

Texas Destination ImagiNation©

DI Day Camp

June 22-26

An innovative day camp



DI Day Camp is all about going beyond the edge to do it your own way.....
Teamwork, collaboration, FUN, wackiness, performances, FUN, leadership,
costumes, FUN, skills, mini DI challenges, improvisation, laughter, and FUN!

It is a camp that takes your brain to a whole new level, and did we mention that it's FUN!

Week-long Day Camp for 2nd – 8th graders (as of Fall, 09)

June 22-26

9:00 AM – 3:00 PM

Donald Elementary School

2400 Forest Vista

Flower Mound, TX 75028

The registration fee for the full week (30 hours) is \$150.00 per participant, with a sibling discount of \$25 per camper. The camp is limited to the first 100 participants.

Extended Care for the hours of 3:00 pm to 6:00 pm is offered as an option for working families at an additional cost of \$60 per child. **No pro-rating and no sibling discounts.**

Texas DI Day Camp Goals

Camp participants will:

- Foster creative and critical thinking
- Learn and apply Creative Problem Solving methods and tools
- Develop teamwork and collaboration skills
- Enhance and apply written and verbal communication and presentation skills
- Promote recognition, use, and development of many and varied strengths and talents
- Develop enthusiasm for, and commitment to problem solving
- Have a ton of FUN!

A morning snack will be provided except in the case of special diets and food allergies. Campers with special diet needs are expected to provide their own snacks. Campers will bring a lunch Monday through Thursday. On Friday we will have a pizza party to be followed by the Closing Presentation of team solutions!

Registration
DI Day Camp
 Presented by
Texas Destination ImagiNation®

Deadline for Registration: May 31, 2008

Registration Fee: \$150 per camper, \$125 per camper if enrolling multiple siblings.

Name of Camper							
Parent / Guardian							
Address:							
City						Zip	
Email							
Day Phone							
Evening Phone							
T-Shirt Size (check one)	<input type="checkbox"/> YS	<input type="checkbox"/> YM	<input type="checkbox"/> YLS	<input type="checkbox"/> AS	<input type="checkbox"/> AM	<input type="checkbox"/> AL	<input type="checkbox"/> AXL
Allergies or other medical conditions							
Physical limitations							
Note special requirements for who can pick up Camper.							
Extended Care Hours: 3:00-6:00 \$60/student	<input type="checkbox"/> No, my child will <u>not</u> attend Extended Care from 3:00 – 6:00						
	<input type="checkbox"/> Yes, my child <u>will</u> attend Extended Care from 3:00 – 6:00						
	Days needed (circle): M T W Th F						
	Approx. Time for Pick-Up:			(No pro-rating for pick-ups before 6:00)			

Payment is by check or money order. Please mail checks or money orders to Texas Destination Imagination, P.O. Box 8747, Greenville, TX 75404

For questions, please call or email Robin Napier, 469-713-5997, or napierr@lisd.net.

Note: T-shirts run small. Order up.

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2009 Rate Chart

Number of Campers	<u>Without</u> Extended Care	<u>With</u> Extended Care
1	\$150	\$210
2	\$250	\$370
3	\$375	\$555
4	\$500	\$740

TEXAS DESTINATION IMAGINATION

DI Day Camp

MEDIA RELEASE FORM

Location: Donald Elementary School - Flower Mound, TX

Dates: June 22 - 26

A signature on this form permits the organizers and sponsors of Texas Destination ImagiNation program at the *Texas DI Day Camp* to use videotapes and photographs of participants in public showings.

I hereby consent to Texas Destination ImagiNation (TXCPSO, Inc.), its regions and its licensees to use my picture for purposes of trade or for any lawful purpose whatsoever.

Camper Name:			
Address:			
City		Zip	
Day Phone			
Signature			
Date:			

Persons under 18 years of age must have consent of parent or guardian

I, the undersigned, being the parent or guardian of the above minor, do hereby consent to, and agree to be bound by the above release.

Signature			
Printed Name:		Date:	

TEXAS DESTINATION IMAGINATION
DI Day Camp
Permission and Medical Release Form

I, _____, parent or guardian of _____, a minor, do hereby appoint Robin Napier (Day Camp Director) to act in my place in the event said minor should require medical attention while involved in the Texas Destination Imagination Accept the Challenge Day Camp sponsored by the Trinity Valley North Central Region to be held from June 22 to June 26, 2009 at Donald Elementary, 2400 Forest Vista, Flower Mound, Texas, 75028.

This appointment is for the purpose of securing benefits for the health and welfare of said minor and expressly includes the authority to sign releases to physicians who may render medical care and services. I, parent or guardian, promise to assume liability for payment of all such professional services, and to reimburse the TVNC Region or said adult sponsor for any expense that may be incurred for treatment, care, drugs, and other services for said minor. In consideration of the above as well as the supervision and discipline provided on my behalf and on the behalf of said minor I hereby agree to hold the Texas Creative Problem Solving Organization and its regions harmless for results of any decision which they in their discretion shall make.

I agree that the Texas Creative Problem Solving Organization and the Mid-Cities region and the hosting sites of Donald Elementary School shall not be held responsible for any accident or misfortune which might occur in connection with the day camp.

Parent's or Guardian's Signature

Date:

Day Phone Number

Evening Phone Number

Insurance Company Name

Insurance Policy Number

Emergency Contact

Emergency Contact Phone Number

Camper's Doctor

Doctor's Phone Number

Please make note of any special health needs your young person might have such as allergies, medicine needs, etc.

**TO BE KEPT ON FILE AT THE DAY CAMP FACILITY THROUGHOUT THE DURATION
OF THE EVENT.**