



Dear Parents/Guardians,

Welcome to Learners are Leaders, Inc. (LL-inc.) Virtual Summer Leadership Camp. This year our Summer Leadership Camp will be fully online from **July 20 – August 7, 2020**, to combat the “summer slide.” Summer slide is the phrase used to describe the slide backwards that many children make in reading and math skills over the summer. With the advent of the COVID-19 pandemic, learning gaps could be even greater. It’s possible for a child to regress 2-3 months back in terms of reading and math levels if skills are not used. Our Virtual Summer Leadership Camp will combat the summer slide with a 5-point focus on social justice, academic enrichment, movement, leadership and social/emotional learning.

As part of your child’s experience in the Summer Leadership Camp, your child will participate in Dallas City of Learning (DCOL), an education initiative and online platform designed to help students discover new interests, develop skills and earn recognition for learning achievements.

DCOL is a partnership with the City of Dallas and Dallas Independent School District, and is managed by Big Thought, a non-profit organization committed to closing the opportunity gap in Dallas. Some data that you will provide, including student name and birth date and will be shared with DCOL to enable your child’s participation.

In this Enrollment Packet is information and forms pertinent to the Summer Leadership Camp. All forms must be completed thoroughly and returned by July 18, 2020, 6 pm. Forms may be emailed to [info@leadersinc.org](mailto:info@leadersinc.org) or faxed to 469-547-0806. If you have any questions or concerns, please contact us at 469-454-8550 or send us an email.

### **Participants**

- The camp is open to youth ages 8 to 13 years old.
- **All campers are expected to complete the entire session to receive their deposit back.**

### **Costs**

- Free
- A \$25 deposit is required, but is returned upon attendance requirements being met. Campers can only miss a maximum of 2 days.
- Deposits can be paid by calling our office or online at [www.leadersinc.org](http://www.leadersinc.org).

## Special Notes

- **Campers will have an opportunity to participate in several contests for cash prizes.** Campers may need to spend time outside of the camp preparing and practicing for the Poetry Contest and Summer Spelling Bee.
- Campers are only permitted to miss camp a **maximum of 2 days** (excused or unexcused) to get the \$25 deposit back at the close of camp. Attendance is crucial component in the academic and social success of every camper.
- All parents/guardians are **required to sign up for Remind** to get regular communication during the summer camp. You may receive updates via text by texting 81010 and putting @f88ce92 in the message box. You can receive updates via email by sending an email to f88ce92@mail.remind.com

## Schedule

- Campers will meet Monday-Friday from 12:00 pm – 3:00 pm.
  - 12:00 pm – 12:30 pm: Lunch and Mindfulness
    - Purpose: Campers will recite affirmations and be given strategies to help focus their attention, improve self-regulation skills, build resilience to stress and develop a positive mind-set. Campers have the option to do this while they eat lunch in their homes.
  - 12:30 pm – 1:00 pm: Book study and leadership discussion
    - Purpose: Campers will travel back in time to 1956 and delve into a nonfiction story about 12 African-American students who integrated Clinton High School in Tennessee.
  - 1:00 pm – 2:00 pm: Academic enrichment, Arts & Crafts, Movement
    - Purpose: Campers will engage in activities to reduce the learning loss that occurs during summer months.
  - 2:00 pm – 3:00 pm: Critical thinking and Project-based activities
    - Purpose: Campers will be encouraged to cultivate unique skills and think outside the box. Skills will be put to use in a culminating project and Summer Spelling Bee from vocabulary studied.

**Camper Registration Form**

Child's (1) Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Grade: \_\_\_\_\_

T-Shirt Size (please circle one) : Youth – S M L XL or Adult – S M L XL

Is there anything you would like us to know about your child? \_\_\_\_\_

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Child's (2) Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Grade: \_\_\_\_\_

T-Shirt Size (please circle one) : Youth – S M L XL or Adult – S M L XL

Is there anything you would like us to know about your child? \_\_\_\_\_

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Child's (3) Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Grade: \_\_\_\_\_

T-Shirt Size (please circle one) : Youth – S M L XL or Adult – S M L XL

Is there anything you would like us to know about your child? \_\_\_\_\_

**Health Care Information**

Please indicate existing health conditions, allergies, and/or food intolerances LL-inc. and Summer Leadership Camp staff should be aware of and what symptoms and actions should be taken if any\_\_\_\_\_

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**Emergency Contact Information**

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Parent #1 Name

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Parent #2 Name

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Work Phone #

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Work Phone #

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Cell Phone #

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Cell Phone #

**Alternative Emergency Contacts**

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Alternate Contact #1

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Alternate Contact #2

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Work Phone #

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Work Phone #

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Cell Phone #

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Cell Phone #

## Policies and Acknowledgements

- I have read the Expectations for Camper Conduct and agree to all expectations.
- I expressly acknowledge that there are certain dangers, risks, illnesses and personal injuries inherent in participating in Summer Leadership Camp's programs, events, classes, and/or activities, which may result from unavoidable accidents or injuries, athletic activities, the use of any equipment, exercise, or other activities, or from my own or my minor child(ren)'s or ward(s)' physical condition. I understand that LL-inc. and its employees, agents, counselors, teachers, trainers, representatives, successors and assigns assume no responsibility for loss, damage, illness or injury to person or property that I or my minor child(ren) or ward(s), if applicable, may sustain as a result of my or their physical condition or resulting from my or their participation in any activities, programs, events, classes, the use or non-use of any equipment, exercise, field trips, waterfront/pool activities, hiking, high ropes and other challenge courses, or any other activities, classes, events, or programs at and/or sponsored by LL-inc. I expressly acknowledge, represent and agree on behalf of myself and my minor child(ren) and ward(s), heirs and executors, that I voluntarily assume the sole risk for any and all dangers, illnesses and personal injuries that may result from my or my minor child(ren)'s and ward(s)' participation in any events/activities/ programs/classes sponsored by LL-inc..
- I acknowledge that LL-inc. often uses photographs, videos, recordings, social media, or other similar media for promotional purposes. I hereby consent to the use of my and/or my minor child(ren)'s or ward(s)' name(s) and/or likeness(es) in such materials to be exhibited and used for advertising, trade purposes, solicitation of patronage, promotional purposes, or other similar purposes, even if my and/or my minor child(ren)'s or ward(s)' name(s) and/or likenesses(es) are an integral part of such photograph, videotape, television program, motion picture, tape recording, social media, or other similar media.
- I further waive any and all rights to inspect or approve the photograph, videotape, television program, motion picture, social media post, tape recording, or other use of my and/or my minor child(ren)'s or ward(s)' name(s) and/or likeness(es), including any written article, script, caption or other writing that may accompany such use of my and/or my minor child(ren)'s or ward(s)' name(s) and/or likeness(es). I hereby, for myself, my minor child(ren) or ward(s), heirs, and executors, waive, release and forever discharge LL-inc and its employees, agents, counselors, teachers, trainers, representatives, successors and assigns, from and against any and all liability, claims, losses, costs, expenses or damages for libel, slander, invasion of privacy, conversion, defamation, appropriation of likeness or any other claim based on the use of my and/or my minor child(ren)'s or ward(s)' name(s) and/or likeness(es) in any such materials.
- I hereby represent and warrant LL-inc. that I have the authority to execute this participant waiver form/enrollment form on behalf of myself and/or my minor child(ren) or ward(s) as parent or legal guardian. In the event of any misrepresentation or breach of the foregoing warranty by me, or in the event that I, my minor child(ren) or ward(s), or any other person nevertheless asserts any claim against LL-inc. arising out of my or my minor child(ren)'s or ward(s)' participation in any program, event, class or other activity as set forth herein, I agree to indemnify, hold harmless and defend LL-inc. from and against any and all liability, claims, losses, costs, expenses or damages resulting therefrom, including, but not limited to, claims of loss, damage, illness or injury to person or property whether or not such loss, damage, illness or injury results from the negligence of LL-inc. or from some other cause.
- In case of an emergency and I (or my emergency contact) cannot be reached, I authorize the staff of LL-inc. and Summer Leadership Camp to obtain whatever medical treatment they deem necessary for the welfare of my child. I further understand and agree that I will be financially responsible for all charges and fees incurred for the provision of said medical treatment.

I have read, understand, and will abide by the terms and conditions as written on this form and in the enrollment packet as they relate to my child(ren)'s participation in Summer Leadership Camp.

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Parent/Guardian Signature

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Date

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Camp Participant(s) – please print

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## Dallas City of Learning Consent Form

Learners are Leaders, Inc. is participating in the Dallas City of Learning (DCOL) system and will share select program data with DCOL. DCOL is a partnership with the City of Dallas and Dallas Independent School District, and is managed by Big Thought, a non-profit organization committed to closing the opportunity gap in Dallas.

DCOL is a city wide effort to help students discover new interests, develop skills and earn recognition for learning achievements. Through the web platform at [www.DallasCityofLearning.org](http://www.DallasCityofLearning.org), students of any age can discover interest-based experiences and connect to local events, program and workshops. In some programs, when participants reach milestones during workshops or events, complete a program, or master a skill in one of these experiences, partner organizations may issue participants a digital badge, which contains all the learning criteria the participant demonstrated to earn the badge. Earned badges are stored in the participant's account on [www.DallasCityofLearning.org](http://www.DallasCityofLearning.org).

- ✓ I, the parent/guardian of the above mentioned participant, hereby give my approval for his/her participation in any and all activities of DCOL.
- ✓ I hereby authorize [Organization Name] to release the above information to the DCOL, owned & operated by Big Thought.
- ✓ I understand Big Thought will not use any personally identifiable data shared for any purpose except to provide non-commercial services and communications related to DCOL, and that Big Thought may use service providers who may have access to this data for the sole purpose of providing services related to the initiative.
- ✓ I understand that information shared above or on the DCOL platform may be used in a de-identifiable and aggregate form for educational and research purposes.

Visit [www.DallasCityofLearning.org](http://www.DallasCityofLearning.org) to learn more and read the Terms of Service & Privacy Policy.

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Child's name (please print)

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Date of Birth

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Signature of parent and/or guardian

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Date

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Relationship to child