



NOCCS Rocks Summer Camp Registration

Camper Information

Camper Name: _____ Gender: M F

Birth date: _____ Grade in fall: _____

Parent/Guardian Information

Parent/ Guardian Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Preferred Phone: _____ Alternate Phone: _____

E-mail Address: _____

How did you hear about NOCCS Rocks Camp? _____

Pick-up Information

I give the following people permission to pick up my kids at camp:

1) Drop Off/Pick Up Adult Name & Phone #s:

2) Drop Off/Pick Up Adult Name & Phone #s:

Emergency Contact Information

1) Emergency Contact Adult Name & Phone #s:

2) Emergency Contact Adult Name & Phone #s:

PLEASE LIST ALLERGENIC, MEDICAL, AND EMOTIONAL CONDITIONS
THAT NOCCS ROCKS CAMP OR MEDICAL ATTENDEES SHOULD BE AWARE
OF:

Medical Release

PARENT/MAIN CONTACT AUTHORIZATIONS: This health history is correct and complete as far as I know, and the person herein described has permission to engage in all camp activities except as noted. In consideration of acceptance of this authorization, intending to be legally bound, hereby, for ourselves, our heirs, executors and administrators, waive and release all rights and claims that may arise against NOCCS Rocks Camp, and persons affiliated with this camp. I hereby give permission to NOCCS Rocks Camp to provide routine health care, administer prescribed medications, and seek emergency medical treatment including ordering x-rays or routine tests. I agree to the release of any records necessary for insurance purposes. I give permission to NOCCS Rocks Camp to arrange necessary related transportation for my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp to secure and administer treatment, including hospitalization, for the person named above.

Signature of Parent/Guardian: _____

Date: _____

Permission For Walking Trips

I give my permission for my child to go on field trips within walking distance from NOCCS. My child will be with staff at all times. I have provided the camp with emergency contact information, which will be taken on all field trips.

Signature of Parent/Guardian: _____

Date: _____

Camp Information

Hours: Full Day: 9 a.m. – 4 p.m.
AM Session: 9 AM - 12 PM
PM Session: 1 PM - 4 PM

Location: NOCCS
1000 42nd Street
Oakland, CA 94608

Cost: \$300/week (full day)
\$150/session (half day)

Extended Care: \$30 per week 8 a.m.— 9 a.m.
\$50 per week 4 p.m. – 5:30 p.m.

Specials:

** Early Bird/Multi-Week Special: Register for all three weeks by March 15, 2011 for \$280/week (a \$60 value!) **

** Sibling Discount: Enroll two children in full-day camp for all three weeks and receive one week **free** for one child (a \$300 value!) **

Payment plans and a limited number of partial scholarships available. Contact Lily Jones at ljones@noccs.org for a scholarship application or to set up a payment plan.

To Register

Turn registration forms and payment in to Lily Jones, leave in her mailbox in the NOCCS office, or mail to NOCCS (Attn: Lily Jones) at 1000 42nd St. Oakland, CA 94608.

Make all checks payable to NOCCS.

Indicate sessions you would like to enroll in with an X. See information packet for details about each session. Note that the grade ranges refer to the grade your child will be entering in Fall 2011. To figure out fees, please fill out the appropriate worksheet on the following page.

Week One July 11th - July 15th

<i>AM Session 9 AM - 12 PM</i>		<i>PM Session 1 PM - 4 PM</i>	
Brilliant Books (K-3)		Edible Science (K-3)	
Mad Science (4-6)		Hogwart's Academy (4-6)	
That's Mathtastic (6-8)		Craftacular (6-9)	
Play-Well Legos (K-1)		Play-Well Legos (2-6)	

Week Two July 18th - July 22nd

<i>AM Session 9 AM - 12 PM</i>		<i>PM Session 1 PM - 4 PM</i>	
Sculpture & Poetry (K-3)		Bubbles & Potions (K-3)	
Detective Camp (4-6)		Hero Training Camp (4-6)	
Algebra Readiness (7-9)		Guerrilla Gardening (6-9)	
Play-Well Legos (K-1)		Play-Well Legos (2-6)	

Week Three July 25th - July 29th

<i>AM Session 9 AM - 12 PM</i>		<i>PM Session 1 PM - 4 PM</i>	
Painting & Puppets (K-3)		Puzzle Power (K-3)	
Culinary Adventure (4-6)		Create-a-Book (4-6)	
Ess-easy! (6-9)		Improv (6-9)	
Play-Well Legos (K-1)		Play-Well Legos (2-6)	

Full Day

For full day campers:

_____ x \$300 (weekly rate) = \$ _____
_____ x \$30 extended am care + \$ _____
_____ x \$50 extended pm care + \$ _____

Total amount due \$ _____

Early Bird/Multi-week Special

For those registering for all three weeks before 3/15/11:

3 x \$280 (weekly rate) = \$ 840
_____ x \$30 extended am care + \$ _____
_____ x \$50 extended pm care + \$ _____

Total amount due \$ _____

Sibling Discount

For those registering two siblings for all three weeks before 3/15/11

6 x \$280 - Sibling Discount (\$280) = \$ 1400
_____ x \$30 extended am care + \$ _____
_____ x \$50 extended pm care + \$ _____

Total amount due \$ _____

For those registering two siblings for all three weeks after 3/15/11

6 x \$300 - Sibling Discount (\$300) = \$ 1500
_____ x \$30 extended am care + \$ _____
_____ x \$50 extended pm care + \$ _____

Total amount due \$ _____

Half Day

For half day campers:

_____ x \$150 (half day rate) = \$ _____
_____ x \$30 extended am care + \$ _____
_____ x \$50 extended pm care + \$ _____

Total amount due \$ _____