



CAMP JUMPSTART

WHAT: Camp JumpStart is an intensive emergent literacy program for children ages 3.5–5 years old. Camp JumpStart's goal is to promote learning related to alphabetic knowledge, phonological and phonemic awareness, concepts about print, developmental writing, and oral comprehension

WHERE: Longwood Speech, Hearing, & Learning Services
315 W. Third St. Farmville, VA 23901

WHEN: Monday–Thursday, July 8–18, from 9:00am–12:00pm

COST: \$150. A \$40 nonrefundable deposit is required by June 3rd along with the registration form to reserve a space. The deposit is applied to the total cost and payment. Full payment is required by June 21st. Refunds are not given after June 30th. Families of LU employees receive a 10% discount. Limited stipends are available, if needed.

Complete One Registration Form (attached) for Each Child and Send to:
Longwood Speech, Hearing, & Learning Services
PO Box 513
Farmville, VA 23901



For more information, call (434) 395-2972
www.longwood.edu/shls
www.facebook.com/LUSHLS



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Please Complete and Return with Deposit

Child's Name: _____ Parent's Name: _____

Child's Date of Birth: ____/____/____ Grade in Fall: _____ Current Age: _____ T-shirt size _____

School Currently Attending: _____ Known food allergies: _____

Home Phone: (____) ____ - _____ Cell Phone: (____) ____ - _____

Email Address: _____

Home Address: _____

Weeks Attending (Check all that apply) _____ July 8—11 _____ July 15— 18

Who is permitted to pick up your child? _____



Photography and Videography Release

Client/Participant Name: _____ DOB: _____

Parent/Legal Guardian Name: _____

I am authorizing Longwood Speech, Hearing and Learning Services to photograph and/or video the service sessions for the use(s) listed below. I understand that these are used for informational, educational and/or promotional purposes only and will not be sold to any outside agency.

I give consent for: (Initial) _____ Photography (Initial) _____

Videography of the following:

Initial _____ Education/Training of Students

Initial _____ Official University Publications

Initial _____ Marketing Materials

Initial _____ Camps and will be shared with other participants

Initial _____ I **DO NOT** given consent for photography or videography.

X _____

X _____

Signature of Client

Signature of Parent/Legal Guardian

Date Signed: _____