



LAUNCH ROCKS SUMMER!

LAUNCH ACADEMY FULL-DAY SUMMER CAMP 2023

Our mission at Launch is to enrich our students' regular curriculum by providing educational activities that increase self-esteem and push our students to challenge themselves by trying new things. We want to enjoy fun activities this summer and further academic achievement through optional small group academic tutoring. We have all been cooped up enough and believe we can enjoy togetherness safely! We will enjoy a variety of fun activities and classes, including playing in a band, fishing, music, art, basketball, volleyball, basic cooking skills, swimming, surfing and more.

1. We will continue everything else normally, including our operation hours from 9 a.m. to 3 p.m. (drop off at 8:45 a.m.), and our Monday through Thursday schedule.
2. Our summer field trip schedule may be affected by some closures. We will send individual field trip permission trips at the beginning of each week so each family can make a decision for their student.

Please contact Launch Academy front office at 832-457-2560 if you wish to schedule a student tour before camp sessions begin.

When:	<u>Session I</u> June 12 - July 13 <i>No Camp July 3 - 9</i> Monday - Thursday 9 a.m. - 3 p.m.	<u>Session II</u> July 17 - August 10 Monday - Thursday 9 a.m. - 3 p.m.
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Where: Launch Academy
5801 New Territory Blvd., Sugar Land, Texas 77479
Our campus is on the 2nd floor of Parkway United Methodist Church.

Daily Schedule:	Monday:	Op. Academics	9 a.m.-12 p.m.	
		Lunch Outdoors	12 - 12:45 p.m.	
		Enrichment	12:45 - 2 p.m.	
		Activities	2 - 3 p.m.	
	Tuesday:	Op. Academics	9 a.m. - 12 p.m.	
		Swim & Snow-Cones	12 - 3 p.m.	
	Wednesday: All-Day Field trip (3:30 p.m. pick-up time)			
	Thursday:	Op. Academics	9 - 10:30 a.m.	
			10:30 - 12 p.m.	
		Social Lunch	12 - 12:45 p.m.	
		Music, Art & More	2 - 3 p.m.	

Enrollment Requirements: Complete enrollment information, including *Parental Acknowledgment and Indemnification Form, Permission to Treat and Summary Health Form, Photography Release Form, Transportation Release Form* and separate registration forms for new students to Launch will be due by the first day of camp or attendee will be sent home. No exceptions will be made.

**LAUNCH ACADEMY
SUMMER CAMP REGISTRATION FORM**

Please fill out and return to:

Launch Academy
5801 New Territory
Blvd Sugar Land,
Texas 77479

or email to:

admin@mylaunchacademy.com

**LAUNCH ACADEMY
SUMMER CAMP PARENTAL ACKNOWLEDGEMENT, RELEASE OF LIABILITY
AND HOLD HARMLESS AND INDEMNIFICATION AGREEMENT**

Participant Name: _____ Date: _____

My child, _____, is a student in the Launch Summer Camp, and I, the undersigned, have chosen to allow my child to participate in the fieldtrip/program/activity offered at or by Launch Academy, Inc. (hereinafter Launch). My signature on this document fully acknowledges my permission for my child to participate in the program/activity stated above.

I acknowledge that this is a voluntary activity, and my child is not required to participate in these activities. I understand that Launch will not be responsible for any injuries and or damages occurring from an accident, injury, sickness, disease, pandemic, known or unknown, or other loss associated with my child's participation in the program/activity listed above.

I, _____ (Parent/Guardian), in exchange for Launch's agreement to allow my child to participate in the activity listed above, hereby RELEASE, ACQUIT, FOREVER DISCHARGE, AND HOLD HARMLESS, the Launch program, its owners, its agents, servants and employees, in their individual and official capacities, from any and all claims, arising from any and all injuries or damages related to any participation in the activities stated above.

I further voluntarily agree to Hold Harmless and Indemnify Launch, its agents and/or

employees, against any and all losses, costs, damages, liabilities, and expenses, including the costs of investigation and defense of legal actions and reasonable attorney's fees, arising out of, resulting from, or in any way related to my child's participation in the activities listed above.

I understand that neither Launch, nor its agents or employees, are waiving their immunity from liability they now have under Texas law.

We have read and understand the *Summer Camp Parental Acknowledgment, Release of Liability and Hold Harmless and Indemnification Agreement* form and by my/our signature below, voluntarily agree to terms set out in this document.

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____

Date: _____

Registration Fee Enclosed (Yes/No): _____

Summer Session 1
June 12 - July 13
No Camp July 3-7

Summer Session 2
July 17 - August 10

Please return this completed form with registration fee at time of sign up.

Make your check payable to Launch Academy. Camp registration fee is \$250 (and will be applied to the camp fee with remaining balance due June 10, 2022). Camp fees are \$1,000 per session. Classes are filled on a first-come, first-serve basis. All fees are non-refundable. Register early to secure your place.

No deductions will be made for late arrivals or early departures. Launch Academy reserves the right to dismiss any camper whose behavior is detrimental to other members of the camp organization. Any camper bringing illegal drugs, alcohol or tobacco to camp, or is in violation of Launch Academy rules and conduct, will be subject to dismissal.

Mother's Name: _____

Driver's License or Social Security #: _____

Work Phone:(____)____-____ **Cell Phone:**(____)____-____

Email Address: _____

Alternate Emergency Contact (other than parent)

Name:_____ **Relationship:**_____

Driver's License or Social Security #: _____

Work Phone:(____)____-____ **Cell Phone:**(____)____-____

Email Address: _____

Alternate Emergency Contact (other than parent)

Name:_____ **Relationship:**_____

Driver's License or Social Security #: _____

Work Phone:(____)____-____ **Cell Phone:**(____)____-____

Email Address: _____

PRIMARY CARE PHYSICIAN

Name: _____ **Phone:**(____)____-_____

Address: _____

MEDICAL INFORMATION

For severe allergies, provide "Emergency Health Care Plan" and contact Launch.

Allergies: _____

Current Medications: _____

Medical Conditions/Limitations: _____

Last Tetanus Shot: ____/____/____

INSURANCE INFORMATION

Launch does not carry insurance for the student

Policy Holder Name: _____ **Date of Birth:** _____

Insured's Soc. Sec. #: ____-____-____ **I.D. / Policy #:** _____

Group #: _____

Insured's Employer and Address: _____

Insurance Co. & Address: _____

Insurance Phone #: _____

Does policy require pre-authorization of non-emergency services? _____

PLEASE ATTACH A COPY OF YOUR INSURANCE CARD WITH THIS FORM



PERMISSION AND RELEASES

I give permission to the school to share information with others relevant to the health and safety of my child. Yes / No

In the event my child takes an overnight/weekend leave, I give consent to the school staff to dispense my child's prescribed medications to a responsible adult to administer. Yes / No

Signature of Parent or Guardian

Date



LAUNCH ACADEMY
Photography Release Agreement

I grant my permission to Launch Academy, its representatives and employees, the right to take photographs of my child, _____.

I authorize Launch Academy, its assignees and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Launch Academy may use such photographs of my child with or without their name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

I have read and understand the above:

Printed name of Parent or Guardian: _____

Signature of Parent or Guardian: _____

Date: _____

If student is an adult (18 and over), sign and date below.

Printed Student Name: _____

Student Signature: _____

Date: _____



**LAUNCH ACADEMY
TRANSPORTATION PERMISSION FORM**

I, _____, hereby give my permission for my child (student) _____, to travel in personal vehicles to participate in various activities offered by Launch Academy. I agree to assume all risks and hazards incident to my child's participation in these activities, including, but not limited to, transportation to and from the activities and the activities themselves. I hereby waive, release and agree to hold harmless Launch Academy, Administrators, and all Staff, volunteers, and affiliated organizations or persons from any injuries, harm, or other damages that may occur to me or my child in connection with Launch Academy. I understand that it is the responsibility of my child to follow the instructions and guidelines given to them by the adults in charge while on any school-related activity.

Parent Signature

Date

Home Phone

Cell Phone

If student is an adult (18 and over):

Student Signature

Date
