ROCKCASTLE COUNTY HIGH SCHOOL FRESHMAN SURVIVOR CHALLENGE

July 16th - 20th

8 a.m. to 1 p.m.

We want to give the freshman every chance to be successful during high school!

We would like to see every member of the Class of 2005 reach this goal!

Funding for transportation provided by RCHS/RATC 21st Century Community Learning Center, Innovative Extended School Services, and Gear Up.

ROCKCASTLE COUNTY HIGH SCHOOL FRESHMAN
SURVIVOR CHALLENGE
JULY 16TH-20TH
8am – 1pm

The deadline has been extended!
Students may still sign up for this day camp!

Parents:

If you have a son or daughter who will be a freshman next school year, then please make sure you get him or her signed up for this orientation camp.

During this "Survivor" week, *sponsored by RCHS/RATC 21st Century Community Learning Center, Gear Up, Community Education, and Innovative Extended School Services,* students will get to know the high school building, the teachers they will have next school year, the classes offered at both the high school and area technology center, and the after school programs; students will also be taught study skills and given school supplies.

Breakfast, lunch, and bus transformation will be provided at no cost to you. On Friday, July 20th, there will be a dance and cookout for the camp participants. We will also be giving out lockers, student handbooks, and schedules on that day.

If you have not already sent in your purple "Survivor" form, then please do so today! If you need another copy of this form or have any questions about this day camp, please call Trina Bustle at RCHS, 256-4816. ***Note: You may cut out the form below and mail to: Trina Bustle, Rockcastle County High School, P.O. Box 1410, Mt. Vernon, KY 40456.***

THANK YOU!

SURVIVOR CHALLENGE

PARTICIPANT FORM FOR JULY 16TH-20TH

LAST NAME:_____ FIRST_____ MI_____

STREET ADDRESS:_____

CITY:_____ STATE:_____ ZIP:_____

PHONE:_____ PARENTS NAME:_____

EMERGENCY CONTACT:_____ PHONE:_____

WILL YOU REQUIRE TRANSPORTATION TO SCHOOL EACH DAY? YES___ NO___

WILL YOU REQUIRE TRANSPORTATION HOME EACH DAY? YES___ NO___

ANY KNOWN ALLERGIES OR MEDICAL CONDITIONS? YES___ NO___

(EXPLAIN)_____

MEDICATIONS REQUIRED?_____

SOME CHALLENGES ARE PHYSICAL IN NATURE AND REQUIRE THE ABILITY TO PERFORM STANDARD PHYSICAL TASKS (WALKING, LIFTING, PULLING, ETC.) ARE THERE ANY PHYSICAL LIMITATIONS THAT NEED TO BE ADDRESSED BEFORE THIS EVENT TO INSURE YOUR CHILD CAN PARTICIPATE COMPLETELY IN THESE EVENTS? YES___ NO___

IF SO, PLEASE EXPLAIN:_____

I HEREBY GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN THE FRESHMAN SURVIVOR CHALLENGE. IN ADDITION, IN THE EVENT OF ACCIDENT OR SUDDEN ILLNESS WHILE ATTENDING THIS SCHOOL RELATED EVENT, I AUTHORIZE THOSE PHYSICIAN(S) TO RENDER SUCH TREATMENT AS MAY BE DEEMED NECESSARY IN AN EMERGENCY, FOR THE HEALTH OF SAID CHILD. IN THE EVENT PHYSICIAN(S), PARENT(S), OR OTHER PERSONS DESIGNATED BY THE PARENT CANNOT BE CONTACTED, SCHOOL OR GEAR UP PERSONNEL ARE HEREBY AUTHORIZED TO TAKE WHATEVER ACTION IS DEEMED NECESSARY IN THEIR JUDGEMENT, FOR THE HEALTH OF SAID CHILD.

STUDENT'S SIGNATURE:_____ DATE:_____

PARENT'S SIGNATURE:_____ DATE:_____

PLEASE RETURN THESE FORMS TO THE GEAR UP MAILBOX IN THE RCMS OFFICE OR TURN IN AT RCHS OR MAIL TO TRINA BUSTLE AT RCHS P.O. BOX 1410, MT. VERNON, KY 40456