This camp will educate campers, ages 10-13, on logic and the fundamentals of programming through the use of online gaming and robotics. Resources used for this camp are Code.org, Code Combat, and EV3 Robots.

AGE/DATES/TIMES:
Ages 10-13 / June 19-21, 2019 / Wednesday-Friday 8:00 AM-12:00 PM. (Registration is Now-May 24, 2019)

COST:
The registration fee for the entire camp is $70 which includes a T-shirt.

LOCATION:
Programming and Robotics Camp is hosted in Dow Young 121. This building is located on the Wesson campus of Copiah-Lincoln Community College.

ENROLLMENT:
The Programming and Robotics Camp is limited to 20 participants on a first come, first served basis due to staffing and facility use policies. In order to fully enroll a child, you must fill out the registration forms and submit to the Programming and Robotics Camp headquarters on the campus of Copiah-Lincoln Community College (Dow Young Office #226) or by email.

Contact Jamie Lambert for more information or to register at 601.643.8629 or Jamie.Lambert@colin.edu

Copiah-Lincoln Community College does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or other factors prohibited by law in any of its educational programs, activities, admissions, or employment practices.
2019 Programming and Robotics Camp

Dear Parent(s) or Legal Guardian(s):

Thank you for having an interest in Copiah-Lincoln Community College’s Programming and Robotics Camp. Below you will find basic information that will help you prepare your child for camp. In order for your child to participate in this camp, you need to:

1. Fill out the entire attached enrollment form;
2. Sign the attached youth release of liability form;
3. Pay a $70 registration fee and;
4. Drop off or email all registration materials and register before May 24th, by noon, to be guaranteed a T-Shirt.

Camp will begin for ages 10-13 on Wednesday, June 19, 2019 at 8:00 a.m. and camp will end Friday, June 21, 2019, at 12:00 p.m.

The first 20 participants to submit completed paperwork will be enrolled, but registration will run through the first day of camp until these spaces are filled. However, those that do not register by May 24th WILL NOT be guaranteed a T-Shirt.

DAILY SCHEDULE

Camp will operate from 8:00 a.m. until 12:00 p.m. Wednesday –Friday. Participant drop off will be from 8:00 a.m. to 8:30 a.m. at the Dow Young building at the Copiah-Lincoln Community College Wesson Campus. Pick-up will commence at 11:45 a.m. and last until 12:00 p.m. It is expected that parents consider coming into Dow Young and signing in/out participants.

FOOD & WATER

Breakfast will NOT be provided, so please ensure your child has a well-balanced breakfast prior to camp. Camp activities will begin at 8:30 a.m. This camp will have two Copiah-Lincoln instructors on staff during the duration of the camp that will be in charge of camper sign in/out.

ITEMS TO BRING TO CAMP EVERYDAY

- Willingness to Learn, Patience, and a Positive Attitude!

Learning to program takes time and patience. Programming is learned mostly by making mistakes and learning from them.
BEHAVIOR EXPECTATIONS

Since this is a structured and educational recreation camp, youth are expected to treat each other, staff, camp equipment, and the public with respect. Our goal is to provide campers with a physically and emotionally safe atmosphere. Inappropriate behavior will not be tolerated. Physical bullying (i.e. pushing, hitting, fighting) and emotional bullying (i.e. name calling, teasing, put downs, racial/ethnic slurs) will not be tolerated. Behavior mentioned above will be grounds for immediate dismissal from the camp, whether it is directed towards other campers, camp staff, or the public. Campers that are the target of such behavior must inform camp staff of the incident immediately. Behavioral guidelines are to be followed at all times regardless of the location of the activities. **If a child is expelled from camp, the child may not return to camp, and there will be no registration refunds.** In cases where there are major behavioral issues, the below sequences will take place:

<table>
<thead>
<tr>
<th>MAJOR BEHAVIORAL CONSEQUENCES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Offense – Warning</td>
</tr>
<tr>
<td>2nd Offense – Time Out</td>
</tr>
<tr>
<td>3rd Offense – Expulsion (Parent Pick-Up)</td>
</tr>
</tbody>
</table>

I look forward to having your child join us. If you have any questions, please do not hesitate to give me a call. We promise to make your child’s experience Programming and Robotics Camp happy and fun!

Respectfully,

Jamie Lambert, Camp Director
601-643-8629
Jamie.Lambert@colin.edu
REGISTRATION FORM PROGRAMMING AND ROBOTICS CAMP
Complete one for each child attending (if applicable)
(please print)

Child’s Full Name:_____________________

T-Shirt Size  (please circle one): Youth Size  S  M  L  -  Adult Size  S  M  L  XL

Parent/Legal Guardian’s Name:_________________________________________
Address: City, State, and ZIP:_________________________________________
Home Phone: ____________ Work Phone: ____________ Cell Phone:  __________
Email(s): ___________________________________________________________
Age of Child: Birth Date:  __________ School Grade (2019-2020):___________
Parent/Guardian’s Place of Employment & Address:_________________________

Please provide emergency contact names and phone numbers.

Name:______________ Relationship:______________ Phone:______________

Name:______________ Relationship:______________ Phone:______________

Camper Information:
Should we be aware of any medication that your child takes on a regular basis? Yes___No___
If yes, please list:

Should we be aware of any medical condition that your child has? Yes___ No___
If yes, please explain:

Does your child have any known allergies: Yes___ No___
If yes, please explain:

Is it permissible to give your child Children’s Tylenol if needed? Yes___ No___
**Times and Dates:** 8:00 am to 12:00 pm June 19- June 22

**Costs:** $70 Includes all instructional costs/materials, snacks. If campers must follow a particular diet, please provide your child with snacks that best fit their nutritional need. We do plan on having a variety of snacks and water for campers, but this is only a precaution.

**Parents’ Certification for Participation:** Note: required for ALL campers. Registration will be VOIED without signature.

This is to certify that as the parent or legal guardian of the above-indicated student; I give my permission for his/her participation in the 2019 Programming and Robotics camp. I further certify that I release from any and every liability, claim, right of action of any kind or nature which my child or legal representative may have for any and all bodily or personal injuries or property damages or any other damages resulting there from which might occur during participation in this program.

Parent/Legal Guardian’s Name (Print):_______________________________________________________

Parent/Legal Guardian’s Signature:__________________________________________________________

Date:_______________________

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**COPIAH-LINCOLN COMMUNITY COLLEGE**

**PROGRAMMING AND ROBOTICS CAMP 2019**

**REQUIRED PARENTAL AUTHORIZATIONS**

**PLEASE COMPLETE, SIGN AND DATE EACH OF THE PERMISSION SECTIONS BELOW:**

**Students Name:**____________________________________________________________

(please print)

**DELIVER AND RECEIVE**

The following people may deliver and receive my child: (please print)

(1) Name:______________________________________ Phone:______________________________

(2) Name:______________________________________ Phone:______________________________

(3) Name:______________________________________ Phone:______________________________

Signature:_______________________________________________________________

Date:_______________________
EMERGENCY MEDICAL TREATMENT

Copiah-Lincoln Community College has permission to obtain emergency medical treatment for my child, _________________________________________.
(Child's name, please print)

Signature: ________________________________

Date: ________________________________

PHOTOGRAPHY PERMISSION

My child may be photographed or videotaped during Robotics camp for educational, promotional or other non-commercial purposes.

Yes ______ No _______ Initials: _____________

DOCUMENTATION OF SPECIAL NEEDS AND/OR CRITICAL INFORMATION

Does your child have any special needs, limitations or restrictions from activities or other events of which we need to be aware? (i.e. physically, visually, hearing impaired, social, or religious) If so, please list these needs below:

CAMP RULES

All campers are expected to obey ALL Programming and Robotics Camp rules

• Follow directions;
• Be courteous to others;
• Respect the property and safety of others;
• Wear shoes with closed-toes;
• Remove caps and visors in buildings;
• DO NOT run, eat, or drink in buildings; and
• DO NOT litter.

Signature: ________________________________

Date: ________________________________

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Camp Payment Options

Completed Registration Forms and **Full Payments** can ONLY be hand-delivered to Jamie Lambert in Dow Young Faculty Suite #226. Camp capacity is 20.

**Checks** made out to: **Copiah-Lincoln Community College** and delivered to Jamie Lambert in Dow Young Faculty Suite #226 with completed registration form.

**Cash** to be delivered to Jamie Lambert in Dow Young Faculty Suite #226 with completed registration form.

**Credit Card** (BELOW) must be filled out entirely and delivered to Jamie Lambert in Dow Young Faculty Suite #226 with completed registration form. You may also scan and email your completed registration and credit card information (below) for to Jamie.Lambert@colin.edu.

Credit Card Number: _______________ - _______________ - _______________ - _______________

Expiration Date: _________________ / _________________ Security Code: _____________

Zip Code: _____________

Name on Card: ______________________________________________________________________

Amount to be charged on card: $_____________________

I _________________________________________________________________________________ give Copiah-Lincoln Community College permission to _______________________________________________________________________________________________________

(Full legal name)

charge my credit card for the amount listed above.

Credit Card Signature: _______________________________________________________________________________________________________

Email for receipt of payment: ____________________________________________________________________________________________________