

# Winter Break Day Camp 2021



For school-aged children in grades K-6

\$40/day for members;  
\$45/day for non-members.  
Early drop-off and late pick-up  
are available for \$5/session.

## Let it Snow (Monday, December 27)

Express yourself artistically as we make some crafty winter creations! Design your own snow globe, build a snowman, and create some icy works of art.

## Maker Mania (Tuesday, December 28)

Get ready to create! This hands-on experience invites you to use your imagination through making and building. Design a gingerbread house, build an obstacle course, create a bobble head and anything else you can imagine.

## Arctic Animal Habitats (Wednesday, December 29)

Take a trip to the Arctic Circle and discover what makes it one of the most unusual environments on Earth. Create your own Arctic animal habitat and learn how these creatures have adapted to survive in the most extreme temperatures.

## New Year's Celebration (Thursday, December 30)

Count down to 2021! Make some noise while creating firework art, design your own headband, and get ready to ring in the new year!

## Lego Coding (Monday, January 3)

**Presented by L. David Mounts Foundation**

Calling all LEGO enthusiasts– it's time to level up! Experiment with coding using LEGO WeDo kits to make your creations come to life.

## Space Quest (Tuesday, January 4)

5-4-3-2-1 BLAST OFF! Join us on a fantastic journey through our solar system, galaxy, and beyond. Make your own rocket, let it fly, and take a journey to space in our Planetarium!



400 W Hanes Mill Rd  
Winston-Salem, NC 27105  
(336) 767-6730  
kaleideum.org

**Members: \$40/day**  
**Non-members: \$45/day**

**Camp Times: 9 am—4 pm**

- Let it Snow (Dec 27)
- Maker Mania (Dec 28)
- Arctic Animal Habitats (Dec 29)
- New Year's Celebration (Dec 30)
- Lego Coding (Jan 3)
- Space Quest (Jan 4)

**EARLY drop-off (8-9 am)—\$5/day**  
Check date(s) needed:

- Monday, December 27
- Tuesday, December 28
- Wednesday, December 29
- Thursday, December 30
- Monday, January 3
- Tuesday, January 4

**LATE pick-up (4-5:30 pm)—\$5/day**  
Check date(s) needed:

- Monday, December 27
- Tuesday, December 28
- Wednesday, December 29
- Thursday, December 30
- Monday, January 3
- Tuesday, January 4

**Mail completed registration form and HEALTH ASSESSMENT FORM with payment by 12/17/20 to:**  
Kaleideum North  
Attn: Lindsay Douglas  
400 West Hanes Mill Rd  
Winston-Salem NC 27105

Or save a stamp and register online at [kaleideum.org](http://kaleideum.org)! Online registration closes 24 hours before the start of camp or when full. To be fully registered, a HEALTH ASSESSMENT FORM must be emailed to Lindsay Douglas.

**For questions contact:**  
[ldouglas@kaleideum.org](mailto:ldouglas@kaleideum.org)  
(336) 714-7114

**Winter Day Camp Registration Form**

*Please use a separate form for each child.*

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

Caregiver's Name: \_\_\_\_\_

Phone: (     )     -     Email: \_\_\_\_\_

Are you a Kaleideum Member?  No  Yes, Expiration: \_\_\_/\_\_\_/\_\_\_

**Camp Fee: Kaleideum Member: \$40 x \_\_\_\_\_ (# of days) = \$ \_\_\_\_\_**

**Non-member: \$45 x \_\_\_\_\_ (# of days) = \$ \_\_\_\_\_**

**Early drop-off: \$5 x \_\_\_\_\_ (# of days) = \$ \_\_\_\_\_**

**Late pick-up: \$5 x \_\_\_\_\_ (# of days) = \$ \_\_\_\_\_**

**\$ \_\_\_\_\_ TOTAL**

**Payment Information**

Cash  Check (to Kaleideum)  Visa  MasterCard  AmEx  Discover

Name on card: \_\_\_\_\_ Expiration: \_\_\_/\_\_\_

Card number: \_\_\_\_\_ CVC: \_\_\_\_\_

Billing Address \_\_\_\_\_

**Emergency Contact and Medical Information**

Name (if caregiver can't be reached): \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Phone: (     )     -

Name (if caregiver can't be reached): \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Phone: (     )     -

Medical Conditions or Allergies: \_\_\_\_\_

**These people are authorized to pick my child up from camp .**

Name \_\_\_\_\_ Phone: (     )     -

Name \_\_\_\_\_ Phone: (     )     -

Name \_\_\_\_\_ Phone: (     )     -

**Medical and Photography Authorization**

I authorize a Kaleideum representative to seek appropriate medical attention for my child, including the right to authorize medical care in my absence. I understand that I am financially responsible for all medical treatment. I also understand that my child may be photographed during camp and that these photos may be used by Kaleideum for promotional purposes. If I don't want my child to be photographed, I will include a written request with this form.

**Caregiver/Guardian Signature:** \_\_\_\_\_