



Camp Enrollment Form 2022

9348 Olive Blvd, 63132

(314) 733-9770

www.CoeurAcademy.org

Child Information:

➤ Child's Name: _____

Address: _____

City/State/Zip code: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Grade Entering: _____

Responsible Party Information:

➤ Primary Name: _____

Address: _____

City/State/Zip code: _____

Home Phone: _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Email Address: _____

➤ Secondary Name: _____

Address: _____

City/State/Zip code: _____

Home Phone: _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Email Address: _____

- ***Please attach the most recent Individualized Education Plan (IEP), Service Plan (SP), 503 Plan, educational evaluations, or any other information that would benefit programming for your child.***

Coeur Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.



Medical Information:

- Please list allergies and attach any medical information:

- Please specify any dietary restrictions or needs:

- Please list any medications taken by your child (please complete Medication Administration Form if medicine is to be administered to your child during the day):

Additional Information:

- Please include any additional information you would like us to know about your child:



Transportation Authorization:

- I give permission for my child, _____, to be transported by a staff member or volunteer of Coeur Academy in his/her personal vehicle when participating in community outings.

Responsible Party's Signature

Date

Emergency Authorization:

In the event of a medical emergency, we are required to have written authorization from a child's legal guardian to seek medical help. Signing the statement below will provide us with that authorization.

In the event of a medical emergency, the legal guardian will be contacted first. If we cannot contact the legal guardian, we will try to contact others you designate. In the event that we are unable to contact the legal guardian or the designated representative(s), or if the medical emergency warrants immediate response, we will act on your behalf and in the best interest of the child.

Preferred hospital: _____

I have read and, by my signature below, confirm my understanding and acceptance of this authorization:

Responsible Party's Signature

Date



Authorized Contacts:

Your child will be released only to custodial parent or legal guardian and the persons listed below. If for some reason the custodial parent or legal guardian cannot be reached, the following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident, or emergency.

➤ Contact #1 Name:

Email: _____ Cell Phone: _____

➤ Contact #2 Name:

Email: _____ Cell Phone: _____

➤ Contact #3 Name:

Email: _____ Cell Phone: _____

Photo/Video Release:

_____ I, hereby, grant *Coeur Academy* permission to use my child's photos, audio recordings, and videos made at *Coeur Academy* events for the purpose of yearbook, classroom activities, publicity, promotional materials, and website content.

_____ I, hereby, grant *Coeur Academy* permission to use my child's name in association with photo or other media outlet.

_____ I do not authorize *Coeur Academy* permission to use my child's name, photos, audio recordings, and videos made at *Coeur Academy* events for the purpose of publicity, promotional materials, and website content.

Child's Name: _____

_____ Responsible Party's Signature

_____ Date

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In addition, By signing below I acknowledge that I have read, understand, and agree to Coeur Academy's Policies.

(Signature)

(Date)

(Printed Name)

Please check the box next to each of the days your child plans to attend camp and note whether morning, afternoon, or full day session:

- Week 1
- June 6
 - June 7
 - June 8
 - June 9
 - June 10

- Week 2
- June 13
 - June 14
 - June 15
 - June 16
 - June 17

- Week 3
- June 20
 - June 21
 - June 22
 - June 23
 - June 24

- Week 4
- June 27
 - June 28
 - June 29
 - June 30
 - July 1

- Week 5
- July 11
 - July 12
 - July 13
 - July 14
 - July 15

- Week 6
- July 18
 - July 19
 - July 20
 - July 21
 - June 22

- Week 7
- July 25
 - July 26
 - July 27
 - July 28
 - June 29

- Week 8
- August 1
 - August 2
 - August 3
 - August 4
 - August 5

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