



*...in partnership with
The Ministry of Carriacou & Petite Martinique*

Summer Camp 2K10 - What an adventure!

Your child will begin his adventure this summer at Camp Kayak - L'Esterre. He/She will explore a new world of art, music, food & creative inspiration; and maybe have their first experiences with foreign teachers, visiting artists/mentors from abroad, and students from other parts of Carriacou & Petite Martinique. It is very important to explain to your child that respectful behavior and kindness are part of our motto every day - we strive to create a program that is free of cliques, disrespect or discrimination - we are all at the camp to have fun and enjoy each other in a safe and happy environment!

Every precaution will be taken to safe guard your child at Camp and on field trips, as well as other activities, but "Camp Kayak" cannot assume responsibility for possible accidents or normal play scrapes and cuts.

With the understanding that common sense measures are taken to ensure the safety of all Campers, I authorize my child to take part in all Camp activities.

Child's name: _____

I hereby release "Camp Kayak", any of it's personnel, and any accompanying parents, bus drivers, and mentors from any liability whatsoever in the event that a child is injured, unless such injury us a result of willful negligence on the part of Camp Kayak, any of it's personnel or accompanying parents, bus drivers and counselor/mentors. This consent and release shall be effective from the date shown below and shall continue in effect until the child is withdrawn from "Camp Kayak". Please return to the manager ASAP – your child cannot attend until this form is on file with us.

Parent/Guardian's name: _____ Date: _____

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To better understand your child, please answer (together w/ them) the following questions about your child and return the form to the Camp Kayak Director. Please be advised that this form is Strictly Confidential. What does that mean?

Camp Kayak collects this information in order to fully understand the diversity of our student body. This information allows our Artist/Mentors to develop programs that fully meet the needs of our campers and improve our program now and into the future. If you do not feel comfortable answering any question DON'T answer it.

Child's Name: _____

Child's Birth Date _____ Gender: _ M _ / _ F _____

Primary School Name _____

Parent's names, phone number, local address & e-mail address:

Emergency Contact name & cell number: _____

1-Does your child have brothers and sisters? _____

2-Does your child have any food restrictions or allergies? Need medication during the day? _____

3A-Is your child limited in anyway by a sport, swimming, sun, seasick or other?

3B- can your child swim? _____

4-What is your child's reading level? _____

5- How creative is your child at home? I.e.: imaginative play, artistic, musical, interested in cooking, journal writing, competitive sports?

6- What Art Activities interest your child: i.e.

Painting, Photography, Drawing, Printmaking, Sculpture, Sewing, Jewelry, Computer, Cooking, Writing/Poetry, Music, Dance, Drama, Sports? (Please circle all that applies)

7- Are there artists in the family (Mom, Dad, Grandparents, Uncles, Aunts)? _____

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8- What inspires your child? _____

9- Does your child use art or creative play to tell stories about their life?

10- Do they like to show or talk about their art?

11- Feel free to tell us more about your child & and his/her passions:

Thank you so much for the time and effort taken with this form – it will help us tailor our program to suit your child’s interests – please return the form to Camp Kayak ASAP.

See you this summer!
Ms. Victoria F. Armentrout
Director/Founder - **Camp Kayak**