

STUDENT NAME:_

Math Academy Summer Camp June 11th – June 22th, 2018 PROGRAM GUIDELINES/RULES AND REGULATIONS

DAILY ATTENDANCE:	Attendance is mandatory all ten (10) days.	
	Please be on time (8am). All instruction is important.	
LUNCH/SNACK:	Snacks will be available for purchase. Your child should bring a few dollars each day.	
	Lunch will be served daily from 12pm to 1pm. Usually sub sandwiches or Pizza.	
	IF YOUR CHILD HAS ALLERGIES OR DIETARY RESTRICTIONS, PLEASE BRING A BAGGED LUNCH TO CAMP.	
PROGRAM ACTIVITIES:	Math Instruction 8 - 10 am	
	Snack Break 10 – 10:15am	
	Math Instruction 10:15 – 12pm	

Lunch 12 – 1pm

Math Instruction 1pm – 3pm.

RULES AND REGULATIONS:

- No clothing with written messages or pictures or symbols which portray ideas which are adverse to the health, safety, and welfare of students, eg., messages which relate to illegal drugs, smoking, alcohol, sex, and profanity or contrary to the mission of Doral Academy.
- No tube tops, see-through blouses without a camisole or whole slip, bare backs, bare midriffs, or sleeveless undershirts. No shorts, leggings or ripped jeans. Wear school appropriate attire, please.
- Students will behave appropriately or they will be removed from the program.
- Students must be under the supervision of faculty at all times during the summer camp. They may not wander off from designated areas onto other parts of campus or they will be removed from the program.
- Students will not disturb or use any Doral Academy property except for equipment assigned for use in class.

- Students are not allowed to search the Internet unless it is required for the program activity.
- Students will not text or talk on cell phones during the class; this is allowed only during break and lunch. Students who do not comply will be asked to leave the program and the parent will be notified.
- Smoking on campus is prohibited.
- Illegal drugs of any kind and alcohol are prohibited.
- Students will be responsible to complete all program requirements.

My child	, will follow all rules and regulations of the program.	
Parent/Guardian Signa	Date:// Month Day Year	
Student Signature	Date:// Month Day Year	

	PICK-UP AND DROP OFF FORM
The following	g person will normally drop off and pick up my child:
Name:	
Address:	
Telephone:	Cell Phone:
Signature:	
This person w	ill drop off my child at camp at A.M., and pick up my child at Camp at
	emergency, or if the designated person cannot be contact to pick up my child, I hereby following persons(s) to pick up my child:
Name:	
Address:	
Telephone:	Cell Phone:
Signature:	