

Summer Camps at Nashua Community College

Youth & Teen Enrichment Sessions, 9AM-12PM, July 2022



Week of July 11

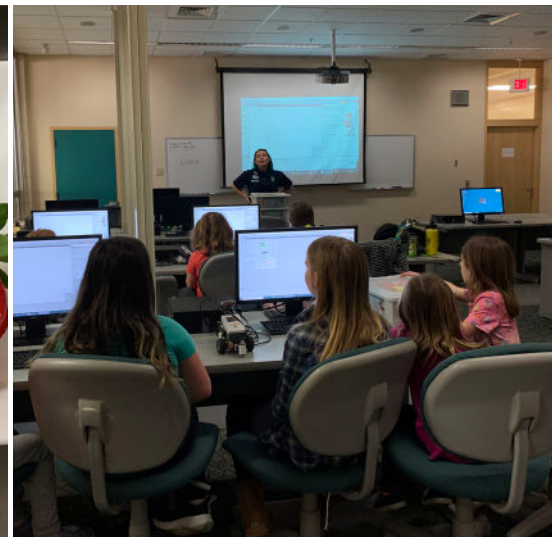
- JavaScript Game Design, Ages 10 -15
- CSI: Find the hidden secrets using forensic science, Ages 11-13

Week of July 18

- Automotive - General Vehicle Maintenance and Information, Ages 10-15
- Kids Cooking Academy, Ages 10-12

Week of July 25

- Automotive - General Vehicle Maintenance and Information, Ages 15-18



Contact

Kim Eckenrode, Career & Technical Education Pathways Director
(603) 578-8979 • KEckenrode@ccsnh.edu

Summer Camp • Details



JavaScript Game Design	4 Days	\$295
Students learn to code through fun, interactive games with step-by-step projects coded start to finish. No prior coding experience necessary. After camp students can continue to work on their skills all year with the one-year Youth Coding membership included in the cost of camp.		
Week of July 11	Ages 10-15	CRN: 31035

CSI: Find the hidden secrets using forensic science	3 Days	\$245
Did you ever wonder: <ul style="list-style-type: none"> • How did they figure that crime out? • How did they know when a victim died? • How to identify a dead body? • Or what was the weapon used? Explore the world of criminal lab sciences to find the truth behind what happened in the past.		
Week of July 11	Ages 11-13	CRN: 30978

Kids Cooking Academy	4 Days	\$295
Students will produce several recipes each day and be able to take product home with them. Monday – Pizza & Cookies Tuesday – Muffins and Granola Bars Wednesday – Tomato Soup & Grilled Cheese Thursday – Macaroni and Cheese & Salad		
Week of July 18	Ages 10-12	CRN: 30986

Automotive: General Vehicle Maintenance & Information	4 Days	\$295
Proper use of tools, Proper procedures involved during vehicle check-over, oil change, tire rotation and replacement, Warning light meaning and checking, scan tool introduction		
Week of July 18	Ages 10-15	CRN: 30980
Week of July 25	Ages 15-18	CRN: 30981

Summer Camps at NCC - Student Information

Summer Camp Enrollment Guidelines

Applicants are considered on a first-come, first-serve basis. **Only complete application packets and payment hold a spot in the camp.**

A complete application packet for each attending student includes:

- Completed Summer Camp Student Information
- Completed Health/Medical Record Release Form
- Completed Summer Camp Registration Form
- Completed Photo Release Form
- Completed Camp Assumption of the Risk and Waiver of Liability

Cancellation policy:

- NCC will notify families **7 days** prior to camp start if the camp is cancelled due to low enrollment.
- If you must cancel, notice must be received **7 days** prior to camp start. "No shows" will not receive a refund.

Student Information

Student Name _____ Age _____ Date of Birth _____

Home Address _____

Fall 2022: Grade _____ School Attending _____

T-Shirt Size: _____ Nickname or Preferred Name for Camp if applicable: _____

Parent Information

Parent/Guardian #1

Name _____

Email _____

Work Phone _____

Cell Phone _____

Parent/Guardian #2

Name _____

Email _____

Work Phone _____

Cell Phone _____

Note: Emergency Contact Information located on Health Form

I hereby give permission for my child to participate in Summer Camps at NCC.

Parent/Guardian Signature: _____ Date: _____

Please email the completed application, health form, photo release form, camp release and hold harmless agreement to:
Career and Technical Education Pathways Director - Kim Eckenrode, KEckenrode@ccsnh.edu

Summer Camps at NCC – Photo Release Form

Visual Image Release: Summer Camps at NCC uses photos of children/CAMPER/PARTICIPANTS and staff participating in its activities in its yearly brochure and on our website. Summer Camps at NCC will not identify any child. In consideration, I hereby give my permission and consent to Summer Camps at NCC to use images of my child in Summer Camps at NCC website and brochure, and I hereby release on behalf of my child and myself any rights to compensation for, or ownership of, such images of my child and the above uses of them by Summer Camps at NCC.

I give Nashua Community College, (NCC) the right to use the aforementioned work for promotional purposes (such as brochures, website, ads, etc.) with credit given to my company and/or the person or company who originated the artwork.

Yes No, please exclude my child from all media.

Student Name: _____

Parent/Guardian Signature: _____ Date: _____

Parent Phone Number: _____ Email: _____

Summer Camps at NCC – Health/Medical Record Release

Personal Information

Student's Name _____

Date of Birth _____ Student's Gender: _____

Student's Home Address: _____

Parent Information

Parent/Guardian #1

Name _____

Email _____

Work Phone _____

Cell Phone _____

Parent/Guardian #2

Name _____

Email _____

Work Phone _____

Cell Phone _____

Student's Health & Coverage

Primary Care Physician _____

Health Insurance Carrier _____ Plan Number _____

In Case of Emergency, please notify _____ Phone _____

If neither parent/guardian is able to be contacted, please contact _____ Phone _____

- | | | | | | |
|-------------------------------------|--|-------------------------------------|---|---------------------------------------|------------------------------------|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Convulsions | <input type="checkbox"/> Poison Ivy | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Insect Bites | <input type="checkbox"/> Hay Fever |
| <input type="checkbox"/> Bee Stings | <input type="checkbox"/> Behavioral Issues/Plans | <input type="checkbox"/> Peanuts | <input type="checkbox"/> Food Allergies | <input type="checkbox"/> Penicillin | <input type="checkbox"/> Gluten |

Other _____ Other Drugs _____

- Does student have any chronic or recurring illnesses? No Yes If yes, please describe _____
- Is there anything else in student's health history we should know? No Yes If yes, please describe _____
- Are there any activities from which the student should be restricted? No Yes If yes, please describe _____
- Are there any specific activities that should be encouraged? No Yes If yes, please describe _____
- Does the student wear any medical appliances (glasses, orthodontic, etc.)? No Yes If yes, please describe _____

Summer Camps at NCC are NOT a peanut free camp. NCC Staff are informed of all allergies, and, we make every effort to protect all allergic conditions of our CAMPERS/PARTICIPANTS.

Medications: Nashua Community College and the Community College System of New Hampshire is not responsible for any medications needed by my child. All medication will be taken by my child at home if needed.

Medical Release: This health history is correct and accurately reflects the known health status of the named CAMPER/PARTICIPANT. The CAMPER/PARTICIPANT described has permission to participate in all camp activities except as noted by me and/or an examining physician. I give permission to camp staff/faculty to provide or obtain emergency care and transportation for the CAMPER/PARTICIPANT if needed. If I cannot be reached in an emergency, I give permission to the physician to hospitalize, secure proper treatment for, and order and administer medication, injection, anesthesia, X-rays, special procedure, or surgery for this child, if deemed medically necessary. I understand that I am responsible for the cost of any medical care or prescriptions my child requires. I agree to release of any records necessary for treatment, referral, billing, or insurance purpose. I understand that information on this form will be shared on a "need to know" basis with camp staff/faculty.

Important: Please notify the camp if this CAMPER/PARTICIPANT attendee is exposed to any communicable disease including COVID during the **three weeks** prior to camp attendance.

Parent/Legal Guardian Signature _____ Parent/ Legal Guardian Printed Name _____

Relationship to Participant _____ Date _____

Summer Camps at NCC – Assumption of the Risk and Waiver of Liability

I understand that the risks associated with camp activities could result in injury and/or death to my child. I hereby assume these risks and, knowing them, hereby give my child permission to participate. I understand that neither NCC nor the Community College System of New Hampshire (collectively, "NCC") is liable for any injuries or other occurrences due to indoor and outdoor camp activities or related risks, and/or the actions or omissions of NCC camp counselors, volunteers, employees, trustees, directors, officers, or any other entities being released.

In consideration of my application and permitting my child to participate in this activity, I hereby:

WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of NCC, its trustees, officers, employees, camp counselors, volunteers, entities or other persons released, for my child's death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to them including their traveling to and from this activity;

INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE NCC, its trustees, officers, employees, volunteers, or other entities or persons released from any and all liabilities or claims made as a result of participation in this activity, whether caused by negligence or by any other action or inaction.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under New Hampshire law. The NCC, its trustees, directors, officers, and all its employees, acting officially or otherwise are hereby released from any and all claims, demands, actions, or causes of action on account of any injury to my child that may occur. This release binds my heirs, executors, administrators, and/or assigns.

Relating to Coronavirus/COVID-19 The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have prohibited the congregation of groups of people. Summer Camps at NCC with guidance from the state has created new protocols and put in place preventative measures to reduce the spread of COVID-19; however, Summer Camps at NCC cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending any program may increase your child(ren)s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to, or infected by COVID-19 by attending the Summer Camps at NCC program, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Summer Camps at NCC program may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NCC employees and Summer Camps at NCC staff/faculty, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself including, but not limited to, personal injury, disability, death, illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the Summer Camps at NCC program. On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold harmless NCC employees, and Summer Camps at NCC staff/faculty, the Community College System of New Hampshire, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of NCC, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in Summer Camps at NCC program. As parent/guardian, I understand that I hold Nashua Community College, and the Community College System of New Hampshire, staff, faculty, and employees harmless from any and all liability or claims which may arise out of or in connection with my child's early release from the Summer Camps at NCC Program due to unforeseen circumstances.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, FULLY UNDERSTAND ITS CONTENT, AND AGREE TO ITS TERMS.

Parent/Legal Guardian Signature: _____ Parent/ Legal Guardian Printed Name: _____

Student/Attendee Name: _____ Date: _____

Summer Camps at NCC – Registration Form

Camper Information

Student's Name _____ DOB: _____

Parent/Guardian Information

First Name _____ Last Name _____

Home Address _____ City: _____ State _____ Zip _____

Cell Phone _____ Work Phone _____

Parent Email: (for registration confirmation and other updates) _____

Note: After your student is registered and the registration fee is paid, an introductory email will be sent to the Parent Email listed above detailing necessary information for the first day of your student's chosen camp.

Camp(s) Registration

CRN#	Course #	Date/Week	Camp Name	Cost
Total				

Please make checks payable to NCC and write "Summer Camps" in the notes section.

Financial Obligation Statement - I understand by registering for courses at NCC, I am financially obligated for ALL costs related to the registered course(s) by the established tuition deadline, or I may be subject to withdrawal from course(s). Upon a drop or withdrawal, I understand I will be responsible for all charges as noted in the student catalog and handbook. I further understand that if I do not make payment in full, my account may be reported to the credit bureau and/or turned over to an outside collection agency. I also understand that I will be responsible for the cost of the outside collection agency, any legal fees and any bounced check fees under RSA 6:11, which will add significant costs to my account balance.

Refund Policy - Students registered for summer camps must notify Kim Eckenrode at least **seven** days prior to the first session and submit a Drop Form to receive a full refund.

Parent Signature _____ Date _____

FOR OFFICE USE

Student ID _____ Date _____

Registered by _____