



Lao Art and Culture Summer Camp 2018

Dear Parents,

Your children are invited to participate in the Lao Heritage Foundation's 2018 Art and Culture Summer Camp in the Providence, RI area. This is an exciting opportunity for children to learn about their culture and share the experience with kids from other states. At the end of camp, there will be a final performance. More information on the performance will follow.

Lunch and snacks will be provided to all campers for the duration of the camp by LHF. Parents are welcomed to attend, observe and/or help run the camp. Please complete the attached forms. If you have any questions, please contact Silaphone Nhongvongsouthy at 401-559-9054 or silaphone@gmail.com.

Date: Sunday, Aug 5 to Aug 12, 2018

Time: 9:00AM-4:00PM

Where: Wat Lao Buddhovath of Rhode Island, 88 Limerock Rd, Smithfield, RI 02917

Who: Children age 6 and older

Fee: \$60/person

Activities: Music (kaen, saw, kim, lanad, kong wong, flute, drum, xing), Dance, Culture (art, cooking, sports, theater, literature, language, and etiquette)

How: Fill out the attached forms and return by **Sunday, Aug 5th**. Money is due with the application.



Lao Art and Culture Summer Camp 2018

Please send all attached forms and make checks payable to:

**Laotian Community Center
c/o Silaphone Nhongvongsouthy
88 Limerock Rd.
Smithfield, RI 02917**



Lao Art & Culture Summer Camp Application

Child's name: _____ Nick name: _____
 Age: _____ Gender: _____ T-shirt size: _____
 Parents/Guardians: _____
 Address: _____
 Home Phone: _____ Cell: _____
 E-mail address: _____

EMERGENCY CONTACT

Full name: _____ Relationship: _____
 Address: _____
 Home Phone: _____ Cell: _____

MEDICAL & PICK-UP INFORMATION

Medication child is currently taking:

 List known allergies or special needs: _____

Primary Care Physician's Name: _____
 Clinic: _____
 Phone Number: _____

Name of Insurance: _____
 Phone Number: _____ Group Number: _____
 Member ID Number: _____

Person(s) authorized to pick up your child: _____

Please list any physical limitation or any other information that you would like to share about your child.



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Lao Heritage Foundation

Lao Art and Culture Summer Camp 2018

DONATIONS AND VOLUNTEERING

I would like to donate:

- | | | |
|---|-------------------------------------|---|
| <input type="checkbox"/> water | <input type="checkbox"/> cookies | <input type="checkbox"/> popsicles |
| <input type="checkbox"/> cereals | <input type="checkbox"/> ice | <input type="checkbox"/> watermelon |
| <input type="checkbox"/> grapes | <input type="checkbox"/> cantaloupe | <input type="checkbox"/> breakfast bars |
| <input type="checkbox"/> pineapples | <input type="checkbox"/> oranges | |
| <input type="checkbox"/> cooked food (Monday, Tuesday, Wednesday, Thursday, Friday) | | |
| Food Item(s): _____ | | |

I would like to volunteer:

- Saturday (AM 9-12, PM 12-4, Full day)
- Sunday (AM 9-12, PM 12-4, Full day)
- Monday (AM 9-12, PM 12-4, Full day)
- Tuesday (AM 9-12, PM 12-4, Full day)
- Wednesday (AM 9-12, PM 12-4, Full day)
- Thursday (AM 9-12, PM 12-4, Full day)
- Friday (AM 9-12, PM 12-4, Full day)

If you are volunteering, please provide us with your T-shirt size: _____.

I would like to volunteer in the areas of: (please mark all that applies)

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> cooking | <input type="checkbox"/> music |
| <input type="checkbox"/> dance | <input type="checkbox"/> arts and crafts |
| <input type="checkbox"/> language | <input type="checkbox"/> literature |
| <input type="checkbox"/> sports | <input type="checkbox"/> anywhere you need help |

Volunteer/Donor's name: _____

Phone number: _____



RELEASE FORMS

PERMISSION STATEMENT

I give permission for my child _____ to participate in the Lao Art and Culture Summer Day Camp hosted by the Lao Heritage Foundation (LHF).

I give my permission for the above named student to be treated by a medical professional as deemed necessary by LHF and its staff, and for them to secure my child’s medical, dental, surgical, x-rays, and anesthesia help as deemed necessary.

I also give permission for LHF and their representatives to provide supervision for my child during programs conducted at 4113 Westman Ct., Alexandria, VA, 22306.

I understand that such participation is voluntary. All conditions of the program have been explained to my satisfaction.

CONSENT AND RELEASE

I agree to release LHF and their representatives from all liability, loss, damage, costs, claims, or causes of action including, but not limited to, bodily injuries and property damage arising from participation in LHF events, or any activities sponsored or organized by LHF.

I further agree to indemnify and hold harmless LHF and their staff, organizers and agents from any and all liability, loss, damage, costs, claims, or causes of action, including attorney’s fees and witness costs, arising out of the undersigned’s participation in this community summer camp.

MEDIA RELEASE

I hereby authorize LHF to use my child’s picture for its public relations activities, which may include its newsletter, brochure, photo displays, and/or other organization and program promotional materials which may be include LHF website and facebook.

I understand that I have the right to revoke this consent in writing, at any time, except to the extent that action has been taken in reliance upon this consent. I further understand that I have the right to request a restriction as to how the picture is used.

Participant’s name (please print)

Participant’s Signature

Date

Parent/Guardian Signature

Date



LHF Camp Rules and Regulations

- 1. Have fun**
- 2. No bullying**
- 3. No foul language**
- 4. No weapons**
- 5. No drugs**
- 6. No fighting**
- 7. An adult must know where you are at all times**
- 8. Stay on camp premises at all times**
- 9. Respect others and their properties**
- 10. Pick up after yourself**

Consequences:

- 1. If infractions are minor, you will receive a warning and be removed from the session and rejoin at the next session.**
- 2. If infractions are severe, parents will be notified and you will be removed from camp activities for the day**
- 3. If it is a second time, you will be removed from camp for the rest of the week.**

I have read and understand the camp rules. I understand that I may be removed from camp for breaking camp rules.

Participant's Name: _____

Participant's Signature: _____ Date: _____

Parent Signature: _____ Date: _____