

onewithheart

tulen center for martial arts & wellness

Dear Families,

Thank you for choosing One With Heart Tulen Center's Kids Kung Fu Summer camps. Your child is going to have a blast! Camp will be a terrific opportunity for your child to learn new skills, build confidence and have a ton of fun! There are a few things your child will need for camp. Please review the list and if you have questions please give us a call (503) 231-1999.

Check in time is 8:00-9:00 Pick up time is 4:30-5:30.

Please provide your child with a backpack to put all personal items.

- **Poekoelan uniform** – Children should arrive dressed in uniform or workout clothes. No shorts or skirts for workout days. Students wear the camp t-shirt on field trips. This is a way to identify group members and keep safe. We recommend purchasing your child's uniform before the first day of camp.
- **Sack lunch** – Children work up a big appetite so please pack more than you usually would for a day at school with plenty of snacks. We have snacks available for purchase. We recommend the purchase of a snack card. This gives your child the ability to purchase a snack they run out of food.
- **Water bottle** – Write your child's name on the bottle and they will refill it all week. No glass containers please.
- **Bathing suit/Towel/Plastic bag** - Students will change into bathing suits at One With Heart and wear regular clothes over the top on swimming day. We go to East Community Center Pool on Wednesday, March 23rd. Please put bathing suit in a plastic bag so they can wrap it up after swimming.
- **Park clothes/Walking shoes/ Sunscreen** –Make sure your child wears layers including a jacket. Closed toe shoes are the best for playing at the park. Please write your child's name on sunscreen.
- **Medical Needs** - If your child has any medical needs or uses any medication that we need to be aware of please let us know in advance. Please provide us with a written note detailing how to distribute any type of medications for your child.
- **Toys from home:** We ask children to leave toys at home, including electronic games, ipods and trading cards.
- **Medical Release and Contact Information-** We must have these documents before your child can participate in camps. You can mail, email, or fax forms in advance or bring them on your child's first day. Email to Danielle@onewithheart.com, Fax (503) 234-3188 or mail to 4231 SE Hawthorne Blvd, Portland, Oregon, 97215

We look forward to meeting you and your child!!

Please call or email with any questions! (503) 231-1999 or email danielle@onewithheart.com



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4231 SE Hawthorne Blvd Portland, OR 97215
tel: 503.231.1999
fax: 503.234.3188
onewithheart.com

Kids Kung Fu Summer Camp Summer Participation Form



ORLEANS, MA

EASTHAM, MA

NEW YORK, NY

BOARDMAN, OH

SEATTLE, WA

PORTLAND, OR

OAKLAND, CA

AMSTERDAM, NL

Child's Name _____ Age during camp _____

Cirlice Camp Dates: June 20 -24 June 27 -July 1 July 5 -8 July 11 -15 July 18 -22 July 25 -29

1st Parent/Guardian
Name _____

Home
Address _____

Home Phone _____ Cell Phone _____

Employer _____ Work Number _____

2nd Parent/Guardian
Name _____

Home
Address _____

Employer _____ Work Number _____

Home Phone _____ Cell Phone _____

Authorized people to pick up my child

Name _____ Phone # _____

Name _____ Phone # _____

Name _____ Phone # _____

*I give permission for my child (must be over 11 years old) to sign themselves out at a pre-arranged time with the One With Heart staff and after school instructors. My child will be using the following alternate transportation home:
walking ___ taxi ___ bus ___ riding bicycle ___

Permission is given to One With Heart for the following:

Check (X) each item indicating approval.

- In an emergency, One With Heart has my permission to obtain medical treatment for my child, call an ambulance or transport my child to any available physician or hospital at my expense, with the following restrictions (if applicable) _____
- My child may be given medication. I understand the Medical Authorization form must be completed prior to administering. I understand I must clearly communicate any medication administration instructions and permission to OWH staff prior to camp.
- My child may participate in One With Heart Tulen Center field trips. I understand van or public transportation may be used.
- My child may participate in swimming or other water activities.
- My child may be photographed for without any personal identifiers in marketing materials and media promoting the school.
- I give One With Heart instructors and staff permission to administer sunscreen for my child. I understand it is my responsibility to provide a bottle of sunscreen that is labeled with my child's name.

Emergency Medical Information

Please complete a separate form for each child. Registration must be complete.

Child's Name _____ Birth Date _____

Parent/Guardian
Name _____

Home Phone _____ Cell/Pager Number _____

Child's
Physician _____ Phone _____

Address _____ City _____ State _____ Zip _____

Preferred
Hospital _____ Phone _____

Address _____ City _____ Phone _____

Health Insurance
Company _____ Phone _____

Address _____ City _____ State _____ Zip _____

Group Number _____ Individual's Name on the Policy _____

Does your child have any allergies or special medical needs or restrictions that we need to be aware of?

Please list: _____

Date of last tetanus _____

AUTHORIZATION:

I hereby authorize One With Heart Fighting Arts Inc. located at 4231 S.E. Hawthorne Blvd., Portland, OR, (503) 231-1999, to consent to any normal and/or emergency medical, and/or surgical treatment of the above child, which named party deems advisable if I cannot be reasonably located through the information set out below when the child is brought in for treatment.

This is to certify that the information on this form has been completed to the best of my knowledge and that my child is in good health and free of disabilities that would endanger him/her or other children. In addition, I hereby, for myself, my children, dependents, my heirs, executors and administrators, waive and release any and all rights and claims for damages I have against One With Heart Tulen Centers for any injuries which may be suffered with my child or children's involvement in One With Heart Tulen Center's Kung Fu Summer Camps.

Parent Signature _____ Date _____