

Southpoint Academy
2021 Summer Quest for Knowledge
Day Program
Information Sheet

Enroll your child now for a fun-filled summer at Summer Quest for Knowledge Day Camp, sponsored by Southpoint Academy. Each week will be packed with fun filled educational and recreational activities. Fun outings and field trips will also be scheduled throughout the program.

WHO: Completed Kindergarten through completed 5th Grade
Entering kindergarten (Enrichment Program), call for more information.

DATES: June 21 – August 6 (Monday-Friday)

TIME: 8:00 a.m. – 5:30 p.m.
Campers need to be present by 9:00 a.m. each day.

COST: Includes weekly field trips, materials, activities, and snacks.

\$100 Registration Fee (Non-refundable)

\$250/week (More than 2 days, full weekly rate is charged)

\$60/day for part-time (2 days or less);

\$1/minute late pick-up charge after 5:30 pm

QUESTIONS: Contact Southpoint Academy (919) 544-5652.

- Weekly fees are due the Friday preceding the upcoming week your child attends.
- Part-time fees are due first attended day of week.

Daily Schedule

8:00-8:30 a.m. - Arrival Activities

8:30 a.m. - Morning Snack

9:00 a.m. -Academic Based Activity
(2 - 3 Days, activities vary daily)

-Reading

-Math

-Financial Literacy

-STEAM

-Healthy Living & Safety

11:00 a.m. - Recreational Activities

12:00 p.m. - Lunch

1:00 p.m. - Quiet Time/D.E.A.R/
Movie/Reflection Time

2:00 p.m. - Activity Time:

(Character Development

Class/Arts/Crafts/Physical Activity)

3:00 p.m. - Afternoon Snack &

Review

4:00 p.m. - Departure Activities

5:30 p.m. - Program end time

Note: Quest for knowledge will be held a minimum of two days per week and Character classes every day for all students. Classes consist of the following: STEAM, Phonics, Math, Language Arts, Financial Literacy, Reading, and much more. Above schedule is tentative and subject to changes.

Southpoint Academy
2021 Summer Quest for Knowledge Camp
Registration Form

Name of Camper: _____ Date of Birth: _____ Age: _____

School: _____ Completed Grade: _____

Parent/Guardian's Name(s): _____

Address: (Include City, Zip Code) _____

Phone Numbers: Dad (H): _____ (W) _____ (C) _____

Mom (H): _____ (W) _____ (C) _____

Email Address: _____

Emergency Contact: _____

Physician's Name _____ Phone _____

Health Insurance Company: _____

Policy Number: _____ Phone _____

Allergies/Medications: _____

Please check the appropriate week(s) your child will attend camp.

- | | |
|--|--|
| <input type="checkbox"/> June 21 – Jun 25 | <input type="checkbox"/> July 19 - July 23 |
| <input type="checkbox"/> June 28 - July 2 | <input type="checkbox"/> July 26 - July 30 |
| <input type="checkbox"/> July 6 - July 9 (Closed July 5 –
Observing Independence Day) | <input type="checkbox"/> August 2 - 6 |
| <input type="checkbox"/> July 12 – July 16 | |

We are financially responsible for the weeks we reserve and will pay on Friday preceding upcoming week or the first day attended. If our child needs medical services, staff members of Southpoint Academy have our consent to take our child to a properly licensed practicing physician or to call EMS. We release Southpoint Academy and its staff from any and all liability in such situations.

Enclosed is our Registration Fee of \$_____ \$100 non-refundable.
Please make check payable to **Southpoint Academy** and bring or send to:
7415 Fayetteville Street, Durham, NC 27713

Parent/Guardian's Signature _____ Date: _____

Parent/Guardian's Signature _____ Date: _____