



Summer 2021 Community Education Alliance Camp R.E.A.D. at Old Dillard Museum

The Community Education Alliance (CEA) is excited to partner with the Old Dillard Museum to provide an exciting Summer Reading Camp for students grades 2-5. Students will explore the benefits and importance of reading through literacy, mentorship, and cultural activities based on weekly themes. Each week, students will complete innovative book report and arts and craft activities, engage with guest speakers, and participate in field trips.

During this 7-week program, students can expect to read and ENJOY over 10 books (at or above grade level), select their favorite books from our Camp R.E.A.D. collection to start their own personal library, be exposed to valuable information on community service, entrepreneurship (financial literacy), and much more!

Camp Dates and Time: June 21-August 5, 2021 (Monday-Thursday 9:00 am - 1:00 pm)

Camp Location: Old Dillard Museum 1009 NW 4th St, Fort Lauderdale, FL 33311

For any additional information, contact Brithney Johnson at bjohnson@ceainfo.net

Participant Information

Name: _____ **DOB:** ____/____/____

Address: _____
(Street) (Apt.) (City) (State) (Zip code)

Phone: () _____

Participant grade level entering the 2021-2022 school year:

- 2nd Grade
- 3rd Grade
- 4th Grade
- 5th Grade

Are you a student at a CEA school listed below? (If "yes," indicate below:

- Walker Elementary School
- Sunland Park Academy
- Banyan Elementary
- Other: _____

Camp R.E.A.D. T-Shirts: Each Camp R.E.A.D. participant will be issued ONE FREE activity t-shirt for weekly field trips and events. Students are responsible for wearing their t-shirt each week for designated special events. Lost or forgotten camp shirts will result in a missed opportunity for participation. Please indicate your Camp R.E.A.D. t-shirt size below:

- Youth Small
- Youth Medium
- Youth Large
- Adult Small
- Adult Medium
- Adult Large

Breakfast Option: Camp R.E.A.D. offers a light continental breakfast each morning from 9:00 am to 9:30 am. Students who arrive at 9:00 am will be served breakfast prior to the start of the day each morning.

Do you plan to drop your child off for breakfast each/most mornings?

- Yes
- No

Parent/Guardian Information

Primary Parent/Guardian Name: _____

Address: _____
(Street) (Apt.) (City) (State) (Zip code)

Phone: () _____ **Email Address:** _____

Secondary Parent/Guardian Name: _____

Address: _____
(Street) (Apt.) (City) (State) (Zip code)

Phone: () _____ **Email Address:** _____

Participant Medical Information

Dietary Restrictions/Allergies (Please select all that apply):

- None
- Vegetarian
- Vegan
- Kosher
- Gluten-Free
- Peanut
- Dairy
- Other: _____

My student is covered by twenty-four (24) hour student accident insurance or family insurance.

- Yes**
Insurance Company/Policy Number: _____ Name of Insured: _____
- I do not have insurance; however, I will pay any and all medical bills for emergency care of my student.

Emergency Contact Information

Emergency Contact Name: _____ Phone: _____

Relationship to Camp R.E.A.D. Participant:

- Parent/Guardian
- Grandparent
- Sibling (Must be 18+ years of age – ID REQUIRED)
- Aunt/Uncle
- Other: _____

Pick-up Authorization (students will not be released at dismissal to anyone not listed on this form).

Alternate After Camp Pick-up Name (1): _____ Phone: _____

Relationship to Camp R.E.A.D. Participant:

- Parent/Guardian
- Grandparent
- Sibling (Must be 18+ years of age – ID REQUIRED)
- Aunt/Uncle
- Other: _____

Alternate After Camp Pick-up Name (2): _____ Phone: _____

Relationship to Camp R.E.A.D. Participant:

- Parent/Guardian
- Grandparent
- Sibling (Must be 18+ years of age – ID REQUIRED)
- Aunt/Uncle
- Other: _____

Alternate After Camp Pick-up Name (3): _____ Phone: _____

Relationship to Camp R.E.A.D. Participant:

- Parent/Guardian
- Grandparent
- Sibling (Must be 18+ years of age – ID REQUIRED)
- Aunt/Uncle
- Other: _____

Registering Parent Name (Please Print): _____

Registering Parent Signature: _____ Date: _____