

Dear Camper Parent,

The 2017 Physics Summer Camp is approaching and we are excited at the prospect of sharing our love of science with your child. Included in this packet is additional information on this year's Science Summer Camp and registration forms.

Please look over the contents of this packet carefully and return the completed forms to us no later than the first day of the camp. To ensure your child's enrollment in the camp, please either complete the online enrollment or return a completed signup sheet with payment as soon as possible. (Enrollment can also be completed online at <http://physics.maine.edu/summer-camp/>.) Checks should be made payable to 'The University of Maine,' and all paperwork should be sent to:

2017 Physics Summer Camp
c/o The University of Maine
Department of Physics & Astronomy
5709 Bennett Hall
Orono, ME 04469-5709

On the first day of camp, you may park in Bennett Lot and then please escort your child to room 302 on the third floor of Bennett Hall (B3 on the included map). This is where you will sign in and pick up your child on each day of the camp.

We aim to create a fun and safe environment for your child and to this end we have enclosed a Code of Responsibility for you and your child to sign. Please go over this with your child and discuss appropriate behaviors.

We believe in learning through inquiry and play. As such, we request that your child dresses in comfortable clothes suitable for messy activities (we work with dyes, paper-mache, slimes, etc.). We also walk moderate distances around campus and there is a 'recess' period over lunch, so comfortable shoes are necessary.

If you have any questions regarding this year's camp please contact us by phone at (207)581-1039 or by email at physicscamps@umit.maine.edu

Enclosed you will find:

- Parent Letter
- Schedule & Checklist
- Signup Sheet
- Medical Information form
- Photo Release (optional)
- Authorized Pickup Form
- Code of Responsibility
- Map

Schedule (subject to change) & Checklist

Astronomy

Monday	The Universe & Us
Tuesday	Light
Wednesday	Observational Astronomy
Thursday	Space Viewed From Earth
Friday	Space Travel

(7/3 - 7/7 for children grades K-2, 8/7 – 8/11 for children grades 3-5)

Space and Energy

Monday	Observational Astronomy
Tuesday	Planetarium Shows
Wednesday	Energy Demonstrations
Thursday	Rockets & Space Travel
Friday	Using Sunshine

(7/10 – 7/14 for children grades 6-8, 8/14 – 8/18 for children grades 6-8)

Math and Art

Monday	Sculpture & Proportions
Tuesday	Architecture
Wednesday	Symmetry & Nature
Thursday	Light & Shadow
Friday	Music

(7/17 – 7/21 for children grades K-2, 7/24 – 7/28 for grades 3-5)

Daily Breakdown:

Parents who have arranged for early drop off can sign their child in at 7:55 am. All other parents may start signing in their children at 8:45 am. All campers should be present by 9:00 am when the morning activity will begin. We will take a one hour lunch/recess (11:30 am – 12:30 pm) outside before we begin the afternoon activity. Children should be picked up from 2:50 pm to 3:15 pm unless arrangements have been made, in which case children can remain until 4:00 pm. Note: For the safety of your child, you must have a photo ID to pick up your child, and if someone else is picking your child up, they must be on your authorized pick up list and have a photo ID.

Checklist

- 'Play Clothes'
- Comfortable Shoes
- Water Bottle
- Lunch & Morning Snack (there are no cooling/heating appliances)
- Sunscreen
- Change of Clothes

*** *Labeling items with child's name is recommended.*

2017 Summer Science Camp Signup Form

Circle the Camp(s) your child will attend:

7/3 - 7/7 : K-2 Astronomy (20% discount)
7/10 - 7/14: 6-8 Space & Energy
7/17 - 7/21: K-2 Math and Art
7/24 - 7/28: 3-5 Math and Art
8/7 - 8/11 : 3-5 Astronomy
8/14 - 8/18: 6-8 Space & Energy

Camper's Name: _____ Age: _____

Parent/Guardian Name(s): _____

Email: _____ Phone: _____

Address: _____

Alternate Contact In

Case of Emergency: _____ Phone: _____

How did you learn about this camp? _____

I give permission for my child to be transported throughout the UMaine campus by qualified employees of the UMaine Physics Department. *Signature:* _____

Food Restrictions, Allergies, Special Needs, Instructions, Etc.: _____

10% 'Early Bird' Discount

For registering by May 15th

20% 'Group' Discount

For registering two or more children (friends, siblings, etc.)

20% 'Multi-Week' Discount

For registering a child for two or more weeks of camp

Note: Discounts cannot be combined

Payment Information

Amount Paid: _____ Paid by: Check/Online

Early Drop-Off: Yes/No

___\$20 for 1 Week (5 Days)

___\$5 For 1 Day

Dates you're dropping your child off early: _____

Late Pick-Up: Yes/No

___\$20 For 1 Week (5 Days)

___\$5 For 1 Day

Dates you're picking your child up late: _____



UNIVERSITY OF MAINE AND PHYSICS CAMP
HEALTH HISTORY AND MEDICAL AUTHORIZATION FORM

Participant's Name: _____ Birth date: _____

Home Address: _____

Has Participant ever attended camp before? Yes ____ No ____ Date(s): _____

Session(s) Attending: _____

Instructions: We ask that you complete this form in order to help assure that your child's camp experience will be healthy and happy. It is not necessary to have this form filled out by a physician, however, if you have a physical fitness form, completed by a physician, please attach it. **Please return this form by the first day of camp.** Thank you for your cooperation.

HEALTH HISTORY

Please check below those that apply and give approximate dates where applicable.

____ ADD/ADHD	____ Anxiety	____ Asthma	____ Autism
____ Behavioral issues	____ Bleeding/Clotting	____ Bipolar	____ Cramps (in water)
____ Depression	____ Diabetes	____ Ear Trouble	____ Fainting
____ Hay Fever	____ Headaches/Allergies	____ Heart Trouble	____ Nosebleeds
____ Seizures	____ Sinus Infection	____ Sore Throat	____ Sleepwalking
____ Other:			

Yes/No (If "Yes" to any, please provide more information)

1. Does this child now take a prescribed medication or treatment (including Homeopathic remedies)? If yes, what, when and why? Please include a schedule of medications with this form, if appropriate.

1. Is your child allergic to any food, drug, or other substance? If yes, please list all allergic substances and describe their reactions: _____
2. Has your child ever had any unusual reaction to an insect bite or bee sting? If yes, explain.

3. Does your child require self-medication (carry an inhaler or anakit)? If yes, you must include a written note from their physician, indicating the need and training in its safe use. _____
4. Is there any factor that makes it advisable for your child to follow a limited program of physical activity? If yes, please explain _____
5. Is your child currently under the regular care of a physician? If so, please explain briefly.

Additional Information: Please attach any background information that might help us interact more effectively with your child and keep all campers safe. (Does your child have any condition which someone who does not know your child might consider a concern?) Information such as: if your child receives care or takes medication for: emotional, behavioral, learning and/or psychological concerns, if she/he has a tendency to refuse her/his medication, if she/he is frequently "ill," or if there is a history of homesickness, can help us to provide a better camp experience for your child. Feel free to use an additional or separate sheet of paper. You may also contact our Camp Director prior to your child's arrival at camp. If our Director has questions, they may contact you. Our goal is to provide the best possible environment for all children and your cooperation will be vital to this process. Thank you.

This health history is correct and complete, so far as I know, and the person herein described has permission to engage in all prescribed camp activities except as noted.

PARENT/GUARDIAN AUTHORIZATION

I hereby authorize the camp staff to consent to medical treatment for my child and to transport them, if necessary. I will not hold these leaders responsible for the consequences of exercising this power so long as they act in good faith with the best interest of my child in mind. I further consent to any treatment by any hospital or physician which, in their judgment, is in the best interest of my child. I will not hold any hospital or physician responsible for the consequences of accepting my child for treatment upon receiving the consent of camp staff and upon being shown this Medical Authorization. I expect to be informed of my child's condition and of treatment provided as soon as possible. In addition, I give permission to immunize my child if there is an outbreak of communicable disease and the State Center for Disease Control recommends immunization to prevent further spread of the disease.

SIGNATURES OF PARENTS OR GUARDIANS (both parents should sign, if possible):

Parent or Guardian	Home Phone #	Work Phone #	Cell Phone #
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Parent or Guardian	Home Phone #	Work Phone #	Cell Phone #
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If we cannot reach you, please name another person to contact in case of emergency:

Name _____

Day Phone # _____ Night Phone # _____ Cell Phone # _____

Relationship to Participant: _____

Family Doctor's Name: _____ Phone # _____

Date of last doctor's visit or physical (attach copy, if possible): _____

INSURANCE: Each participant is strongly encouraged to be covered by his/her own health insurance. The University of Maine and the Department of Physics and Astronomy do not provide sickness, health or accident insurance.

Insurance Company: _____ Policy/Group No.: _____

Today's Date: _____

UNIVERSITY OF MAINE
DIVISION OF STUDENT AFFAIRS
PHYSICS CAMP PHOTO RELEASE

I _____, for myself, my heirs and assigns, hereby grant and authorize the University of Maine System (UMS) the right to use, license or assign my image, voice and/or biographical material to publicize same as recorded, photographed, taped and/or filmed for use in information or promotional materials published by or on behalf of UMS or any of its constituent parts or affiliates in photographic, print, video, electronic, digital or any other medium now known or that may be invented in the future, without limitation, (hereinafter all of which are included in the term "Material") and to do so with or without mention of my name.

UMS shall have complete ownership of the Material and shall have the exclusive right to license and use the Material as UMS wishes, including, but not limited to, the rights of copying, performance, display, reproduction and distribution in all media, and the right to create, perform, display and distribute derivative works of the Material.

I agree to indemnify and hold UMS harmless from and against any and all claims, damages and expenses that UMS may become liable to pay arising out of or caused by any matter or material furnished or spoken by me in connection with my appearance.

I hereby release UMS, its trustees, its employees and agents, from all claims, damages and expenses incurred by me arising out of or in connection with my appearance and/or the use of the Material, except to the extent that those claims, damages and expenses are the direct result of the negligence of UMS.

I request that this Release be construed and interpreted pursuant to the laws of the State of Maine, and if any portion thereof is held void, or unenforceable, I request the remainder continue in full force and effect. I declare that I completely understand and have fully informed myself of the terms and conditions of this Release by having read it, or having it read to me, before signing.

Name

Date

Signature

Signature of Parent or Guardian if under 18

Authorized Pick up Form

We care a lot about the safety of your child. Only individuals on this form will be allowed to pick up your child from Physics Camp. They **must have a photo ID** in order to sign the child out. We appreciate your support in this effort.

Name: _____

Name: _____

Name: _____

Name: _____

Name: _____

Code of Responsibility

In an attempt to create an atmosphere where all campers have the opportunity to reach their greatest potential, we have created a Code of Responsibility. Physics Camp's Code of Responsibility is based on two core concepts, **safety** and **respect**. These terms will also be discussed as part of the initial camper orientation on the first day of each session, but we encourage you to discuss these concepts with your camper. When any camper acts in ways that are unsafe or disrespectful, he or she must understand that we *will not* accept that behavior and he or she *may be sent home*, will not be entitled to a refund, and may or may not be invited to return. In addition to following this Code, Physics Camp strives to practice positive ways to create healthy, sustainable lifestyles for ourselves, those around us, and the planet.

A few examples of appropriate, safe, respectful behaviors are:

Making sure to include all group members in an activity; resolving conflicts peacefully (with negotiation and/or the support of a counselor); following camp rules; actively helping the group with clean-ups. There are many examples and we encourage you to create your own list.

Some examples of unsafe, disrespectful, or unacceptable behavior are:

Acts of violence – Any act of aggression that threatens the safety of another human being, or one's self, will not be tolerated at Physics Camp. This includes, but is not limited to: hitting, pushing, using weapons or anything as a weapon, such as knives, sticks, rocks and other objects.

Offensive or threatening language – Swearing, name-calling, put-downs, bullying, and the use of words or language that offends or threatens anyone who hears them are examples of being disrespectful. This also includes threats to the safety of one's self, including suicide threats. Our staff is not qualified to counsel suicidal individuals, so any apparent suicidal threats will be treated as an emergency and that camper may be sent home.

Destruction of property – Whether it belongs to Physics Camp or another camper, destroying property is unacceptable.

Ignoring or disregarding staff requests – As supervisors, our staff must be listened to and respected at all times. If a camper refuses to follow directions or refuses to listen to directions, he or she is not showing respect.

Leaving the group – Running away or leaving the group without permission is an assumed safety risk. Campers must be supervised at all times, and leaving that supervision is not considered safe.

Please sign below to affirm that you have read and understand this Code of Responsibility. With your help, our community can work and play together in a safe and respectful manner. Thank you!

Parent's Signature

Camper's Signature



2013-14 Campus Map

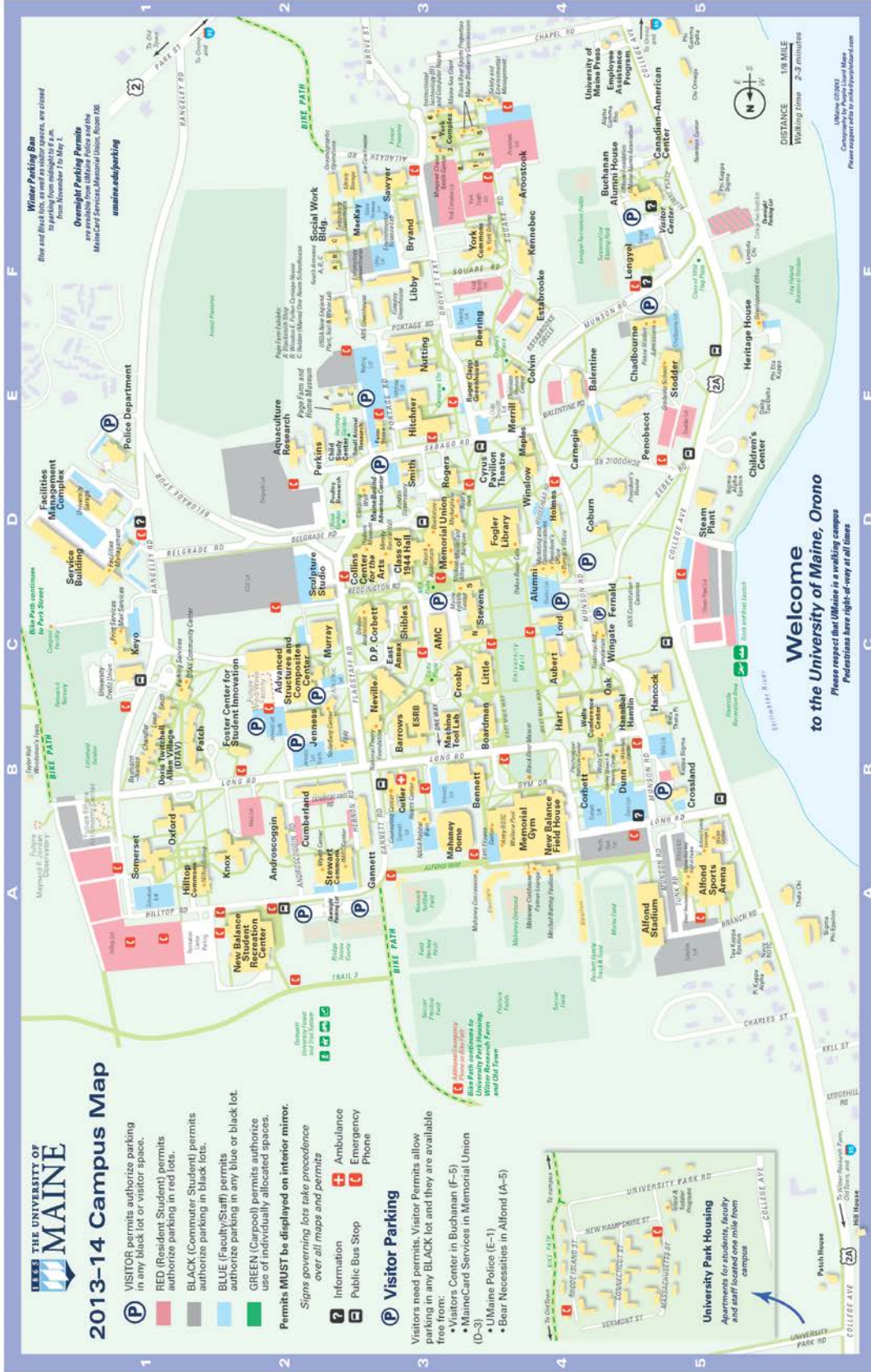
- P** VISITOR permits authorize parking in any black lot or visitor space.
- RED** (Resident Student) permits authorize parking in red lots.
- BLACK** (Computer Student) permits authorize parking in black lots.
- BLUE** (Faculty/Staff) permits authorize parking in any blue or black lot.
- GREEN** (Carpool) permits authorize use of individually allocated spaces.
- Permits MUST be displayed on interior mirror.**
- Signs governing lots take precedence over all maps and permits**
- Information** **Ambulance**
- Public Bus Stop** **Emergency Phone**

Visitor Parking

- Visitors need permits. Visitor Permits allow parking in any BLACK lot and they are available from:
- Visitors Center in Buchanan (F-5)
 - MaineCard Services in Memorial Union (D-3)
 - UMaine Police (E-1)
 - Bear Necessities in Alford (A-5)



University Park Housing
Apartments for students, faculty and staff located one mile from campus



Welcome
to the University of Maine, Orono

Please respect that UMaine is a walking campus.
Pedestrians have right-of-way at all times.

Walking Map
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