

# 2023

## Summer Day Camp Handbook & Registration Forms

For children - Ages 5 to 12



## Introduction

Welcome to the Bad Axe Parks & Rec. Summer Day Camp. The Day Camp Program offers you and your family a safe and secure environment for your child to have a wonderful and fun filled summer. Our staff is dedicated to providing quality programming and supervision of children. We look forward to a safe fun filled summer with your child. A wide variety of activities will be provided for your child. We encourage all children to participate in all the planned activities including:

Arts & Crafts  
Socialization Games  
Field Trips  
Guest Speakers & Entertainers  
Sporting Events  
Theme Days  
Physical Activities  
Splash Pad & Water Activities  
Academic Opportunities

In the following pages, you will find general information about Day Camp and rules that are provided to help you with any questions you may have. The children will be bringing home a calendar of monthly planned activities the first week of camp. You will also be able to find the information on the Bad Axe Park and Rec. Facebook page and also on the City of Bad Axe page. This calendar will also include supplies they may need to bring to complete an activity. If you have any additional questions, please feel free message the Bad Axe Park and Rec. Facebook page, email, or the use Remind app and we will get with you as soon as we can.



### **Payment & Procedures**

Children attending Park & Rec. Summer Day Camp must be between the ages of 5-12. **Please circle the one your child will be participating in.**

#### **Enrollment Cost**

##### **City Residents**

5 days (all field trips) \$300.00  
2 days (field trip days) \$250.00  
3 days NO field trips \$190.00  
2 days NO field trips \$125.00

##### **Non-City Residents**

5 days (all field trips) \$400.00  
2 days (field trip days) \$330.00  
3 days NO field trips \$265.00  
2 days NO field trips \$175.00

Enrollment must be paid in full Friday, July 11<sup>th</sup> with 75% down before the first day of camp. If a payment plan is needed it must be started on or before Friday, June 16<sup>th</sup>. Field trip payments are also due at the time of registration. This is done so we know the number of children attending and how many buses will be needed for each trip. If your child cannot attend a field trip or the trip is canceled due to weather, you will NOT be reimbursed. We are holding a spot on the bus for your child. If a field trip is canceled due to weather, we will attempt to reschedule the trip.

### **Program Plan**

Day Camp begins Monday, June 19<sup>th</sup> and runs through Friday July 28<sup>th</sup>. Camp is held at the Bad Axe City Park, located behind City Hall, next to the Bad Axe City Library. There will be no day camp July 3<sup>rd</sup> or 4<sup>th</sup>. The normal hours are from 9:00 a.m. – 2:00 p.m. Monday-Friday.

Field trips are on Tuesday and Thursday's. If your child will not be attending these field trips, they will not have camp on that day. If your child attends these field trips, they will need to be picked up at the normal pick of time of 2:00 p.m. unless the trip is scheduled to return later. TAT will be our form of transportation to and from field trips. Camp will start each day at 9:00 a.m. unless the trip is scheduled to begin earlier. Please be sure your child is not at the park before 8:45 a.m. each morning and this does include TAT Children. **Staff is not at the park before 8:45 a.m.** We cannot be responsible for them before this time. Also, please note the end time of the program for each day. Children are expected to be picked up promptly at 2:00 p.m. It is encouraged to send a backpack with your camper everyday to keep all of their belongings together, as well as a sweatshirt/jacket for chilly mornings.

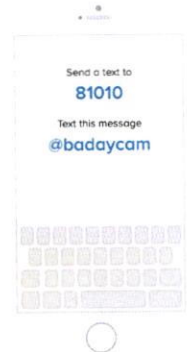


## **Picking Up and Dropping Off**

When your child comes to camp each morning they will have to sign in with their counselor. The parent/guardian will have to sign their child out in the afternoon. This is done with safety of your child in mind. We will only allow your child to leave with the person(s) you have specified on their registration form, a driver's license or some other proof of identification will be needed to verify who they are. If you know in advance that there will be a change in who picks up your child, please make a point to speak to your child's counselor. If you do not notify us, then your child will not be allowed to leave with that person. No child will be allowed to leave early at any time without permission from the parent/guardian. Please inform your child of this policy.

## **Communication**

We will be using Remind as the main mode of communication for Day Camp. To join the group, send a text to 81010 with the message "@badaycam". This will be the quickest way to get ahold of us. We will send reminders, updates, and announcements through this platform. Other forms of contact are messaging our facebook page or emailing.



## **Rain Policy**

On occasions when it rains, the best policy is to listen to WLEW (102.1 FM), look at the Bad Axe Park and Rec. Facebook page, and look out for an announcement from the Remind app. If it is raining in the morning before camp starts, it will most likely be cancelled or moved to the Bad Axe Public Schools. PLEASE CHECK FACEBOOK OR LISTEN TO THE RADIO. IF CAMP WILL BE CANCELLED OR THE LOCATION CHANGED, IT WILL BE ANNOUNCED BETWEEN 7:30 A.M. AND 8:00 A.M. For more information be sure to "Like" the City of Bad Axe Facebook Page and Bad Axe Park and Rec. Facebook page for updates and cancelations as well. If it starts raining after camp has already started, we will continue camp. Activities at the library or pavilion will be scheduled. If for whatever reason we cannot go to Bad Axe Schools, camp will be at Wilcox Park. You will be informed of this change.

## **Lunch**

Campers will need to bring their lunch to camp daily. If it will be an issue to provide your child with a lunch, please contact us, and we can make other arrangements. All requests will be confidential. Your camper will also need to bring a water bottle to camp daily.

## **Park Rules**

\*\*\*Please go over these with your child\*\*\*

1. Always check with your counselor first before going to the restroom, getting a drink, or to check out equipment. Staff needs to know the whereabouts of all the children at all times.
2. Be sure to sign in and out with your counselor everyday.
3. No one will be allowed to leave the park early without permission from his or her parent/guardian provided to their counselor prior to.

4. No Bullying (Bullying is a pattern of behavior by one towards another which is designed to hurt, injure, embarrass, upset, or cause discomfort to that person. Physical or verbal aggression).
5. Show courtesy and respect for others at all times
6. No swearing or obscene gestures. Your child will be sent home immediately.
7. Shoes and shirts are to be worn at all times. Water shoes are highly recommended for water days.
8. Please send a water bottle with your camper everyday.
9. Children are expected to respect the rights and property of the program and others.
10. There will be no climbing on, jumping off, or standing on the picnic tables.
11. Skate board ramps are off-limits during camp hours.
12. Electronics will not be allowed during camp hours. They need to stay in the camper's bookbag if they are brought.
13. No games such as king of the hill, fight club, etc will be allowed during camp hours.

### **Discipline Policy**

- First Offense: Verbal Warning. (With the exception of swearing, bullying\* or obscene gestures - a written warning will be given.)
- Second Offense: Asked to sit out for a short period of time with a written warning sent home to parents or spoken to when child is picked up.  
**(Bullying - dismissal from program)**
- Third Offense: Parents called; the child will need to be picked up.
- Fourth Offense: No longer allowed to attend the day camp program. **NO REFUND!**

### **20-2-1 Summer Challenge**

Summertime indeed means sun and fun, but learning should hardly take a vacation. Many students lose up to two to three months of grade-level equivalency in math, reading, and other academic skills over the summer months. This phenomenon is known as the summer slide. To combat this, the National Summer Learning Association (NSLA) has come up with the 20-2-1 summer challenge. This includes:

- Read something of interest for at least **20** minutes every day.
- Pick **two** choice activities to participate in.
- Do **one** math activity every day.

We will be utilizing the library for our 20 minutes of reading on Monday/Wednesday/Friday. Campers may bring a book/magazine on Tuesday/Thursday for the bus ride to and from our field trips. Camp will provide a small selection of reading materials for the campers that do not bring anything.

The campers will be keeping track on a log at camp of the days that they complete all three of the activities (Monday-Friday only). For campers that only come on field trip days or campers that have

to miss a day of camp, they will have the opportunity to complete the challenge at home and have a parent sign their log. At the end of the summer, the campers will be awarded a prize based on the number of days they complete.

### **2023 Field Trip Schedule**

\*subject to change based on weather conditions

6/20: Theater

6/22: Port Austin Beach

6/27: Huron County Arboretum

6/29: Caseville Roller Rink

7/6: Covenant Hills Camp & Retreat

7/11: Camper's Haven

7/13: Blake's Cider Mill & Orchard

7/18: Cooking & Baking Day

7/20: Octagon Barn

7/25: NERF Day

7/27: Harbor Beach Beach

7/28: Bounce House & Face Painting

### Parent Information:

Date of Birth

Work Phone Number

City, State, Zip

Work Phone Number

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Phone

City, State, Zip

Policy / Group Number

Yes \_\_\_\_\_ No \_\_\_\_\_

If staff has to administer medication, a medication release for **MUST** be issued.

Bike \_\_\_\_\_ TAT \_\_\_\_\_ Walking \_\_\_\_\_ Parent \_\_\_\_\_

Other persons my child may be released to: \_\_\_\_\_

**Permission's Waiver and Authorizations:**

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

The above-named child has my permission to attend the Bad Axe Parks and Recreation Summer Day Camp Program. I realize that by signing this form, I will not hold the city of Bad Axe, its employees, or organizers of the program responsible for any injuries that may occur during the program hours. I also realize that the staff and program organizer will do everything possible to offer a safe and injury-free program. I also realize that by participating in this program there is a certain degree of risk and that injury may occur.

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date

I here by give my permission to the Bad Axe Park and Recreation Staff to obtain emergency medical and or surgical treatment for the above-named minor/ child of such treatment is deemed by professional, trained medical personnel. I also understand that the Bad Axe Parks and Recreation/ City of Bad Axe will not be held responsible for any medical cost.

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date

I hereby assume full responsibility for the behavior of my child. I realize that my child may be dismissed for the program due to inappropriate behavior/bullying that disrupts the program and/or actions that may cause harm to themselves, or other children and/or staff. In the event that he or she damages or destroys property belonging to the Summer Day Camp Program, Bad Axe Parks and Recreation or any other vendor or contractor associated with the program, I will replace the damaged item (s), equipment and/or materials.

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date

I hereby realize that for my child's security and the security of all the children registered, program staff cannot and will not release a child to someone not listed on the child's information records. I also hereby realize that the staff may, at their discretion request to see identification of those picking up my child if they are unfamiliar with the individual.

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date

I hereby agree to allow the Bad Axe Park and Recreation Department and all media to use, produce and/or reproduce my child's name, picture and/or likeness to promote, provide coverage for/or any other official business as needed.

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date



## **Child's Medication Release Form**

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

I, the undersigned parent/legal guardian, acknowledge that my child is in good health. I understand that I must list any health restrictions, allergies, or medications in the space provided below that pertain to the above-named child.

The above-named child has the following:

Health Restrictions:

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Allergies:

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Medications:

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I understand that the Bad Axe Summer Day Camp Program will not be responsible for anything that may happen as a result of health information incorrectly shared or not shared or not shared on this form.

I assume complete responsibility that my child is in good health and assume responsibility for my child's state of health while he/she is in attendance at Bad Axe Summer Day Camp.

\_\_\_\_\_  
Print Parent/Guardian Name

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date

## **Parental Consent, Warranty of Physical Health and Waiver of Liability**

We, being either the natural or adoptive parents or legal guardian for the individuals whose names are set forth on the registration form, represent and warrant that the child is physically healthy and able to participate in the activities for which the child is registered, acknowledging the full understanding of such activities and an opportunity to review with the Department any and all questions regarding such activities. We further represent that to our knowledge, such child or children have no physical health problems, which would affect participation. We further represent that we have full authority on behalf of such child or children to consent to the child's participation and do consent to such participation. We acknowledge that participation in recreational activities carries the risk of serious injury or death from occurrences during such activities, including, but not limited to. Being struck by objects, slip, trip or fall, being injured by other participants, and other health hazards. We fully release and absolve from liability the Bad Axe Parks & Recreation Department, its employees, agents' contractors, and those participating with it from any and all liability, injury or damages on behalf of our child, and individually on behalf of us. This release extends to personal and bodily injury, as well as property damage. The above includes a waiver of liability and should be read carefully and fully before signing. I the undersigned, hereby agree to allow the individual(s) name hereon to participate in the Bad Axe Parks & Recreation activities. I certify that, to the best of my knowledge, the participant(s) named hereon is/are physically fit and able to engage in Parks & Recreation activities. In case of emergency, I give my permission for emergency medical treatment. This form shall be considered valid until canceled or changed in writing by the undersigned parent/guardian/participant. I hereby authorize the Bad Axe Parks & Recreation Department to use all photos, both video and audio portion of videotapes on which my dependent or I appear. I understand that portions of these tapes may be used in other programs, training aids, and productions at the discretion of the Bad Axe Parks & Recreation Department.

Allergies, if any (use back if necessary):

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Parents/Guardian Signature

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Date

## Field Trips & Special Activities

I give my child \_\_\_\_\_ permission to attend all field trips scheduled through the Bad Axe Parks & Recreation program. I understand if I do not wish for my child to attend a field trip, I will not send my child to Day Camp on that date. I understand that various trips may include water activities and I will provide the appropriate water safety devices needed (swim wings, life jacket, etc..) on those given trips.

\_\_\_\_\_  
Parents/Guardian Signature

\_\_\_\_\_  
Date

I **DO NOT** give my child \_\_\_\_\_ permission to attend any scheduled field trips.

\_\_\_\_\_  
Parents/Guardian Signature

\_\_\_\_\_  
Date

## RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration for participating in canoeing, kayaking, paddle boarding, and swimming, and for all other good and valuable considerations, I hereby agree to release and discharge from liability IHF, LLC (dba Camper's Haven Family Campground) and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Camper's Haven"), on behalf of myself and my children, parents, heirs, assigns, personal representatives and estates, and also agree to the following:

1. I acknowledge that the sports of canoeing, kayaking, paddle boarding, and swimming involve known and unanticipated risks, which could result in physical and/or emotional injury, paralysis, permanent disability, death, and property damage. Risks include, but are not limited to, death as a result of drowning or brain damage caused by near drowning; broken bones, torn ligaments or strains as a result of falls while launching boats or entering/exiting the water, or while moving a boat or paddle board; medial conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent with this activity that might have been caused by the negligence of Camper's Haven. My participation (or my children's/wards') in these activities is completely voluntary and I (we) elect to participate despite the risks. In addition, if at any time I (we) believe that activity conditions are unsafe or that I (we) am unable to participate due to physical or medical conditions, I (we) will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Camper's Haven from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment of facilities, arising from negligence or accidental occurrences. This release does not apply to claims arising from intentional conduct. Should Camper's Haven or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless of all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I (myself or my children/wards) may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of—all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so solely in the state where the Camper's Haven facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of this agreement is found to be void or unenforceable, that remaining portions shall remain in full force and effect.
7. I understand that by completing this form for a minor child, whether or not I am the child's legal guardian, that the child(ren) I have listed on this form have my permission (or their legal guardian's permission). I understand that if a conflict of permission arises that I am responsible for the discrepancy.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

In consideration of the services of IHF, LLC (dba Camper's Haven Family Campground), their owners, directors, officers, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Camper's Haven"), I do hereby agree as follows:

1. I understand that the Jumping Pillow and miniature golf are fun-filled family activities which are safe when all safety rules are followed. By purchasing a wristband or Fun Pass and signing this form, I hereby agree to be held solely responsible for all persons listed on this form, insuring that they understand and follow all rules. **All children under 18 must have an adult present to enforce pillow safety rules. Jumping pillow rules are posted at the entrance to the pillow enclosure.**
2. I have been advised that the jumping pillow is NOT safe for pregnant women, the elderly, or those with health concerns. Please consult a physician if you have any doubts as to your ability to participate in this activity.
3. I acknowledge that the Jumping Pillow and miniature golf involve known and unanticipated risks. Such risks include but are not limited to: physical and/or emotional injury, paralysis, permanent disability, death, and property damage. I understand such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. I accept responsibility for these risks and others not specified on behalf of myself and any minor children I have listed on this form.
4. I declare that my participation in these activities is voluntary; no one is forcing me to participate in spite of the risks. I certify that I am physically capable of participating in this activity. Therefore, I assume responsibility for myself and any minor children listed on this form, for any occurrences of bodily injury, death, and loss of personal property and expenses incurred as a result of those inherent risks and dangers of my negligence in participating in this activity.



I have had sufficient time to read this entire document and should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. I have read and understood this document and I accept the terms and conditions stated. I acknowledge that this agreement shall be effective and binding upon me, my heirs, assigns, personal representatives, estates, and for all minor children accompanying me. I acknowledge I am not relying on any oral, written, or visual representations or statements made by Camper's Haven, including those made in brochures or electronic communication, to induce me to participate in this activity.

Parent or Guardian Additional Agreement  
(Must be completed for participants under the age of 18)

In consideration of the following minor children, which I hereby agree to be responsible for according to all of the items listed in this agreement:

Being permitted to participate in this activity, I further agree to indemnify and hold harmless Camper's Haven from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Participating Minor \_\_\_\_\_ ☐ may use the boats without supervision  
☐ CANNOT use the boats without supervision

Participating Minor \_\_\_\_\_ ☐ may use the boats without supervision  
☐ CANNOT use the boats without supervision

Participating Minor \_\_\_\_\_ ☐ may use the boats without supervision  
☐ CANNOT use the boats without supervision

Participating Minor \_\_\_\_\_ ☐ may use the boats without supervision  
☐ CANNOT use the boats without supervision

Participating Minor \_\_\_\_\_ ☐ may use the boats without supervision  
☐ CANNOT use the boats without supervision

Participating Minor \_\_\_\_\_ ☐ may use the boats without supervision  
☐ CANNOT use the boats without supervision

Participating Minor \_\_\_\_\_ ☐ may use the boats without supervision  
☐ CANNOT use the boats without supervision

Participating Minor \_\_\_\_\_ ☐ may use the boats without supervision  
☐ CANNOT use the boats without supervision

Participant or Parent/Responsible Party (Print Name) \_\_\_\_\_ Phone \_\_\_\_\_

Your Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Participant or Parent/Responsible Signature \_\_\_\_\_ Date \_\_\_\_\_

# WAIVER, RELEASE, AND INDEMNIFICATION

## COVENANT HILLS CAMP & RETREAT WAIVER

UPON CAREFUL READING AND CONSIDERATION, \_\_\_\_\_ (Print Name of Participant),

RECOGNIZES THAT SOME OF THE ACTIVITIES FOR WHICH HE/SHE DESIRES TO PARTICIPATE IN AT COVENANT HILLS CAMP & RETREAT INHERENTLY CARRY THE RISK OF INJURY, IN ADDITION TO THE NORMAL RISKS ASSOCIATED WITH BEING AT CAMP PROPERTY AND REGULAR ACTIVITIES. PARTICIPANT HAS ASKED TO PARTICIPATE AND ACKNOWLEDGES THE INHERENT RISK OF INJURY AND HARM. BY SIGNING BELOW, IN CONSIDERATION OF, AND AS PART OF PAYMENT FOR THE RIGHT TO PARTICIPATE IN ACTIVITIES ARRANGED AND PROVIDED FOR PARTICIPANT BY COVENANT HILLS CAMP & RETREAT, PARTICIPANT AGREES TO ASSUME THE RISK OF WHICH MAY RESULT IN VARIOUS TYPES OF INJURY INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING:

SICKNESS, EXPOSURE TO INFECTIOUS/COMMUNICABLE DISEASE, BODILY INJURY, DEATH, EMOTIONAL INJURY, PERSONAL INJURY, PROPERTY DAMAGE, AND FINANCIAL DAMAGE ASSOCIATED WITH COVENANT HILLS CAMP & RETREAT ACTIVITY PROGRAMS, AND TO RELEASE AND INDEMNIFY COVENANT HILLS CAMP & RETREAT, IT'S OFFICERS, DIRECTORS, EMPLOYEES, AND AGENTS FROM AND AGAINST ANY AND ALL LIABILITY FOR NEGLIGENCE AND COSTS IN CONNECTION WITH PARTICIPANT'S PARTICIPATION IN ACTIVITY PROGRAMS AT COVENANT HILLS CAMP & RETREAT.

While Covenant Hills Camp & Retreat (CHC) does not want to frighten you or reduce your enthusiasm for these activities, CHC does acknowledge and advise that it is important for Participant to be informed and know in advance about inherent risks. You hereby attest as follows:

By signing below, I acknowledge that I have asked to participate in the CHC activities, programs, and related events. Among others, these activities include, but limited to, hiking, tubing, sledding, ropes course, climbing, zip line, archery, all waterfront activities, playground equipment, outdoor and indoor play, horse/wagon rides, campfires and others, I understand that participation in these activities is not without risk.

I understand that no activity program is absolutely safe and free of risk. I agree to assume full responsibility for myself and for my family, including minor children. I expressly assume all risk and responsibility involving accidents sustained while participating in activities and the program at CHC resulting from negligence on my part and that of my family or officers, directors, employees, and agents of Covenant Hills Camp & Retreat.

I affirm that I am fully capable of participating in the activities and that my general health is good, and that I do not have any conditions that might endanger the life or health of myself or others participating in camp activities. I affirm that I know of no reason why I should not participate.

I understand the signature of the parent or guardian for a minor on this document is intended to have the parent or guardian be bound and commit the parent or guardian to not take action on behalf of such minor child.

This ACKNOWLEDGEMENT & ASSUMPTION OF RISK, WAIVER, RELEASE AND INDEMNIFICATION liability release and indemnification agreement shall legally binding upon my heirs, assigns, legal guardians, personal representatives, and myself. I have carefully read this agreement and understand its contents. I am aware that I am releasing certain rights of my own free will that I otherwise may have.

☐ Unless checked, I give my permission for the use of photographs and/or video including my son/daughter/myself to be used in camp publicity.

\_\_\_\_\_  
PARTICIPANT SIGNATURE

\_\_\_\_\_  
DATE

If Participant is a minor:

\_\_\_\_\_  
PARENT OR GUARDIAN

\_\_\_\_\_  
DATE

(Updated 5/15/2020)

## 20-2-1 Summer Challenge Log

Name: \_\_\_\_\_ Counselor: \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Date: \_\_\_\_\_ Parent Initials: \_\_\_\_\_

Reading Material: \_\_\_\_\_

Math Activity: \_\_\_\_\_

Choice Activities: 1) \_\_\_\_\_ 2) \_\_\_\_\_