

# THE INCREDIBLE JOURNEY:

Discovering the Incredible Person  
God Created You to Be!

Christian Life Academy Summer Daycare Program 2018

June 4 - August 10, 2018

Ages 3-12



Please contact the school office for more information: 740-286-1234

Christian Life Academy, a ministry of Good Shepherd Wesleyan Church

10595 Chillicothe Pike, Jackson, OH 45640



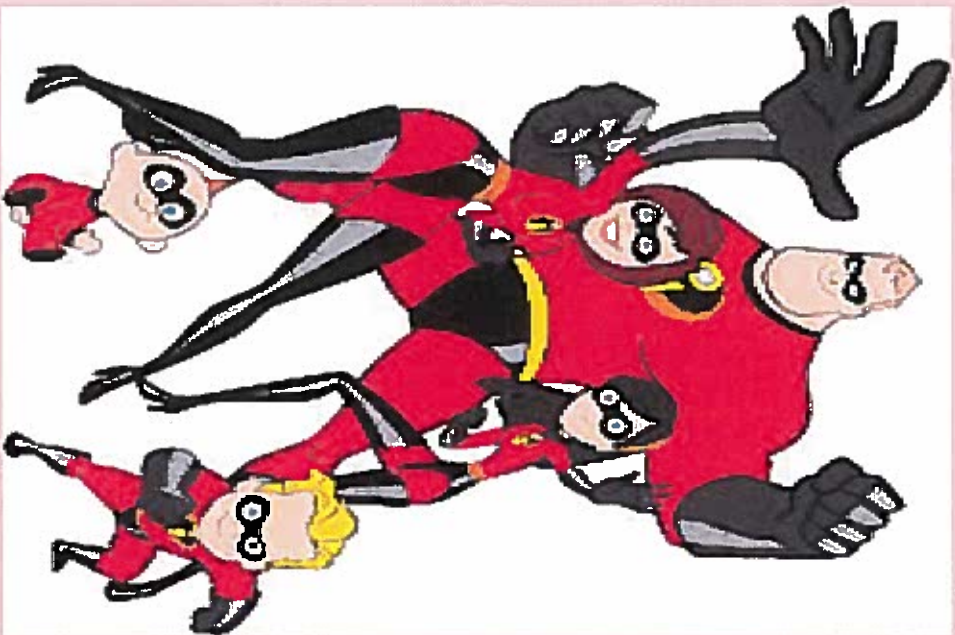
**The Incredible Journey:  
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 Christian Life Academy Summer Daycare Program  
 June 2018 Program Schedule**



Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3 Theme: Art Week	4 First Day of Summer Program	5 Free Sum- mer Movie: Captain Un- derpants	6 Art Class @ CLA	7 Manpower Park & Cardo's Lunch	8 Swimming @ Days Inn Pool	9
10 Theme: Camping Week	11 Camping on the playground (daytime)	12 Free Sum- mer Movie: Despicable Me 3	13 Waves on Wheels @ Jackson City Library	14 Manpower Park & Cardo's Lunch	15 Swimming @ Days Inn Pool	16
17 Theme: Pump You Up Week	18 Picnic & Scavenger Hunt @ Eddie Jones	19 Free Sum- mer Movie: Smurfs: The Lost Village	20 4-H Program @ Jackson City Library	21 Manpower Park & Cardo's Lunch	22 Swimming @ Days Inn Pool	23
24 Theme: Animal Ex- travaganza Week	25 Visit to Herds of Hope	26 Free Sum- mer Movie: The Boss Baby	27 Mr. Puppet Program @ Jackson City Library	28 Manpower Park & Cardo's Lunch	29 Trip to Co- lumbus Zoo	30

Summer Program Dates & Activities are  
 Subject to Change

# The Incredible Journey: Discovering the Incredible Person God Created You to Be! Christian Life Academy Summer Daycare Program July 2018 Program Schedule



Sun	Mon	Tue	Wed	Thu	Fri	Sat
1 Theme: Native American Week	2 Visit to Leo Petroglyphs Ray, OH	3 Free Summer Movie: Diary of a Wimpy Kid	4 Summer Program Closed for July 4th	5 Manpower Park & Cardio's Lunch	6 Swimming @ Days Inn Pool	7
8 Theme: Technology Week	9 LEGO Robotics	10 Free Summer Movie: The Emoji Movie	11 PT Reptile Show @ Jackson City Library	12 Manpower Park & Cardio's Lunch	13 Swimming @ Days Inn Pool	14
15 Theme: Around the World Week	16 Games & Crafts from Around the World	17 Free Summer Movie: My Little Pony Movie	18 D.J. Dance Party @ Jackson City Library	19 Manpower Park & Cardio's Lunch	20 Swimming @ Days Inn Pool	21
22 Theme: Science Week	23 Science Experiments	24 Free Summer Movie: Paddington 2	25 AAA Bicycle Rodeo @ Jackson City Library	26 Manpower Park & Cardio's	27 Trip to COSI Science Center!	28
29 Theme: Wild & Wonderful WV	30 Visit to Hill-billy Hot dogs in Lesage, WV	31 Free Summer Movie: Ninjago				

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**The Incredible Journey:  
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 August 2018 Program Schedule**



Sun	Mon	Tue	Wed	Thu	Fri	Sat
Theme: Wild & Wonderful WV			1 Mark Wood Disco Magic Show @ JCL	2 Manpower Park & Cardo's Lunch	3 Swimming @ Days Inn Pool	4
5 Theme: Under the Sea Week	6 Visit Newport Aquarium	7 Free Summer Movie: Ferdinand	8 Lake Alma State Park Nature Trail & Picnic	9 Manpower Park & Cardo's Lunch	11 Last Day of Daycare: Party at Triple Crown	12
13	14	15	16	17	18	19
20	21 First day of school @ CLA	22	23	24	25	26
27	28	29	30	31		

*Summer Program Dates and Activities are subject to change*



June 5



June 12



June 19



June 26



July 3



# TriCity THEATRE

## 2018 Free Movies Summer Movies

11am and 2pm showings each day, in all 4 Auditoriums! Doors Open 1 hour before showtime. Free admission for everyone. Seating is Limited and not Guaranteed.

BONUS THROWBACK! Aug 14



July 10



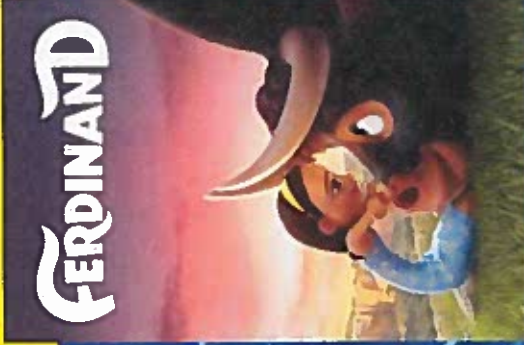
July 17



July 24



July 31



Aug 7



# LIBRARIES™ ★ ROCK! ★

## **Summer Reading Program**

**Jackson City Library**

**June 13...Wave on Wheels  
(penguins) 2:00 and 4:00**

**June 20....4-H kids**

**June 27....Mr. Puppet**

**July 11...(noon and 2) P.T. Reptile**

**July 18...D.J. Dance Party!**

**July 25...AAA Bicycle Rodeo w/  
Kiwanis**

**Aug.1...Disco Magic Show**

Join us on Wednesdays at 2 p.m. for an  
hour of fun

and participation for a creative and

imaginative summer at the

Jackson City Library.

For more information call 740-286-4111

## Application for Enrollment to Christian Life Academy Summer Daycare Program

**Statement of Nondiscriminatory Policy as to Students:** "Christian Life Academy does not discriminate on the basis of race, color, national origin, or ethnic origin in admission policies, financial aid assistance, or school-related programs. Christian Life Academy reserves the right to select or to deny students on the basis of academic performance, religious commitment, lifestyle choices, and personal qualifications, not limited to, but including, a willingness to cooperate with administration and to abide by school policies of conduct and behavior.

The school is intended to be a non-public charter school option available to students seeking placement in preschool-grade 12 education. The role of Christian Life Academy is to educate students for spiritual and academic growth, equipping them to be successful members of their communities."

*I / We \_\_\_\_\_ (signature of the parent or legal guardian ) have made application for enrollment, to the school operated by Christian Life Academy, a ministry of Good Shepherd Wesleyan Church for the following student:*

### Student Current Information Form

Name: \_\_\_\_\_  
(Last) (First) (Middle)

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade : \_\_\_\_\_

*Student Residence Is With:*

\_\_\_\_\_  
*Both parents      Shared Parenting      Mother only      Father only      Legal Guardian*

- *It is the responsibility of parents with students who have special circumstances (such as shared parenting plans, special visitation situations, etc.) to provide CLA with a copy of any court ordered papers as well as a current schedule of who will be picking up student each day.*



**Family Current Information Form**

**Father's Name:** \_\_\_\_\_  
(Last) (First) (Middle)

**Employment:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Parent's Education Level:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_  
(Last) (First) (Middle)

**Employment:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Parent's Education Level:** \_\_\_\_\_

**Please explain:**  
\_\_\_\_\_  
\_\_\_\_\_

**Emergency Contact & Medical Information:**

*In the case of illness or early dismissal due to inclement weather, please list the name and contact information of a person that we may contact if we cannot reach either parent / guardian.*

Contact #1: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Contact #2: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Child's Physician: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name of Child's Dentist: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Health Record**  
**(to be completed by parent / guardian)**

1. List all allergies and any special precautions and treatment indicated for these allergies (Foods, medications, or environmental allergies):

\_\_\_\_\_  
\_\_\_\_\_

2. List any medications: food supplements, modified diets, or fluoride supplements currently being administered to the child:

\_\_\_\_\_  
\_\_\_\_\_

3. List any chronic physical problems and any history of hospitalization:

\_\_\_\_\_  
\_\_\_\_\_

4. List any diseases the child has had:

\_\_\_\_\_  
\_\_\_\_\_

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Ages 3-12 years old

**Emergency Medical Consent for Treatment:**

In the event reasonable attempts to contact the parent at \_\_\_\_\_ (phone # ) or \_\_\_\_\_ (phone #) have been unsuccessful, I hereby DO give my consent for : (1) the administration of any treatment deemed necessary by Dr. \_\_\_\_\_ (preferred physician), or, in the event the designated practitioner is not available, by another licensed physician or dentist ; and (2) the transfer of the child \_\_\_\_\_ to \_\_\_\_\_ (preferred hospital) or any hospital reasonably accessible.

This authorization does NOT cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery are obtained before surgery is performed.

Facts concerning the child's medical history including allergies, medications being taken, and any physical impairments to which a physician should be alerted:

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent

**Refusal to Consent for Treatment**

**Do NOT fill this out if you filled out the Authorization for Treatment**

I DO NOT give my consent for emergency medical treatment of my child. In the event of illness or injury requiring medical treatment, I wish the school authorities to take NO action OR to follow my instructions below:

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent



**Permission to Pick Up Child List**

*Please list below anyone that has permission to pick up your child from preschool, school, daycare programs, or after school programs. Anyone that is NOT listed on this form will NOT be permitted to leave Christian Life Academy with your child. You can add names to this form by sending in a note to your child's teacher or by calling the school office and giving a verbal consent.*

*Student's Name:* \_\_\_\_\_

*Class / Grade:* \_\_\_\_\_

*Name of Parents:* \_\_\_\_\_

*I / we give the person (s) listed below permission to pick up my child from Christian Life Academy preschool, daycare, school, or afterschool programs. I understand that anyone who is NOT listed on this form will NOT be permitted to pick up my child from Christian Life Academy.*

	<i>Name</i>	<i>Relationship</i>	<i>Phone Number</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

***Parent Signature and Date:*** \_\_\_\_\_

- *This form must be submitted to the school office prior to the first day of school.*

Christian Life Academy Summer Daycare Program 2018  
Ages 3-12 years old

**Christian Life Academy 2018 Summer Daycare Information:**

- CLA Summer Daycare Program will operate Monday June 4<sup>th</sup> – Friday August 11, 2018.
- Hours of operation will be 7 am-5:15 pm daily
- Students served will be between the ages of 3-12 years old.
- All preschool students attending the program must be potty trained.
- Students will be billed weekly for daycare services.
- Rate will be \$25 per day of attendance.
- Our program is looking into serving lunches to students daily. More information will be available by May 18<sup>th</sup>.
- The program will take place in the CLA gymnasium, the CLA playground, and the downstairs of the church. Some short day trips may be taken to the city park, movie theater, or city pool, during the program, with permission of parents. We will also be taking one long day trip per month.
- We ask that students do not bring electronic devices to summer program, such as phones, tablets, etc. We will spend a large amount of time playing indoors and out, doing arts and crafts, reading, and enjoying fun and active activities.