

BV CLUB SUMMER CAMP 2024 GENERAL INFORMATION

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<ul style="list-style-type: none"> • ALL DAY at WCI with 3 Activity Times (9:30am, 1pm, 3:30pm) 	<ul style="list-style-type: none"> ALL DAY at WCI with 3 Activity Times (9:30am, 1pm, 3:30pm) • JUMPHOUSE STARTING AT 11:30 	<ul style="list-style-type: none"> • FIELD TRIP DAY (optional) • Activity Times for those that stay back 	<ul style="list-style-type: none"> ALL DAY at WCI with 3 Activity Times (9:30am, 1pm, 3:30pm) • WATERSLIDE STARTING AT 11:30 	<ul style="list-style-type: none"> • WHEELS DAY bike, scooter, & other wheels *please bring your own helmet • CIVIC PARK FOR LUNCH AT 11
<p>***We are OPEN 7am-6pm***</p>				

We will be located on the WCI campus this summer- the rooms are TBD

- **PLEASE SEND YOUR CHILD WITH LUNCH, A WATER BOTTLE, AND SUNSCREEN EVERYDAY**
- **BREAKFAST IS AVAILABLE FOR \$1**
- **DAILY AFTERNOON SNACK IS PROVIDED**
- **TOYS AND ELECTRONICS ARE OK TO BRING DAILY**
- **SCREEN TIME WILL BE LIMITED. BRING AT YOUR OWN RISK**
- **JUMPHOUSE AND WATERSLIDE DAYS WILL START AT 11AM**
- **PLEASE PLAN ON HAVING YOUR CHILDREN HERE BY 9:30AM IF THEY ARE ATTENDING THE WEEKLY OFF-SITE F/T**
- **WEEK 4: WE ARE CLOSED WEDNESDAY 6/19**
- **WEEK 6: WE ARE CLOSED THURSDAY 7/4**
- **WEEK 10: WE ARE CLOSED FRIDAY 8/9,**
- **MONDAY 8/12, & TUESDAY 8/13**

Buena Vista Club Summer Camp 2024

2372 Buena Vista Ave., Walnut Creek, CA 94597 ♦ (925) 930-0272 ♦ buonavistachildrenscenter@gmail.com

Child's Name: _____

Address: _____

Parent's Name(s): _____

Phone#: _____ Secondary Phone #: _____

Email: _____

****Forms are due by: FRIDAY MAY 17TH** (please email to buonavistachildrenscenter@gmail.com)

<u>WEEK #</u>	<u>FULL DAY</u> \$335 per week OR \$75 per day <u>*Mark the days</u> Ex (M-F) or(M,W,F)	<u>HALF DAY</u> \$250 per week OR \$55 per day <u>*Mark the days</u> Ex (M-F) or(M,W,F)	<u>TOTAL FEES:</u> <u>CIRCLE FT IF</u> <u>ATTENDING AND</u> <u>INCLUDE \$45 IN FEES</u>
#1: JUNE 3-7 F/T	\$ _____	\$ _____	F/T Y N \$ _____
#2: JUNE 10-14 F/T	\$ _____	\$ _____	F/T Y N \$ _____
#3: JUNE 17-21 *CLOSED WED JUNE 19TH	\$ _____	\$ _____	\$ _____ **M,T,TH,F \$268/\$200 (full day/half day)
#4: JUNE 24-28 F/T	\$ _____	\$ _____	F/T Y N \$ _____
#5: JULY 1-5 F/T *CLOSED THURS JULY 4TH	\$ _____	\$ _____	F/T Y N \$ _____ **T-F \$268/\$200 (full day/half day)
#6: JULY 8-12 F/T	\$ _____	\$ _____	F/T Y N \$ _____
#7: JULY 15-19 F/T	\$ _____	\$ _____	F/T Y N \$ _____
#8: JULY 22-26 F/T	\$ _____	\$ _____	F/T Y N \$ _____
#9: JULY 29-AUG 2 F/T	\$ _____	\$ _____	F/T Y N \$ _____
#10: AUG 5-AUGUST 8 F/T INCLUDED BBQ CLOSED FRI AUG 9TH	\$ _____	\$ _____	\$ _____ **M-TH \$268/\$200 (full day/half day)

Parent Signature: _____ Date: _____ Total: \$ _____

BV CLUB SUMMER CAMP 2024
FIELD TRIP PERMISSION AND CAMP LIABILITY FORM

My child, _____ has my permission to participate in BV CLUB field trips and off-campus excursions with The Buena Vista Club from JUNE 3RD- AUGUST 8TH, 2024. I understand that we may travel by chartered bus to and from the facility. I understand that my child should bring his/her own lunch.

I, _____ (PARENT/GUARDIAN) agree to hold harmless any employee, director, volunteer, or officer of The Buena Vista Children's Center (dab The Buena Vista Club) in any event of accident or injury during Club supervision. I also agree that if, for any reason, my child does not abide by Club's rules or regulations, I will be called to take my child home at my own expense.

Consent to Treatment of Minor & Authorization to Buena Vista Club to Give Such Treatment:

The Undersigned, as parent/legal guardian of the child printed on this form hereby authorizes The Buena Vista Children's Center (DBA The Buena Vista Club) and its delegated directors and staff to consent to any medical and hospital care to be rendered to said minor upon the advice of a licensed physician. This authorization is given pursuant to the provisions of Section 25.8 of the Civic Code of California. It is understood that is the time and circumstances reasonably permit, The Buena Vista Children's Center will endeavor but is not required to communicate with me prior to such treatment. The undersigned further agrees that The Buena Vista Children's Center and its delegated directors and staff are not legally or financially liable for any claim arising from any consent given in good faith in connection with such diagnosis or advised treatment. This authorization and consent to treatment of minor is given to The Buena Vista Children's Center in connection with any authorized event.

Parent/Guardian Signature

Date

Daytime Phone # : _____

FEEES

FULL DAYS 7am-6pm	\$335 per week	\$75 per FULL day
HALF DAYS ANY 5 OR LESS CONSECUTIVE HOURS	\$250 per week	\$55 per HALF day
\$45 ADDITIONAL FIELD TRIP FEES *10% SIBLING DISCOUNT ON THE LOWER TOTAL		

- NON-REFUNDABLE DEPOSIT OF 10% OF FEES DUE WITH CONTRACT
- 1ST PAYMENT DUE: JUNE 3RD, 2024, 2ND PAYMENT DUE: JULY 1ST, 2024
- PAYMENT CAN BE MADE BY CHECK, CASH, OR CREDIT CARD IN-PERSON (\$5 SERVICE FEE)

FIELD TRIPS

JUMP HOUSE EVERY TUESDAY, WATER SLIDE EVERY THURSDAY

WEEK #1:	6/5	BOOMERS AMUSEMENT PARK
WEEK #2:	6/12	CHUCK E CHEESE (LUNCH PROVIDED)
WEEK #3:	6/19	NO TRIP
WEEK #4:	6/26	LEGOLAND DISCOVERY MUSEUM (LUNCH PROVIDED)
WEEK #5:	7/3	MOVIE & PIZZA DOWNTOWN WC (LUNCH PROVIDED)
WEEK #6:	7/10	OAKLAND ZOO
WEEK #7:	7/17	MINI GOLF, PIZZA, AND YOGURT DOWNTOWN WC (LUNCH PROVIDED)
WEEK #8:	7/24	LAWRENCE HALL OF SCIENCE
WEEK #9:	7/31	TILDEN PARK (STEAM TRAIN, CAROUSEL, PETTING ZOO)
WEEK #10:	8/8	BBQ ON SITE (NO EXTRA FEE, LUNCH PROVIDED)

