

District 200 Blast CAMP 2018

At W.H.S. for GRADES 1 – 6

Come join us for a four-day camp filled with fun themes, activities, games, and tons of fun with your friends! This is a great opportunity to also meet new friends! The L.U.C.H.A. Club (Latinos Unidos) would like to invite your child to come have a BLAST with us!

D200 Blast Camp at Woodstock High School the week of June 4-7, 2018.

Students, grades 1-6, will receive experience in **creating fun recipes, crafting and games**. Craft theme will be "The Jungle." Parents are invited to come visit our *Jungle* on the last day of camp from 10:45 to 11:00 a.m.

Register with this form for a creative fun experience!

For Grades: 1 – 6 (incoming for the 2018-2019 school year)

Students will be in rotations and grouped.

The instructors will use W.H.S. classrooms for the camp.

Dates: June 4-7, 8:00-11:00 a.m. Please do not drop off earlier than 7:45 a.m. and pick-up promptly at 11:00 a.m.

Location: Woodstock High School Classrooms D255, D253

Drop-off and pick-up children at the South Street entrance #1 at Woodstock High School. The **only** entrance will be WHS entrance #1 on the South Street circle drive. Students will meet up at the entrance and the instructors will bring them back to the art classrooms.

Student Registration Cost: \$70 (\$10 off if you register by May 11th)-

Checks made payable to Woodstock High School

The camp will register up to 40 students on a first come, first serve basis.

To register via mail or drop-off your registration form and fee by Wednesday, May 30th to:

Carolina Giraldo, BLAST Camp Coordinator (WHS Teacher)

W.H.S. Blast Camp 2018

Woodstock High School

501 W. South Street

Woodstock, Illinois 60098

- Students are expected to maintain proper conduct in the classroom and on school property and follow the discipline codes of District 200 as outlined in student handbooks. Should a student not conform to school rules, parents will be contacted. If behavior does not improve, the student will result in an immediate dismissal from the camp.

Student Information:

Student Name: _____ 18/19 Grade: _____ Birth date: _____

18/19 School: _____

Parent/Guardian Name: _____ Daytime Phone: _____ Cell Phone: _____

Home Address: _____ City: _____ Zip Code: _____

Medical Concerns (Allergies, Asthma, Restrictions, Medications, Food Allergies):

Emergency Contact:

Name: _____ Phone: _____

(other than parent/guardian)

Permission to pick-up

Staff Only

Date Received: _____

If you have a friend signing up for Blast Camp and you would like to be in the same group as they are please give us their name(s) below. We will do our best to oblige the request. All age groups will be in all 3 groups.
