



oly Family Holy Name

91 Summer St., New Bedford, MA 02740
508-993-3547 – www.hfhn.org

HFHN SUMMER CAMP JOIN US THIS SUMMER!

Holy Family Holy Name School offers a summer program.

Summer Camp is offered to students entering Preschool through Grade 8 for the 2019–2020 school year. It is offered for 8 weeks during the months of June through August.

Summer Camp activities include arts and crafts, off-site and on-site field trips, and enjoyable times with friends!

**For more information please call
Cheryl Cabral at
508-993-3547**

Free Breakfast & Lunch Program

Bible Stories & Crafts

Outside Water Play

Sports Activities

Arts & Crafts Centers

Weekly Field Trips

Playground Activities

Rest Period



WE ACCEPT PACE VOUCHERS





Summer Camp Mrs. Cheryl Cabral

During the week, an off-campus or on-campus field trip is coordinated, visiting museums, local sites, or parks. **Swim suit, towel and water shoes(optional) are needed each day** for outside water play (weather dependent). Other fun activities in the Summer Camp program include water play games, relay races, organized games, arts and crafts, and playground fun. **A blue t-shirt is mandatory on field trip days. Sneakers are mandatory** every day for summer camp because of safety issues, **no flip flops, jellies, open toe or backless shoes** can be worn.

All HFHN students and new students must be registered for the 2019 - 2020 school year in order to attend the Summer Camp

Summer Camp Hours: 7 :30 a.m. - 5:30 p.m. Monday through Friday

6:30 am start time is available for an additional fee of \$5.00 a day.

* All of our off-site field trips are an all-day event, and as a result, children should be in attendance between the hours of 8:30 - 3:30 p.m.

Costs: Summer 2019 rates - **\$240.00 per week** per child for full-day camp includes field trip fee.

Individual days are available on a sign-up basis, **no drop-in days are available, including Field Trip Wednesdays. Individual days are priced at \$45 for a full day except field trip Wednesday which is \$60.00.** Please indicate on the registration form which weeks/days your child will attend.

Payments are due **ONE WEEK IN ADVANCE** or a **one-time upfront fee.**

Please have your child bring a water bottle with water or they can purchase one for \$1.00 each.

Refunds: Please note that there are no refunds on deposits for Summer Camp. **Summer Camp fees are non-refundable after the start of summer camp on June 17th. There are no credits for days that your child does not attend Summer Camp.**



Holy Family – Holy Name Extended Care Beginning June 6th to June 14th

CHILD'S NAME _____ (Current) GRADE _____

ADDRESS _____ PHONE # _____

PARENT'S SIGNATURE _____

PLEASE CHECK ALL OF THE DAYS YOU ARE INTERESTED IN:

		MON	TUES	WED	THUR	FRI
PRESCHOOL	6/6 – 6/7				All Day EC \$40.00	All Day EC \$40.00
PRESCHOOL & KINDERGARTEN	6/10- 6/12	All Day EC \$40.00	All Day EC \$40.00	All Day EC \$40.00		

Summer Camp Begins June 17, 2019

PAYMENTS IS DUE ONE WEEKS IN ADVANCE

Field Trip fees are included for Full Week Day Camp (\$240.00)

Daily Camp is \$45.00 a day and \$60.00 on Wednesday (field trip day)

LUNCH IS INCLUDED (starting the first week of camp)
AND SNACKS ARE AVAILABLE FOR PURCHASE

CAMP OPERATES FROM 7:30 am - 5:30 pm
**If you have any questions, please contact
Cheryl Cabral at the HFHN Office (508-993-3547)**



Please check this box if you plan to use the 6:30 am arrival.

Return completed form to: HFHN/Summer Camp, 91 Summer St., New Bedford, MA 02740

Summer Camp 2019 Field Trips

June				
Monday, June 17th Downtown Library Blue Shirt to be worn	Tuesday, June 18th 	Wed. June 19th Fort Taber Blue Shirt to be worn	Thursday, June 20th 	Friday, June 21st
Monday, June 24th Downtown Library Blue Shirt to be worn	Tuesday, June 25th 	Wed. June 26th Magician At school Blue Shirt to be worn	Thursday, June 27th 	Friday, June 28th
July				
Monday, July 1st Buttonwood Zoo & Toe Jam Puppet Band Blue Shirt to be worn	Tuesday, July 2nd 	Wed. July 3rd 	Thursday, July 4th Closed	Friday, July 5th
Monday, July 8th Downtown Library Blue Shirt to be worn	Tuesday, July 9th 	Wed. July 10th Fantasy Land Blue Shirt to be worn	Thursday, July 11th 	Friday, July 12th
Monday, July 15th Downtown Library Blue Shirt to be worn	Tuesday, July 16th 	Wed. July 17th Wonder Bowl Blue Shirt to be worn	Thursday, July 18th 	Friday, July 19th
Monday, July 22nd Downtown Library Blue Shirt to be worn	Tuesday, July 23rd 	Wed. July 24th Whaling Museum Blue Shirt to be worn	Thursday, July 25th 	Friday, July 26th
Monday, July 31st Downtown Library Blue Shirt to be worn	Tuesday, July 30th 	Wed. July 31st Animal Encounters at school Blue Shirt to be worn	Thursday, Aug. 1st 	Friday, Aug 2nd
August				
Monday, Aug. 5th Downtown Library Blue Shirt to be worn	Tuesday, Aug. 6th 	Wed. Aug. 7th Deep Blue Discoveries at school Blue Shirt to be worn	Thursday, Aug. 8th 	Friday, Aug. 9th Food Truck at school

Field trip—Blue shirt to be worn



Please register my child for Summer Camp

ONE FORM PER CHILD - Payments are due one week in advance

PLEASE MAKE CHECKS PAYABLE TO HFHNSCHOOL

CHILD'S NAME:		GRADE	
DATES	SUMMER CAMP OPTIONS (PLEASE CHECK ONE)	DEPOSIT	Balance
Week #1: June 17 th - June 21 st	<input type="checkbox"/> \$240 Full-day Weekly Camp <input type="checkbox"/> \$45 per day/\$60 for Wednesday(field trip) Circle full days needed <input type="checkbox"/> M T W TH F		\$
Week #2: June 24 th - June 28 th	<input type="checkbox"/> \$240 Full-day Weekly Camp <input type="checkbox"/> \$45 per day/\$60 for Wednesday(field trip) Circle full days needed <input type="checkbox"/> M T W TH F		\$
Week #3: July 1 st - July 5 th No camp on July 4 th	<input type="checkbox"/> \$240 Full-day Weekly Camp <input type="checkbox"/> \$45 per day/\$60 for Wednesday(field trip) Circle full days needed (no camp July 4 th) <input type="checkbox"/> M T W F		\$
Week #4: July 8 th - July 12 th	<input type="checkbox"/> \$240 Full-day Weekly Camp <input type="checkbox"/> \$45 per day/\$60 for Wednesday(field trip) Circle full days needed <input type="checkbox"/> M T W TH F		\$
Week #5: July 15 th - July 19 th	<input type="checkbox"/> \$240 Full-day Weekly Camp <input type="checkbox"/> \$45 per day/\$60 for Wednesday(field trip) Circle full days needed <input type="checkbox"/> M T W TH F		\$
Week #6: July 22 nd - July 26 th	<input type="checkbox"/> \$240 Full-day Weekly Camp <input type="checkbox"/> \$45 per day/\$60 for Wednesday(field trip) Circle full days needed <input type="checkbox"/> M T W TH F		\$
Week #7: July 29 th - Aug 2 nd	<input type="checkbox"/> \$240 Full-day Weekly Camp <input type="checkbox"/> \$45 per day/\$60 for Wednesday(field trip) Circle full days needed <input type="checkbox"/> M T W TH F		\$
Week #8: August 5 th - August 9 th	<input type="checkbox"/> \$240 Full-day Weekly Camp <input type="checkbox"/> \$45 per day/\$60 for Wednesday(field trip) Circle full days needed <input type="checkbox"/> M T W TH F		\$



Summer Camp Registration continued

Child's Name: _____ Address: _____ City, State, Zip: _____	Grade in the Fall '17: _____ Birthday: _____ Age: _____ Home Phone: _____
Mother's Name: _____ Address: _____ City, State, Zip: _____ Email address: _____	Employer: _____ Business Phone: _____ Cell: _____ Home Phone: _____
Father's Name: _____ Address: _____ City, State, Zip: _____ Email address: _____	Employer: _____ Business Phone: _____ Cell: _____ Home Phone: _____
Please list below any other adult permitted to pick up your child besides a parent. Only those listed below will be permitted to pick up your child. Please print the names - for the safety of your child we will ask for identification.	
Name: _____	Phone Number: _____
Name: _____	Phone Number: _____

Please comment on your child's general health or anything pertinent to the well-being of your child. Include allergies (food, hay fever, bee stings, asthma, etc.)

Child's Doctor: _____	Doctor's Phone: _____
Child's Dentist: _____	Dentist's Phone: _____
Your Insurance Company: _____	Policy Number: _____

In case of an emergency, sickness, or accident that needs more than basic first aid, **HFHN** School's Summer Program Staff has my authorization to obtain, at my expense, such medical attention as is deemed necessary for my child if unable to communicate with me, including the use of "911" facilities. My child has permission to leave the **HFHN** School with the staff to travel to local parks, museums, and other field trips. Transportation will be by bus or walking.

Signature of Parent _____ Date _____

Comments:
