**YOU’VE GOT THE WRITE ONE!**

**Summer Enrichment Camp 2018**

Dear Parents/Guardians;

Your child is invited to participate in our “You’ve Got the Write One” Summer Enrichment Camp to be held **July 16-20, 2018** at the College of Education and Human Development at the University of Louisville. The summer camp, led by U of L faculty members Dr. Caroline Sheffield and Dr. Ashley Arnold, will be an enrichment program for students entering grades 4-8, focusing on mathematics, writing, history and technology all centered on this year’s theme, “Under Construction.” Teams of practicing teachers and teacher education students will work with small groups of children to complete several instructional projects.

Campers will meet daily from **9:00 am**, until **2:45 pm** at the College of Education and Human Development. Besides participating in mathematics, writing, history and technology learning activities, campers will enjoy snacks and recreation with one another. We will provide a variety of instructional materials for our institute participants, as well as T-shirts and copies of their work. However, we ask that you provide **PROMPT** morning and afternoon transportation and a sack lunch. The fee for the camp is $90.00. A limited number of scholarships will be available to those in financial need. Scholarship applicants **MUST** provide proof of assistance such as income tax return, AFDC, food stamp card or supplemental security income card.

*To enroll your child, please email Patty Grimes at patty.grimes@louisville.edu (or call at 852-6593) for the application and photo release forms.*

**No applications will be accepted without a check.** Please make the check payable to University of Louisville. **This fee is non-refundable.** Mail a completed registration form, completed video release form and check to:

 Ms. Patty Grimes

 College of Education & Human Development

 Department of Middle/Secondary Education

 University of Louisville

 Louisville, KY 40292

We hope that your child will join us this summer!! Space is limited to 65 participants on a first-come, first-served basis.

This project is funded locally by the Pepsi-Cola General Bottlers, Inc.

Sincerely,

Caroline Sheffield, Ph.D. Ashley Arnold, Ph.D.

**“YOU’VE GOT THE WRITE ONE”**

**SUMMER ENRICHMENT CAMP 2018**

**APPLICATION FORM**

(please print)

Name of child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name you want on name tag: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Male: \_\_\_\_\_\_\_\_ Female: \_\_\_\_\_\_\_

Parent’s/Guardian name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_ St: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-shirt size (circle size):

Youth Medium Youth Large Adult Small

Adult Medium Adult Large Adult X-Large Adult XXL

In the event of a medical emergency, we will attempt to contact you first at:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone number)

If we are unsuccessful, we will contact your child’s physician at:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Physician’s name and phone number)

Comments/Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School your child attended during the 2017-2018 school year? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School your child will attend this fall: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade level to which your child is advancing: \_\_\_\_\_\_\_\_\_ (MUST be entering grades 4-8)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s/Guardian Signature Date

**SUMMER 2018 ENRICHMENT CAMP**

**PHOTO/VIDEOTAPE RELEASE FORM**

**Because this project is funded by Pepsi-Cola General Bottlers, Inc., the company may take videos or photos of the children during the summer enrichment program. These may be used on a webpage. This release form MUST be completed in order to process the registration.**

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, parent or guardian of

 (parent/guardian's name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do hereby give and grant unto the

 (student’s name)

instructors of the University of Louisville Summer Portfolio Institute Program permission to use and publish/air a photograph/videotape of my child. I do further certify that I am of full legal capacity to execute the foregoing authorization and release.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature – Parent/Guardian Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature – Witness Date