rate: (5 days) _____ OR Day Rate: (Mark days of your choice) M ___ T ___ W ___ Th ___ F ___

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Federal Summer Meals:** (NOT provided by RLS) Nutritious free meals are available for children and teens 18 and younger at many locations throughout the nation throughout the summer while school is out of session.

- Call 211 Call 1.866.3.Hungry or 1.877.8.Hambre
- Text "FOOD" or "COMIDA" to 877877
- Download Rangeapp.org to your phone
- <https://www.fns.usda.gov/summer>