

# SONRISE Christian Day Camp

The BEST  
summer your kids  
will ever have!

Summer  
2010

**Kindergarten - 7th Grade**

Located at:

**Heights Christian Schools**

**Brea Friends Campus**

**200 S. Associated Road, Brea, CA 92821**

**714.990.8780**

**[www.breachristianschool.org](http://www.breachristianschool.org)**

# SONRISE CHRISTIAN DAY CAMP

## HEIGHTS CHRISTIAN SCHOOLS - BREA FRIENDS CAMPUS

200 S. Associated Road, Brea, CA 92821 • (714) 990-8780 • FAX (714) 990-4879 • [www.breachristianschool.org](http://www.breachristianschool.org)

### SUMMER 2010

**DATES:** June 14th - August 27th

**AGES:** Entering Kindergarten - Entering 7th Grade



### REGISTRATION BEGINS APRIL 5TH

\$35.00 on or before May 7th

\$50.00 after May 7th

Fee includes one camp T-shirt. Additional camp T-shirts are \$10 each.  
The registration fee is non-refundable.

**New!**

#### Daily Option

**\$45 per Day\***

6:30 AM - 6:00 PM

\*2-day minimum per week

\*\$55 for Knott's day

#### Weekly Option

**\$149 per Week**

8:30 AM - 4:00 PM (M-F) (Regular Hours)

**\$159 per Week**

6:30 AM - 6:00 PM (M-F) (Extended Hours)

A \$15.00 deposit per week enrolled is due at the time of registration. Deposits are non-refundable.

# LOWER-GRADES SCHEDULE

Week	Monday	Tuesday	Wednesday	Thursday	Friday
June 14-18	<u>Worship</u> Water Play	Craig Regional Park	Chuck E. Cheese	“Powerful Adventures”	Scooter’s Jungle
June 21-25	<u>Worship</u> Water Play	Carbon Canyon Regional Park	Splash! Waterslides	“Summer Olympics”	La Habra Bowl
June 28-July 2	<u>Worship</u> Water Play	Adventure City	“Perfectly Patriotic”	Skate Express	Brea Plunge and Park
July 5-9	••••••• 4th of July Observed •••••••	Yorba Regional Park	Soak City Waterslides	John’s Incredible Pizza	“Science Rocks”
July 12-16	<u>Worship</u> Water Play	Pump It Up!	“Tropical Island”	Michigan Park	Fullerton Theater “Peter Pan”
July 19-23	<u>Worship</u> Water Play	Brea Plunge And Park	Pretend City	*Knott’s Berry Farm	“Kings, Queens & Castles”
July 26-30	<u>Worship</u> Water Play	“America’s Most Talented”	Camelot Miniature Golf & Waterslides	Carbon Canyon Regional Park	Brea Theater “Aladdin”
August 2-6	<u>Worship</u> Water Play	LA Natural History Museum	Parnell Park	Guasti Water Park	“Chefs’ Challenge”
August 9-13	<u>Worship</u> Water Play	“Birthday Blast”	Scandia Amusement Park	Skate Express	Craig Regional Park
August 16-20	<u>Worship</u> Water Play	La Habra Children’s Museum	Scooter’s Jungle	Clark Regional Park	“Picture This”
August 23-27	<u>Worship</u> Water Play	La Habra Bowl	“Wacky West”	Chuck E. Cheese	Brea Plunge And Park

## Lower Grades

Many enrichment activities will be offered including crafts, motor development, games, singing, Bible teaching, and field trips, including amusement parks.



\*Knott’s day is \$55 for Campers enrolled in our “Daily Option.”  
Schedule subject to change without notice.

# Summertime!



# UPPER-GRADES SCHEDULE

## Upper Grades

These boys and girls have a variety of activities in which to participate that aim to promote personal growth and a sense of self-esteem, such as: music, sports, Crafts, small-group Bible studies and field trips, including amusement parks.



Week	Monday	Tuesday	Wednesday	Thursday	Friday
June 14-18	Worship Swimming	La Habra Bowl	"Powerful Adventures"	Carbon Canyon Regional Park	Chuck E. Cheese
June 21-25	Worship Swimming	Pump It Up!	"Summer Olympics"	Camelot Miniature Golf & Waterslides	Clark Regional Park
June 28-July 2	Worship Swimming	Skate Express	IMAX Theater & Science Center	Corona Del Mar Beach	"Perfectly Patriotic"
July 5-9	..... 4th of July Observed .....	Splash! Waterslides	"Science Rocks"	Scandia Amusement Park	Michigan Park
July 12-16	Worship Swimming	Corona Del Mar Beach	John's Incredible Pizza	"Tropical Island"	Fullerton Theater "Peter Pan"
July 19-23	Worship Swimming	*Knott's Berry Farm	Guasti Water Park	"Kings, Queens & Castles"	Carbon Canyon Regional Park
July 26-30	Worship Swimming	Corona Del Mar Beach	Angel's Baseball Game	"America's Most Talented"	Brea Theater "Aladdin"
August 2-6	Worship Swimming	"Chefs' Challenge"	Soak City Water Park	Chuck E. Cheese	Heritage Park
August 9-13	Worship Swimming	Corona Del Mar Beach	"Birthday Blast"	Petersen Automotive Museum	Adventure Playground
August 16-20	Worship Swimming	Pump it Up!	"Picture This"	Craig Regional Park	Splash! Waterslides
August 23-27	Worship Swimming	La Habra Bowl	"Wacky West"	Skate Express	Brea Plunge And Park

\*Knott's day is \$55 for Campers enrolled in our "Daily Option." Schedule subject to change without notice.



# Friends and Fun!



# SONRISE CHRISTIAN DAY CAMP 2010 REGISTRATION FORM

Heights Christian Schools—Brea Friends Campus  
200 S. Associated Road, Brea, CA 92821  
714.990.8780 • (fax) 714.990.4879

Office Use Only		Date:
Registration Fee		Amt:
\$15.00 x _____ weeks		Amt:
_____ Extra T-Shirt (s)		Amt:
_____ Weeks paid in-full		Amt:
Check#	Cash / Charge	Total:

## CHILD INFORMATION (ONE CHILD PER FORM, PLEASE)

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Parent Cell Phone #1 \_\_\_\_\_ Parent Cell Phone #2 \_\_\_\_\_

Grade in September \_\_\_\_\_ Birth Date \_\_\_\_\_ Sex \_\_\_\_\_ Do both parents have legal rights to the child? \_\_\_\_\_

Legal Custody of Child – Name \_\_\_\_\_ Relationship \_\_\_\_\_ Comments: \_\_\_\_\_

## PARENT INFORMATION

**1.** \_\_\_\_\_  
Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Married / Divorced / Separated / Single \_\_\_\_\_

Employer's Name \_\_\_\_\_ Employer's Address, City \_\_\_\_\_

Daytime Telephone # \_\_\_\_\_

Email Address \_\_\_\_\_

**2.** \_\_\_\_\_  
Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Married / Divorced / Separated / Single \_\_\_\_\_

Employer's Name \_\_\_\_\_ Employer's Address, City \_\_\_\_\_

Daytime Telephone # \_\_\_\_\_

Email Address \_\_\_\_\_

**3.** \_\_\_\_\_  
Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Married / Divorced / Separated / Single \_\_\_\_\_

Employer's Name \_\_\_\_\_ Employer's Address, City \_\_\_\_\_

Daytime Telephone # \_\_\_\_\_

Email Address \_\_\_\_\_

## EMERGENCY INFORMATION

IN THE EVENT OF SUDDEN ILLNESS OR ACCIDENT, AND INABILITY TO NOTIFY THE PARENTS, PLEASE CONTACT:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Daytime Telephone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Daytime Telephone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Daytime Telephone \_\_\_\_\_

ADULTS AUTHORIZED TO PICK UP YOUR CHILD  
(PLEASE INCLUDE PARENT NAMES)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

### SWIMMING ABILITIES OF YOUR CHILD

- \_\_\_\_\_ My child CANNOT swim
- \_\_\_\_\_ Beginner Swimmer
- \_\_\_\_\_ Intermediate Swimmer
- \_\_\_\_\_ Advanced Swimmer

### California Civil Code Section 25.8

#### Authorization of Medical Treatment of Minors

Either parent, if both parents have legal custody, or the parent or person having legal custody or the legal guardian of a minor may authorize in writing any adult person into whose care the minor has been entrusted to consent to any X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care to be rendered to said minor under the general or special supervision and upon the advice of a physician and surgeon licensed under the provisions of the Medicine Practice Act or to consent to an X-ray examination, anesthetic, dental or surgical diagnosis or treatment and hospital care to be rendered to said minor by a dentist licensed under the provisions of the Dental Practice Act (Added Stats. 1965, C. 1524, p. 3616, S.1).

## REGISTRATION DATES

Circle the weeks, days, and hours your child will attend.

(Regular Hours: 8:30-4:00 / Extended Hours: 6:30-6:00)

Week	Date	Days (Circle)	Hours (Circle)
1	6/14-6/18	ALL M T W TH F	REG / EXT
2	6/21-6/25	ALL M T W TH F	REG / EXT
3	6/28-7/02	ALL M T W TH F	REG / EXT
4	7/05-7/09	ALL M T W TH F	REG / EXT
5	7/12-7/16	ALL M T W TH F	REG / EXT
6	7/19-7/23	ALL M T W TH F	REG / EXT
7	7/26-7/30	ALL M T W TH F	REG / EXT
8	8/02-8/06	ALL M T W TH F	REG / EXT
9	8/09-8/13	ALL M T W TH F	REG / EXT
10	8/16-8/20	ALL M T W TH F	REG / EXT
11	8/23-8/27	ALL M T W TH F	REG / EXT

\_\_\_\_\_ x \$15.00 deposit = \$ \_\_\_\_\_  
 Total Weeks Deposit Due

## T-SHIRT SIZE

Write the number of T-shirts you want next to the size.

One T-shirt is free. Additional shirts are \$10 each.

We recommend purchasing at least one additional shirt.

Youth: \_\_\_\_\_Medium \_\_\_\_\_Large \_\_\_\_\_X-Large

Adult: \_\_\_\_\_Medium \_\_\_\_\_Large \_\_\_\_\_X-Large

## HEALTH RECORD

Date of last tetanus shot: \_\_\_\_\_

Any activity restrictions: \_\_\_\_\_

Check if your child has had the following and give details:

\_\_\_\_\_ asthma \_\_\_\_\_ allergic to bee stings

\_\_\_\_\_ allergies \_\_\_\_\_ epilepsy/seizures

\_\_\_\_\_ diabetes \_\_\_\_\_ heart trouble

\_\_\_\_\_ Other: \_\_\_\_\_

Details: \_\_\_\_\_

Guardian's Name: \_\_\_\_\_

Medical Insurance Company: \_\_\_\_\_

Member Number: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

City: \_\_\_\_\_ Telephone: \_\_\_\_\_

## PARENTAL CONSENT FOR

## EMERGENCY MEDICAL TREATMENT

Child's Name: \_\_\_\_\_

The undersigned, \_\_\_\_\_

who is one of the parents or legal guardian of the above-named child, a minor, who resides at the address listed on same, herein authorizes the adult sponsor of the Sunrise Christian Day Camp for the above stated activity, or any responsible adult person bearing this written authorization into whose said care the above mentioned minor has been entrusted, to consent to any X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care to be rendered to said minor under the general or specific supervision and upon the advice of a physician and surgeon licensed under the provisions of the California Medicine Practice Act, and to consent to an X-ray examination, anesthetic, dental or surgical diagnosis or treatment and hospital care to be rendered to said minor by a dentist licensed under the provisions of the California Dental Practice Act.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority and power on the part of said adult person to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician or dentist in the exercise of his best judgment may deem advisable. This authorization shall include transportation to receive the medical or dental care.

This authorization shall remain effective until the activity is terminated, unless sooner revoked in writing and delivered to the adult sponsor of aforesaid Sunrise Christian Day Camp activity.

\_\_\_\_\_  
 Signature of Parent or Legal Guardian Date

## FIELD TRIP PERMISSION & WAIVER

Throughout the summer program there will be many days that your child will be taking field trips, going to parks, etc. We are asking that you sign this form to cover the entire Day Camp program. All parents or guardians should be advised the Education Code Section 35330 provides that all persons or their parents taking a school/camp related trip waive all claims against the school for injury, accident, illness or death occurring during or by reason of the trip.

*I, the Undersigned, give my permission for my child to attend all trips to and from Sunrise Christian Day Camp and I understand the liability aspects as specified in Education Code Section 35330.*

*I have reviewed the day camp brochure, read the Emergency Medical Treatment and the Permission/Waiver consents, understand the policies of the program, and desire that my child participate in this program.*

\_\_\_\_\_  
 Signature of Parent or Legal Guardian Date

## All-Inclusive

The “Weekly Option” fee includes all field trips and admission costs. The “Daily Option” fee includes all field trips and admission costs, except Knott's. Knott's is an additional \$10.

Campers do not need to bring money to camp except on specified outings to purchase lunch, such as Theme Parks and Baseball Stadiums. In such cases, parents will be notified in advance.

## PAYMENT OPTIONS

### OPTION #1: In-Full

Payment in-full (for all the days/weeks attending) to be turned in with the registration fee and registration form.

### OPTION #2: Weekly

A \$15.00 deposit (per week attending) to be turned in with the registration fee and registration form.

Balance payment made every Monday.\*

(\*Except for “Daily Option” campers.  
See office for details.)

### What the Parents Say

*“Camp has been an awesome experience!”*

Mrs. W

*“My kids LOVE coming here!”*

Ms. H

*“My boys want to be Jr. Counselors one day!”*

Mrs. S

*“We’ll be back next summer!”*

Mrs. M

### What the Kids Say

*“It’s awesome because we go lots of places like theme parks and water parks!”*

Isabella

*“My favorite part is seeing my friends!”*

Stephen

*“I like swimming every week and I like the counselors.”*

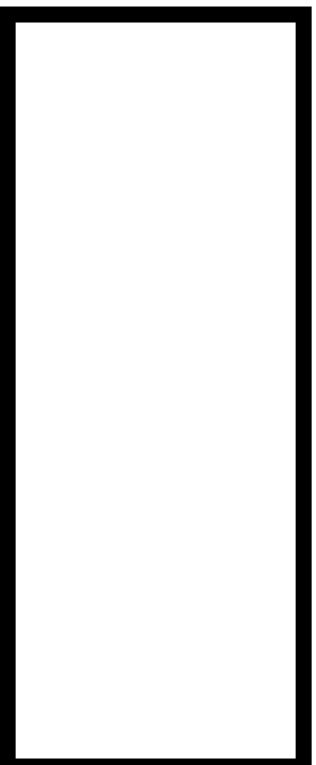
Rachel



# Great Memories!

# HEIGHTS Christian Schools

Brea Friends Campus  
200 S. Associated Road  
Brea, CA 92821



**SONRISE** Christian Day Camp  
The BEST Summer Your Kids Will Ever Have!!