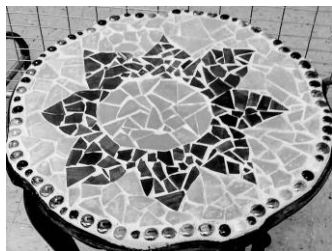


Village Center for the Arts

A Nonprofit Community Fine Arts Center

12 Main Street New Milford, CT 06776 | 860.354.4318 | facebook.com/villagecenterarts

Summer Camp Creation 2019



Full Day Camp | Ages 7 - 14*

Program Description:

This is a week-long, 9am - 4pm program.
(Offered: 8 full day weekly camps. *Some camps allow continuing VCA students up to age 17)



Campers focus on one large project, listed below, that will take the entire week to complete. Pottery wheel and clay sculpture students will produce 2 - 10 pieces, depending on their designs. Each camper will plan, produce, and execute their own version of these projects. Please look on our website for full descriptions and photos of each Camp Week, at villagecenterarts.org



Weekly Camp Project Schedule:

Week #:

Start Date:

Project:

FD#1	June 24th	Acrylic Painting
FD#2	July 1st	Pottery Wheel/Sculpture
FD#3	July 8th	Pottery Wheel Intensive* ages 10-18
FD#4	July 15th	Clay Pet Sculpture

*****VILLAGE FAIR DAYS*****

FD#5	July 29th	Harry Potter #1
FD#6	August 5th	Harry Potter #2
FD#7	August 12th	Mosaic
FD#8	August 19th	Board Game Making

For More Information & Registration Forms Visit:

villagecenterarts.org



Keep This Page For Your Records

Lunch Time

At lunch time, we walk, “en-masse”, to the Village Green, or to Young’s Field (a five minute walk), time permitting; where the kids eat, play in the playground or on the tank, read a book, face paint one another, have water gun fights and/or relax under a tree. On the way back, we go for frozen yogurt at Tasty Waves. Parents pay a reduced VCA price of \$4.00 for yogurt, for an addl \$.50, children can get toppings.

CHILDREN DO NOT HAVE TO PARTICIPATE IF PARENTS DON’T WANT THEIR CHILD TO HAVE FROYO!

Time and parent permitting, during the week we will also take optional mini field trips to local downtown shops, as well as VCA’s Art Supply Store. Parents may provide additional money for purchases if desired.
(All shops located within a 2 min. walk of the VCA).

Student Exhibition

The summer culminates with a gala Art Show exhibiting art work created by each student of Summer Camp Creation. We invite Parents to assist by providing food, drink and supplies to the show. Details to follow.

Theme Days

(Same days each week)

Tuesday: Crazy Hair Day

Wednesday: Personal Pet Day

Thursday: “Way Out” Artist Day

Friday: Camper’s Choice Day

- *Previous Pottery Wheel experience required for #3
- Camp weeks #1 is \$395
- Camp week #2 is \$425
- Camp week #3 is \$650
- Camp week #4 is \$395
- Camp week #5, #6 is \$575
- Camp week #7, #8 \$375

- Payment in full is required with registration. Registration fee is non-refundable*
- Froyo after lunch (optional) is about \$4.00 in cash/day (not required)

(Or \$20 per week, change returned)

*Extreme hardship cases can be addressed!

Tuition assistance is available. Please contact studio at (860) 354-4318.
They are now available on our website under scholarships - fill them out and print them

Early & Late Drop Off & Pick Up

AM Extension Hours: Before 8:45 am; Early drop-off Fee: \$15/day
PM Extension Hours: After 4:15 pm (till 6:00pm); Late Pick-up Fee: \$20/day.



Keep This Page For the Week

Miss Sharon's Full Day Parent Checklist:

1. **Mandatory:** Whoever is dropping off your child, **MUST** come inside on the first day of camp to ensure the child is set for the day. If that is impossible, please schedule a meeting with Sharon Kaufman to go through all points in advance of the first day!!!
2. **Mandatory:** If your child has any special needs, attention or behavioral issues, *Please schedule a meeting with Sharon BEFORE the first day of camp*, so we can offer them the best possible experience.
3. Your child needs lunch, drinks and snack every day! Lunch and snack **MUST BE NOT FREE !!!!!NO JOKE!**
4. Please tell us on the first day of camp if your child is allowed to be face-painted and use colored temporary hairspray! If you don't say "no" we will assume "yes" and let them participate.
5. Starting Tuesday each week, children may choose to bring water shoes, water guns, towel & bathing suit for optional water-play. (except Harry Potter weeks, which are too full of magical stuff to have water-play time.)
6. Epi-Pens: PLEASE PROVIDE a lunch box and ice packs for when we go to lunch.
7. If a different adult is picking up your child, they **MUST** be on our approved sign out sheet list or they will not be released to the adult, and they **MUST** show ID!
8. Camp starts promptly at 9:00AM.
9. If your child is sick and cannot attend camp, please call our studio **BY 8:00AM.**
10. Make sure that you and your child plan THE NIGHT BEFORE for the themed days. Please don't be late! The children's theme costumes are judged by the little kids promptly at 9:00AM.
11. To reach your child during the campday, **ALWAYS CALL THE MAIN STUDIO LINE AT 860-354-4318.**
12. Emergency or important calls from Miss Sharon or staff while off site:
Please put Miss Sharons number in your phone, 203-770-2589, as that is the number she'll use to call YOU in the event of a problem when we're off-site for lunch (11:30 - 2:00 window).
 - a. **PLEASE ANSWER** that number if she calls, as it will be important!
 - b. *If you MISS her call during lunch, you may call her back on the cell number until 2:00, after 2:00, return to main studio number call back.
13. ALWAYS: Please leave **messages regarding VCA** on the VCA phone unless otherwise instructed.
14. THIS INCLUDES YOUR LATE ARRIVAL OR EARLY PICKUP

Disclaimer: At the beginning of the week, your children will have proper tool usage explained clearly to them. If your child misuses a tool in a way that is dangerous to the other children, you will be asked to sit next to them for the rest of the week or provide an adult sitter, or your child must leave the camp. You will not receive a refund of any kind.

Do not call OR TEXT Miss Sharon's phone during summer camp !

Please respect her privacy and time at home,as it is vital to her energy for fabulous camp days!*



Thank you for your consideration

villagecenterarts.org



“On the Refrigerator” Posting Page

Mark the Week(s) you’ve chosen:

FD#1 June 24th ☐

FD#2 July 1st ☐

FD#3 July 8th ☐

FD#4 July 15th ☐

FD#5 July 29th ☐

FD#6 Aug 5th ☐

FD#7 August 12th ☐

FD#8 August 19th ☐

Students Should Wear and Bring to Camp:

Wear:

WEAR CLOTHES OR SHOES THAT **CAN** BE PERMANENTLY STAINED OR DIRTIED. Please send your child pre-covered with sun-block and send some with them for re-application.

Bring:

- A backpack to carry lunch to the park; everybody carries their own stuff.
- Bag Lunch, 2 snacks, NUT FREE please, water bottles for drinking, ice cream money.
- Any medication needed during the day.

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Summer Camp Creation 2019

7 – 14 Years Old. Weekly, Full Day Program. 9:00am – 4:00pm.

Please fill out form completely

Check Week(s):

FD#1 June 24th FD#2 July 1st FD#3 July 8th FD#4 July 15th FD#5 July 29th

FD#6 August 5th FD#7 August 12th FD#8 August 19th

Student's Name _____ Age _____ Gender _____

Street Address _____ Town _____

State _____ Zip _____ Home Phone _____ Birthday _____

E-Mail (please write clearly): _____

Student Primarily Lives With: (Check all that apply): Parent(s) ☐ Sister(s) ☐ Brother(s) ☐

Parent _____ Cell Ph: _____

First & Last Name

Daytime Ph: _____

Parent _____ Cell Ph: _____

First & Last Name

Daytime Ph: _____

Emergency contact other than parents:

Name _____ Phone _____

Relationship _____

In order for your child to have a successful camp week, please inform us of if your child has any conditions that may effect their ability to process instructions. Your child may need a care-giver to accompany them to camp. Please call prior to registration to discuss your individual case with the instructor. Please make us fully aware of any medications your child takes daily and/or may need during the camp day and attach specifications to this sheet.

List allergies _____

Check all allergies that apply: Bees ☐ Peanuts ☐ Dairy ☐ Cats ☐ Dogs ☐ Pollen ☐ Other: _____

Degree of Severity: Mild ☐ or Critical ☐ Special Remedies required: (i.e. Epi-pen) _____

Family Doctor _____ Phone _____

Please return this page to VCA.



villagecenterarts.org



Parental Consent Form

In the event of an emergency and I cannot be reached, I hereby give my permission for Village Center for the Arts (VCA Instructor or their staff to obtain treatment for my child. I hereby authorize any health care provider to rely on this consent for treatment for my child. I give permission for treatment provided by EMTs and by staff trained in first aid. I give permission and understand that VCA Instructors, their staff, or emergency services will provide transportation to New Milford Hospital. I agree to hold harmless, the Village Center for the Arts, its agents, employees and independently contracted instructors, against and from all liabilities, claims, costs, charges, and the like, due to any injury to my child, and/or treatment arising from my child's participation.

I authorize Village Center for the Arts to record on video tape, photograph, voice recording, or interview through print or other media, my child's first name, voice, image, artwork, and or performance for informational programs, reports, and promotional materials to be used for non-commercial purposes. I understand that neither my child nor I will receive compensation for this appearance and no private individual will receive compensation of any kind as a result of broadcasting this material.

SIGN _____ DATE _____
(Parent Signature)

Please Answer: How did you find out about VCA's Summer Camp Creation?

Due to the rising costs of credit card processing we ask that you consider paying with cash or check.

Make checks Payable & Mail to: VCA 12 Main Street New Milford, CT 06776

OR MC / Visa: # _____

AMEX: # _____

Exp Date: ____/____ CCV: _____

Name on Card: _____ Home Zip Code: _____

I, _____, allow my child, _____
(please print clearly)

to walk to the Village Green or to Young's Field Park for Lunch Break daily and to participate in field trips to local downtown shops on Bank St. and Main St. I understand my child will be accompanied at all times by VCA staff personnel.

SIGN _____ DATE _____
(Parent Signature)

Please return this page to VCA.



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