

# Birmingham Regional Empowerment And Development Center



June 10th - July 31st 2024

**Mandatory Summer Orientation  
Monday, June 3, 2024 @ 3:00pm**

Dr. T. L. Lewis, CEO

**EMPOWER COMMUNITY SCHOOL  
751A Academy Drive ♦ Birmingham, Alabama  
35022**

[www.breadcenter.org](http://www.breadcenter.org)

**Field Trips, STEM, and Enrichment Activities!!!**

**Where summer learning is fun!!!**

**For More Information: 205-796-0550 or 205-413-8600**

Thank you for allowing your child to become a part of our Summer Camp experience. Camp BREAD is a fun and fantastic camp filled with adventure, entertainment, enrichment, and excitement. It is a place to learn, grow, make friends and most of all have fun.

Campers will enjoy interactive basic computer training, academic enrichment, recreational activities (in-door and outdoor sports), arts and crafts, board, electronic and technology games, field trips and picnics in the park.

## **Things to Remember:**

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Please adhere to the following guidelines. Failure to follow guidelines as outlined below will affect your child's participation in daily activities.

- **Ages for camp are 5 – 14 years old.**
  - **Camp starts at 12:00pm and ends at 4:00pm.**
  - **All children **must** wear sneakers/tennis shoes to play outside.**
  - **No tank tops, halter tops, or spaghetti straps should be worn to camp.**
  - **Boys must wear lined swimwear (no cut off shorts). Please bring your own towel.**
  - **Girls must wear one piece swimsuits, and remove all jewelry, beads, and barrettes from hair before swimming.**
  - **Girls must wear shorts under dresses to participate in sports/activities.**
  - **Campers are not allowed to bring bookbags, toys, or video games to the center. We will not be responsible for any broken, lost or stolen items.**
  
  - **Participants should not be brought to the camp if they have: severe colds, ring worms, undetermined rash or spots, fever, severe headaches, upset stomach, or other symptoms of illness. Parents will be notified to pick up children immediately if signs of illness occur during the day.**
  
  - **Students who require medication must have medication in its original container and clearly labeled with the child's name and directions for administering the drug. A written, signed, and dated medication form must be completed.**
  
  - **Concerns from parents are to be discussed with the Camp Director.**
  
  - **Parent volunteers are encouraged and welcomed to participate as much as possible, especially during field trips.**
  
  - **Please note that registration fees and activity fees are non-refundable.**
  - **PLEASE KEEP PAGES 1 – 3 FOR YOUR REFERENCE.**
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# Camp BREAD Tee Shirt Form

We will have tee shirts available for our campers at no additional cost to them. Please indicate your child's or children size.

Child's Name:

\_\_\_\_\_ Age \_\_\_\_\_

## Children Sizes

SM 5-7 \_\_\_\_\_ Med 8-10 \_\_\_\_\_ Lg 12-14 \_\_\_\_\_

## Children who need Adult Sizes

SM \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_

*Please make sure you order the correct size. If you are unsure please order the next largest size. Once the order is placed and shirts are received we cannot change the size ordered.*

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## Additional T-Shirts Children Sizes @ \$12.00

SM 5-7 \_\_\_\_\_ Med 8-10 \_\_\_\_\_ Lg 12-14 \_\_\_\_\_

## Adult Sizes @ \$15.00

SM \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_ Quantity \_\_\_\_\_

*Additional T-Shirts must be paid for when the order is placed.*

# Student Travel Release

I, \_\_\_\_\_ give B. R. E.A. D. Center, Inc.  
*Parent's Name*

S.T.E.P.S. permission to transport my child \_\_\_\_\_  
*Child's Name*

on field trips and excursions during Summer Camp outings 2024. In case of emergency

I may be reached at \_\_\_\_\_ or \_\_\_\_\_.  
*Phone Numbers*

**I give my child permission to participate in: (Circle yes or no and sign each line)**

Activities away from the facility:	Yes	No	Signature of parent/guardian	Date
Transportation provided by the facility:	Yes	No	Signature of parent/guardian	Date
Swimming/wading activities provided by the facility:	Yes	No	Signature of parent/guardian	Date

**Form is not valid without signature of child's parent/guardian in each space indicated above.**

**BIRMINGHAM REGIONAL EMPOWERMENT AND DEVELOPMENT CENTER, INC.**  
**SUMMER CAMP 2024**  
**Empower Community School**

Child's Name \_\_\_\_\_ School \_\_\_\_\_

Birth Date \_\_\_\_\_ Gender \_\_\_\_\_ Race \_\_\_\_\_ Promotion Grade \_\_\_\_\_ Best Contact Number \_\_\_\_\_

Primary Contact Person \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Other # \_\_\_\_\_ Home \_\_\_\_\_ Email Address \_\_\_\_\_

Secondary Contact \_\_\_\_\_ Best Contact Number \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Proposed Vacation Date(s) \_\_\_\_\_

**Is your child eligible:** Free/Reduced lunch \_\_\_\_\_ **How many students are you enrolling?** \_\_\_\_\_

Is this child currently Bilingual? \_\_ Special Education? \_\_ ESL/LEP? \_\_ Gifted & Talented? \_\_

If yes, please describe special accommodations that the child requires. \_\_\_\_\_

**PICK UP:** Person(s) with permission to pick up child other than the parents/guardian:

1. \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_
2. \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Is there a court order in place regarding who may visit/pick up the child? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide us with the person(s) name. \_\_\_\_\_

**IN CASE OF EMERGENCY, CONTACT:**

1. \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_
2. \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**MEDICAL INFORMATION:** (Allergies, nose bleeds, physical constraints, etc.) Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain the problem. \_\_\_\_\_

**In case of emergency, the staff has my authorization to secure medical attention for my child.**

Yes \_\_\_\_\_ No \_\_\_\_\_

I the undersigned parent or guardian of the above named child, authorize my child's school to release report card and other test results pertinent to measuring the child's academic performance. Further, I understand that if the above named child violates the disciplinary policy of the Birmingham Regional Empowerment and Development Center, they may be suspended or dismissed from the program. I also understand that neither the Birmingham Regional Empowerment and Development Center nor its employees are liable for injuries that occur during the child's transportation to or from extra curricular events or while on-site. I understand and acknowledge that the program may keep on file a copy of the child's academic records and other pertinent data. I also agree that the program may utilize photographs, slides and videos of the above named child. I consent to such uses and hereby waive all rights to compensation for such uses.

Signature \_\_\_\_\_ Date \_\_\_\_\_