Little Flower School Summer Camp

Summer 2023 ~~ Art Exploration

Kids discover different artists, exploring a variety of materials and techniques at Little Flower's summer camp for kids ages 3-10 years old.

- Children do not have to attend Little Flower Catholic School
- Full summer (6 weekly sessions) and individual weekly options M-F from 8 am-3 pm
- There is a \$25 non-refundable registration fee per family
- Registration is per week only
- Children must be fully potty trained
- Each child should bring their own lunches, snacks, and water bottles
- Full payment due at the time of registration
- Registration closes <u>May 24th, 2023</u>. Refunds are not available after that date*
 *Excludes COVID-19 quarantine
- Little Flower will follow all current St. Louis County COVID-19 guidelines

Session Dates	Theme
Week 1 June 5June 9	Drawing Cartoon Style
Week 2 June 12 June 16	Painting & Printing
Week 3 June 1923	What's That? All About Abstract Art
June 26 July 7	No Summer Camp
June 26 July 7 Week 4 July 1014	No Summer Camp Sculpting with Clay, Sand, & Paper
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Submit your registration form to the Little Flower School office or via email to Catherine Jeltes at **cjeltes@littleflowerstl.org**. Make checks payable to **Little Flower School**.

In order to complete enrollment, full payment is due at the time of registration.*

* Campers not currently enrolled as students at Little Flower Catholic School must include a copy of immunization records for each child with registration.

Camp registration closes May 24, 2023.

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	amp Program June 5July 28* ration Bonus: Register by 3/1	\$990.00 \$960.00		=
	Program \$170.00 per week* ration Bonus: Register by 3/1 \$1	65.00 per week		
June 5 9	Drawing Cartoon Animals	# of Children	X	_ =
June 1216	Painting & Printing	# of Children	X	=
June 1923	Abstract Art	# of Children	X	_=
July 10 14	Sculpting with Clay, Sand, & Paper	# of Children	X	_=
July 17 21	Mixed Media: Collage & Layers	# of Children	X	=
July 24 28	Weaving with Paper & Yarn	# of Children	X	=
		Registration Fee		\$25.00
		Total An	nount Du	e
Child 1 Name	Age:	Birthday:	_	
Child 2 Name	Age:	Birthday:	_	
Child 3 Name	Age:	Birthday:	_	
Parent/Guardia	n:	Primary Phone:		
Address		Email		
Parent/Guardia	n: cial instructions for my child	Primary Phone:		
Emergency Co	ntact - In case of an emergency, I give pe	ermission for my child to rece	eive medic	cal treatment.
Name	Phor	ne:		
Parent/Guardia	ın Signature	 Date		

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Please complete both sections.

Walking	Field	Trip	Permission

I give my child/children	
	Child's/Children's Name(s)
Program. These field trips may walks to local parks (ie. AB Gre Memorial Library.	alking field trips* as a part of Little Flower's Summer Camp include but are not limited to walks around the neighborhood, en, Highland Park, The Heights, etc.) and Richmond Heights ue to COVID-19, dependent upon restrictions in place June/July
Parent/Guardian Signature	
Authorized Pick-U	puals authorized to pick-up your child/children.
1. Name:	Phone:
2. Name:	Phone:
3. Name:	Phone:
4. Name:	Phone:
5. Name:	Phone:

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ARCHDIOCESE OF ST. LOUIS

MEDIA AUTHORIZATION FORM

INTRODUCTION

For marketing and publicity purposes, there may be times when the school/parish/archdiocese wishes to use your

and/or your child(ren)'s image, name, recording purposes. As parent, you may choose the approximation form covers all members of your family at the	ropriate level(s) of authorization	
LEVELS OF AUTHORIZATION Parish/School: I grant permission to use my of communications that include, but are not limit admission videos, parish/school website and some yes No	ted to, parish bulletin, school ne	
Archdiocese of St. Louis: I grant permission to communications that include, but are not limi archdiocesan social media, <i>The e-Vangelizer</i> (ipublication(s) by agencies administered by the Yes No	ted to, archstl.org, St. Louis Rev newsletter published by the Cat	iew, Catholic St. Louis magazine,
Sponsoring Organizations: I grant permission websites, videos, and publications created by education but are not legally connected to the Tomorrow Educational Foundation, Roman Ca Tutoring Project, and United Way. Yes No	independent foundations and c Archdiocese of St. Louis, include	orporations that support Catholic ling, but not limited to, Today and
Secular media outlets: I grant permission to u secular media communications including, but Dispatch, KMOX radio, and KSDK-TV). Yes No	ise my or my child's image, nam not limited to, print, radio, TV a	e, recording, or academic work in nd internet (Examples: <i>St. Louis Post-</i>
FAMILY AUTHORIZATION (Please pr	rint clearly.)	
Family Name:		
Phone:		
Email:		
School Name:		
Parish Affiliation (if applicable):		
Parent 1 Name:		
Parent 2 Name:		
	101	14
Child(ren)'s Name (s):	Grade:	Age:
Parent/Legal Guardian		Date:
ignature:		