

**WEEK 1**  
**Payment due,**  
**Thursday Dec. 16**  
**by 6:00pm**

# Winter Break Camp

sponsored by: **City of Peoria & Peoria Unified School District**

**DATES:** December 20-23, 27-30  
**NO PROGRAM** -December 24 and December 31

**COST:** \$24 per day, includes Breakfast (**until 7:15**), AM & PM snack and scheduled field trip. All fees due at time of registration

**HOURS:** **6:00 a.m.** – 6:00 p.m.

**CHILDREN:** **Ages 5-14**

**Open at 6:00am**  
**ACCEPTING CHILDREN**  
**UP TO AGE 14**

**REG. FEE:** A \$5 registration fee for children not currently enrolled in the AM/PM Program

**LUNCH:** Parents need to provide a non-perishable sack lunch & drink each day, unless you are choosing the optional lunches offered on various days for a \$4.00

**REG. FORM:** Those **not currently enrolled** in AM/PM program will need to complete the Emergency Information form along with the Winter Break Registration form and submit a copy of child's immunization records, per AZ DHS requirements.  
Child may not attend without the completed registration forms.

Those currently enrolled in AM/PM Program will need to complete a Winter Break registration form completely; signing in all required areas.



**For more information contact your AM/PM site or Peoria Recreation at 623-773-7137**

Completed Registration forms with PAYMENT will be taken at these 3 locations:

- 1) **AM/PM Sites** until the end of AM program on 12/16,
- 2) **Winter Break Camp Sites**
- 3) **Community Services Bldg** - 9875 N. 85th Ave

## **WINTER BREAK CAMP LOCATIONS**

**Cheyenne Elem.** (green) - 11806 N. 87th Ave; Multi **623-764-0437**  
Alta Loma, Cheyenne, Country Meadows, Cotton Boll, Ira Murphy,  
Oakwood, Oasis, Paseo Verde, Peoria, Santa Fe, Sun Valley, Sky View, Sundance

**Coyote Hills Elem.** (red) - 21180 N. 87th Ave; Multi **623-764-1065**  
Apache, Coyote Hills, Desert Harbor, Frontier, Lake Pleasant,  
Parkridge, Vistancia, Zuni Hills

Information available on line at - **www.peoriaaz.gov/ampm**

# FEE ATTENDANCE CONTRACT

↓↓↓ Please mark below the Winter Break Camp you will attend: ↓↓↓

Cheyenne
  Coyote Hills

Child's Name: \_\_\_\_\_ Home School Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent's Home Phone: \_\_\_\_\_ - \_\_\_\_\_

Parent's Day Phone: \_\_\_\_\_ - \_\_\_\_\_ Emergency Phone: \_\_\_\_\_ - \_\_\_\_\_

EMAIL Address: \_\_\_\_\_ Alternative Cell: \_\_\_\_\_ - \_\_\_\_\_

Please mark each day your child will be attending and total below. Daily Fee - \$24.00 includes trips.

## WINTER BREAK TRIP SCHEDULE & FEES

☒	DATE	TRIPS	FEE	TOTAL
<input type="checkbox"/>	Mon, Dec 20	<b>AZ Broadway Theatre - "Christmas in a land of Oz"</b> <i>Optional Lunch</i> - 2 slices pizza and a drink	\$24 \$4	
<input type="checkbox"/>	Tues, Dec 21	<b>Movie - Mega Mind - PG</b>	\$24	
<input type="checkbox"/>	Wed, Dec 22	<b>Jump Street - Trampolines</b> <span style="float: right;"><b>WEAR SOCKS</b></span> <i>Optional Lunch</i> - Sub, chips, drink	\$24 \$4	
<input type="checkbox"/>	Thur. Dec 23	<b>Inflatable Party (on site)</b> <i>Optional Lunch</i> - Chicken Strips, Tater Tots & a Drink	\$24 \$4	
	<b>Fri, Dec 24</b>	<b>CLOSED</b>		
<input type="checkbox"/>	Mon, Dec 27	<b>Movie - Tangled - PG</b> <i>Optional Lunch</i> - Sonic Burger, Tots & Drink	\$24 \$4	
<input type="checkbox"/>	Tues, Dec 28	<b>Wazee's World - Laser Tag &amp; Cosmic Golf</b> <span style="float: right;"><b>WEAR SOCKS</b></span> <i>Optional Lunch</i> - Sonic Corndog, Tater Tots & a Drink	\$24 \$4	
<input type="checkbox"/>	Wed, Dec 29	<b>Peter Piper - 2 slices pizza and a drink w/ 2 tokens</b>	\$24	
<input type="checkbox"/>	Thur, Dec 30	<b>Rollero - Roller Skating</b> <i>Snack - hotdog &amp; drink</i> <i>Optional Lunch</i> - 2 Soft Tacos, Cinnamon Twists & Drink	\$24 \$4	
	<b>Fri, Dec 31</b>	<b>CLOSED</b>		

**Sub Total (including optional lunches)**

**Required Fees:**

**\$5.00 Winter Break Camp Registration Fee =**  
If child is **NOT** registered in 10/11 AM/PM program

TOTAL FEES DUE

**TOTAL FEES PAID**

**Week 1 payment - Due by Thursday, Dec. 16 at 6:00pm**

**Week 2 payment - Due by Thursday, Dec. 23 at 6:00pm**

**METHODS of PAYMENT and WHERE TO REGISTER**

- 1. AM/PM Sites** during program hours until Dec. 16 AM program - **Checks ONLY**
- 2. Community Services** at 9875 N. 85th Ave, **623-773-7137**- Credit Card, Check or Cash
- 3. Community Center** at 8335 W Jefferson - Credit Card, Check or Cash

I am currently enrolled in Quick Pay / EFT, charge my account for "Total Fees" . *Initial* \_\_\_\_\_.



# WINTER BREAK FIELD TRIP SCHEDULE

## Basic Field Trip Information and Optional Lunches

Optional Lunches - \$4.00

### WEEK #1

12/20- Pizza  
2 Pizza slices & a Drink

12/22- Sub Sandwich  
Sub, Chips & a Drink

12/23 - Sonic  
Chicken Strips, Tater Tots & a Drink

### WEEK #2

12/27 - Sonic  
Burger, Tater Tots, a Drink

12/28 - Sonic  
Corndog, Tots & a Drink

12/30 - Taco Bell  
2 Soft Tacos, Cinnamon Twists & a Drink

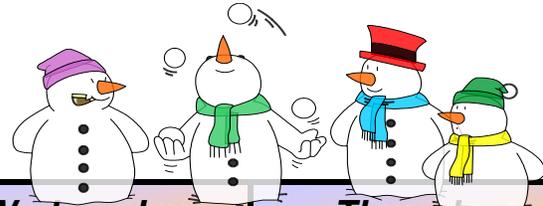
### Schedule is subject to change.

Check with your site for accurate dates and times for all trips and optional lunches.

**Below are the arrival times for trips.**  
***These times do not reflect the actual time of the trip.***

**Please do not be late, the bus won't wait.**

Not responsible for personal items brought to site.



Monday	Tuesday	Wednesday	Thursday	Friday
<p>20</p> <p><b>AZ Broadway Theatre</b></p> <p>Presents....</p> <p><b>CHRISTMAS IN A LAND OF OZ</b></p> <p>9:00-11:30am</p> <p><u>Lunch Option - \$4</u> 2 Slices Pizza &amp; a Drink</p>	<p>21</p> <p>ALL CAMP SITES</p> <p><b>Harkins</b></p> <p>Snack Pack Included</p> <p>8:30-12:00pm</p> <p>"Mega Mind" - PG</p> 	<p>22</p> <p><b>JUMP STREET</b></p>  <p>BOTH SITES</p> <p>9:00-12:30am</p> <p><u>Lunch Option - \$4</u> Sub, Chips &amp; Drink</p>	<p>23</p> <p><b>INFLATABLE PARTY ON SITE</b></p> <p>Cheyenne: 8:00 - 11:00</p> <p>Coyote: 12:00 - 3:00</p> <p><u>Lunch Option - \$4</u> Sonic - Chicken Strips, Tater Tots &amp; a Drink</p>	<p>24</p> <p><b>CLOSED</b></p>
<p>27</p> <p>ALL CAMP SITES</p> <p><b>Harkins</b></p> <p>Snack Pack Included</p> <p>8:30-12:00pm</p> <p>"Tangled" - PG</p>  <p><u>Lunch Option - \$4</u> Sonic - Burger, Tots &amp; Drink</p>	<p><b>WINTER'S WONDERLAND WEAR SOCKS LASER ZONE</b></p> <p><b>LASER TAG</b></p> <p>2-3 Laser games &amp; a Round Cosmic Golf</p> <p>Optional: Bring \$ for video games &amp; snacks</p> <p><u>Both sites</u> 8:00-12:30pm</p> <p><u>Lunch Option - \$4</u> Corndog, Tots &amp; Drink</p>	<p>29</p> <p>Coyote 75th/Bell</p> <p>Cheyenne 67th/Peoria</p> <p></p> <p>2 pizza slices, a drink &amp; 2 tokens</p> <p>Both sites 10:15-1:30 pm</p> <p>Optional Bring money for games, videos, etc..</p>	<p>30</p> <p><b>NEW YEARS CELEBRATION</b></p> <p><b>at Rollero</b></p> <p>Both Sites 8:00-11:30am</p> <p><b>WEAR SOCKS</b></p> <p>Includes Snack Hotdog &amp; a drink</p> <p><u>Lunch Option- \$4</u> 2 Soft Tacos, Cinnamon Twists &amp; Drink</p>	<p>31</p> <p><b>CLOSED</b></p>

# FIELD TRIP PERMISSION SLIP

Child's Name: \_\_\_\_\_ Camp : \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent's Day Phone: \_\_\_\_\_ - \_\_\_\_\_

I (Parent/Guardian) give permission for my child, \_\_\_\_\_ to attend the following field trips with **Cheyenne Break Camp**. I am aware of the following trips that are being offered and I have received a schedule with the field trip dates and times below in the registration packet. I understand that for my child to receive their required wristband for the field trip, they need to be signed up on the field roster for that day by a parent/guardian. Arrive at least 30 minutes prior to below time.

<input checked="" type="checkbox"/>	DATE	CHEYENNE TRIPS	PHONE	EXACT TIMES	INITIAL
<input type="checkbox"/>	Mon Dec 20	<b>AZ Broadway Theatre</b> 7701 W. Paradise lane Peoria, AZ 85382	623-776-8400	10:00-11:00	
<input type="checkbox"/>	Tues Dec 21	<b>Harkins Arrowhead</b> 9804 W. Northern Ave Peoria, AZ 85345	623-222-4275	9:45-11:30	
<input type="checkbox"/>	Wed Dec 22	<b>Jump Street</b> 5665 W. Bell Rd. Glendale, AZ 85306	602-889-0081	10:00-12:00	
<input type="checkbox"/>	Mon Dec 27	<b>Harkins Arrowhead</b> 9804 W. Northern Ave Peoria, AZ 85345	623-222-4275	9:45-11:30	
<input type="checkbox"/>	Tues Dec 28	<b>Wazee's World</b> 9750 W. Peoria Ave Peoria, AZ 85345	602-920-7616	9:00-12:00	
<input type="checkbox"/>	Wed Dec 29	<b>Peter Piper</b> 6821 W Peoria Ave #149 Peoria, AZ 85345	623-776-8320	11:00-1:00	
<input type="checkbox"/>	Thurs Dec 30	<b>Rollero</b> 7318 W. Indian School Rd. Phoenix, AZ 85033	623-846-1510	9:00-11:00	

By signing below, I give my child permission to attend the field trips listed above.

Signature - **Must be a Parent/Guardian ONLY**

\_\_\_\_\_ Date

**\*Cannot be accepted without Parent signature**

I (Parent/Guardian) give permission for my child, \_\_\_\_\_ to attend the following field trips with **Coyote Hills Break Camp**. I am aware of the following trips that are being offered and I have received a schedule with the field trip dates and times below in the registration packet. I understand that for my child to receive their required wristband for the field trip, they need to be signed up on the field roster for that day by a parent/guardian. Arrive at least 30 minutes prior to below time.

<input checked="" type="checkbox"/>	DATE	COYOTE HILLS TRIPS	PHONE	EXACT TIMES	INITIAL
<input type="checkbox"/>	Mon Dec 20	<b>AZ Broadway Theatre</b> 7701 W. Paradise lane Peoria, AZ 85382	623-776-8400	10:00-11:00	
<input type="checkbox"/>	Tues Dec 21	<b>Harkins Arrowhead</b> 9804 W. Northern Ave Peoria, AZ 85345	623-222-4275	9:45-11:30	
<input type="checkbox"/>	Wed Dec 22	<b>Jump Street</b> 5665 W. Bell Rd. Glendale, AZ 85306	602-889-0081	10:00-12:00	
<input type="checkbox"/>	Mon Dec 27	<b>Harkins Arrowhead</b> 9804 W. Northern Ave Peoria, AZ 85345	623-222-4275	9:45-11:30	
<input type="checkbox"/>	Tues Dec 28	<b>Wazee's World</b> 9750 W. Peoria Ave Peoria, AZ 85345	602-920-7616	9:00-12:00	
<input type="checkbox"/>	Wed Dec 29	<b>Peter Piper</b> 7525 W Bell Rd Peoria, AZ 85382	623-487-9003	11:00-1:00	
<input type="checkbox"/>	Thurs Dec 30	<b>Rollero</b> 7318 W. Indian School Rd. Phoenix, AZ 85033	623-846-1510	9:00-11:00	

By signing below, I give my child permission to attend the field trips listed above.

Signature - **Must be a Parent/Guardian ONLY**

\_\_\_\_\_ Date

**\*Cannot be accepted without Parent signature**



CDC/SGH # or name: \_\_\_\_\_

## Emergency Information and Immunization Record Card

<b>Child's Name:</b>	<b>Date Enrolled:</b>	Updated:
<b>Home Address (#, Street, City):</b>		<b>Date Disenrolled:</b>
<b>Home Phone:</b>	<b>Date of Birth:</b>	Sex: <input type="checkbox"/> male <input type="checkbox"/> female

<b>Mother or Guardian Name:</b>	<b>Home Address (#, Street, City):</b>	<b>Home Phone:</b>
Cell Phone (optional):	<b>Business Address (#, Street, City):</b>	<b>Business Phone:</b>

<b>Father or Guardian Name:</b>	<b>Home Address (#, Street, City):</b>	<b>Home Phone:</b>
Cell Phone (optional):	<b>Business Address (#, Street, City):</b>	<b>Business Phone:</b>

I authorize the following individuals to collect my child from the facility if I cannot be located:

<b>Name:</b>	<b>Address (#, Street, City):</b>	<b>Phone:</b>
<b>Name:</b>	<b>Address (#, Street, City):</b>	<b>Phone:</b>
<b>Name:</b>	<b>Address (#, Street, City):</b>	<b>Phone:</b>
<b>Name:</b>	<b>Address (#, Street, City):</b>	<b>Phone:</b>

The following individual(s) may NOT remove my child from the facility:

<b>Name(s):</b>
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Custody papers have been provided and are on file at the facility.  yes  no

If Medical care is necessary, CALL:

<b>DOCTOR</b>	<b>Name:</b>	<b>Address (#, Street, City):</b>	<b>Phone:</b>
<b>HOSPITAL</b>	<b>Name:</b>	<b>Address (#, Street, City):</b>	<b>Phone:</b>

I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time for his/her health and safety. It is understood by me that the expense of this service will be accepted by me.

<b>In case of injury or sudden illness, I request that this individual be called first:</b>
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Does your child have insurance coverage?  No  Yes Name of Insurance Company: \_\_\_\_\_

Telephone Authorization Code : \_\_\_\_\_ (optional)

**Immunization Information**

For information regarding current immunization requirements go to:  
[www.azdhs.gov/phs/immun/index.htm](http://www.azdhs.gov/phs/immun/index.htm) or contact the Arizona Immunization Program Office at (602)364-3630.

One of these items must accompany the EIIR card at all times:

<input type="checkbox"/>	Copy of current official documented immunization record attached
<input type="checkbox"/>	Religious Beliefs exemption form signed by parent/guardian attached
<input type="checkbox"/>	Medical Exemption form signed by physician and parent/guardian attached
<input type="checkbox"/>	Signed Laboratory Proof of Immunity form attached

Notification of immunizations needed sent to Parent(s) or Guardian(s):	mo /day/ yr	mo /day/ yr	mo /day /yr
Updated immunizations received and attached:	mo /day/ yr	mo /day/ yr	mo /day /yr

**Medical Information**

<p>Is child allergic to food or other substances? <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>If yes</b>, describe symptoms, name foods or substances to be avoided, and the procedure to follow if reaction occurs:</p>
<p>Is child usually susceptible to infections and if so, what precautions need to be taken? <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>If yes</b>, list precautions:</p>
<p>Is child subject to convulsions and what should be our procedure if one occurs? <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>If yes</b>, specify procedure:</p>
<p>Is there any physical condition that we should be aware of and what precautions should be taken (heart trouble, foot problem, hearing impairment, hernia, etc.)? <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>If yes</b>, list precautions:</p>
<p>Additional comments:</p>
<p>Other special instructions:</p>

This **Emergency Information and Immunization Record Card** is accurate and complete, front and back, and was provided by:

Parent/Guardian PRINTED Name:	SIGNED Name:	DATE: