

ACES & Lorain Cooperative Ministry – in collaboration with NASA &  
Other Service Providers

Presents

## Summer of Innovation Youth Camps

During the summer of 2024 ACES (Achievement through Community Education & Support) and The Lorain Cooperative Ministry (9 area churches) in collaboration with NASA and other service providers will host a Summer of Innovation (SOI) for Lorain County Youth in grades 2<sup>nd</sup> – 7<sup>th</sup> during the period June 17 – August 18, 2024. The SOI program will be presented as eight (8) separate four (4) days per week (Mondays thru Thursdays) STE(A)M (Science, Technology, Engineering (Arts) and Math) focused journeys with each Tuesday serving as a Music, Arts, movie, or game day. Most activities will take place primarily at Greater Victory Church located at 559 Reid Avenue in Lorain. All camps will run from 11:00am - 3:00pm on Monday through Thursday (kids can be dropped off starting at 10:30am). Parents are responsible for transportation to and from the program daily unless permission has been provided for the child to walk to and from the program each day. Lunch and snacks will be provided daily at no cost to students or parents.

By completing and submitting this packet you can enroll your child in any of the eight (8) week-long camps being provided from June 17 – August 8, 2024 (see Parent Camp Selection Form). If your child is accepted into the program he/she will receive an all-expense scholarship for each of the weeks being signed up for. Youth will be accepted on a first packet submitted basis until all 80 weekly scholarships have been used for the season. Scholarships are being made available by the Nordson Corporation & Community Foundation of Lorain County. Please sign your child up only for the weekly camps you are certain they will attend. If after submitting your packet, **you do not hear from us**, your child has been accepted into the program and should be dropped off at Greater Victory (559 Reid Avenue) by 10:45am on the first day of their first week of the camp. Participants attending any of the camps must wear gym shoes each day that they participate. At the conclusion of the summer program (August 8<sup>th</sup>) we will celebrate youth accomplishments during the SOI Summer Experience.

It is important that you only mark the weekly camps that your child WILL ATTEND. If you sign up for a given week and your child cannot attend that week you must call us at 440-654-8018, or we will assume your child is out for the remainder of the summer. Depending on availability, we will be attending movies and probably be swimming at Maude Nieding Park pool one day per week beginning with week 2. If we are allowed to swim your child will need to bring a bathing suit and towel on that day (hopefully Wednesdays) each week (also they must still wear gym shoes).

Although the worst days of the COVID-19 pandemic appears to be behind us, it is important that we as a camp, and you as the parent, take as many precautions as possible to ensure the safety of all the children, staff and volunteers participating in, and delivering services, throughout the summer. Please read SOI safety measures very carefully before submitting your child's packet. If you are not willing to agree to comply with all of our safety measures we cannot accept your child into the SOI program this summer. Non-compliance with established safety measures once the camp has started may result in your child being disenrolled so please read the next page carefully before signing the enclosed forms.

ACES and our collaborating partners intend to provide STE(A)M focused, exciting summer adventures to youth in 2<sup>nd</sup> - 7<sup>th</sup> grade and hope you are able to join us for this year's FREE Summer of Innovation. Please call Mike Ferrer at 440-336-1501 if you have questions about our safety measures. We intend to continue social distancing, engage in extensive hand washing, cleaning, and disinfection of the facility on a daily basis. We will also provide masks if the child or parent requests one.

# SUMMER OF INNOVATION CAMP SAFETY MEASURES

By signing the attached medical and liability forms you, the parent/guardian of the camper being enrolled in the Summer of Innovation weekly camps are agreeing to do your part as a parent to protect the children, staff, and volunteers implementing the program.

## **I. Drop off and pick-up procedures:**

- 1) Upon arriving at the GVCN church entrance each morning, your child will be greeted by ACES staff. Although we will no longer be taking your child's temperature upon arrival or asking previously required health screening questions, we ask that you keep your child at home if they have a fever or are displaying any illness symptoms whatsoever. If your child is not displaying any symptoms associated with illness, he/she will be provided hand sanitizer or taken inside to wash his/her hands before beginning program activities. ACES/SOI camp staff will provide a mask when requested. We will be limiting parent and visitor entry into the facility to maximize the safety of all children in the program.
- 2) When arriving at 3:00pm to pick up your child, ACES staff will again greet you to get your child's name and verify that you are the parent, or designated parent's representative. Once verified the child will be brought out to you. Note: We will only release the child to the parent on the application or the name the parent provides as her authorized pick-up representative.

**II. Sick Children:** Again, if your child has a fever or is displaying illness associated symptoms please do not bring them to camp that day. Children should be fever free WITHOUT fever reducing medication for 48 hours to return to camp. Violations of this policy put your child at risk for dis-enrollment from the Summer of Innovation program.

**III. Child Becomes Sick while at SOI:** If a child becomes sick while at camp, the child will be isolated, and parent will be called. Parent will have 1.5 hours to arrange to pick up child from camp. Violation of this policy may result in your child being dis-enrolled from the program. Please be sure we have your most up to date contact information.

**IV. Personal Items:** Please limit the use of personal items from home that the child brings with him/her to the daily camp sessions. If personal items are necessary, they should remain stored in a backpack or other storage bin so they can be used solely by the camper and returned home daily. Please be sure to complete the section telling us if your child needs to take medications while they are under our care.

**Notes:** Throughout the SOI camp weeks we will be practicing social distancing, washing our hands frequently and limiting the size of participant groups. Students will be in the same group with the same camp support staff every day. Groups will have limited mixing opportunities with other groups (unless outside of the building) to limit interactions that can spread viruses/illnesses. The facility will be sanitized daily, and children will have individual supplies and when sharing limited supply items be wearing rubber latex or non-latex gloves where applicable. Masks will be provided to your child as requested.



**ACES**  
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## REGISTRATION FORM

### APPLICANT INFORMATION

APPLICANT NAME (Youth):		Date of Application:
Date of Birth:	School Attending:	Phone:
Current address:		Parent Email:
City:	State:	ZIP Code:
Grade:	Male/Female:	Age:
# of children enrolling:	Ethnicity: White <input type="checkbox"/> Hispanic <input type="checkbox"/> AA <input type="checkbox"/> Other <input type="checkbox"/>	

### PARENT(S) INFORMATION

Mother's Name:		Father's Name:
Address:		Email:
City:	State:	Zip:
Home Phone:	Work Phone:	Cell Phone:
Does Applicant live with both parents? Y N	If not, which Parent?	

### EMERGENCY CONTACT

Name of a relative that can be contacted if parent is unable to be reached:		
Relationship to Youth:		Phone:
City:	State:	ZIP Code:
Secondary Phone Number:		

### RECOMMENDATION INFORMATION

How did you hear about this program?		
Relationship:		

### PLEASE ANSWER THE FOLLOWING QUESTIONS

Will You & Child make a commitment to complete the week-long program (s) for which he/she has registered?		
Will you instruct child to refrain from fighting/verbally abusive behavior while in program?		
Is child allergic to anything?		
Must child take any medicines while in the program?		
Can child Swim?		
Is there anything we should be aware of concerning your child?		
Have you arranged for child to be dropped off and picked up daily?		
Does Child have your permission to walk to & from the Program site on a daily basis?		

### SIGNATURES

Print Parent Name:	Date:
Parent Signature:	Date:
Approving Authority (office):	Date:

Medical Authorization				
<b>I. Child's Information:</b>				
First Name:	Middle Initial:	Last Name:		
<b>II. Parent/Guardian Information:</b>				
<u><b>1st Parent/Guardian to contact:</b></u>				
First Name:	Last Name:	Relationship:		
Home Phone:	Work Phone:			
Employer's Name	Occupation:			
<u><b>2nd Parent/Guardian to contact:</b></u>				
First Name:	Last Name:	Relationship:		
Home Phone:	Work Phone:			
Employer's Name	Occupation:			
<b>III. Additional Contacts: List 2 people who can be contacted in an emergency if parents cannot be reached.</b>				
<u><b>1st Person to contact:</b></u>				
First Name:	Last Name:	Relationship:		
Employer's Name	Day Time Phone:			
<u><b>2nd Person to contact:</b></u>				
First Name:	Last Name:	Relationship:		
Employer's Name	Day Time Phone:			
<b>IV. Complete the following medical information:</b>				
Please provide any information about your child concerning allergies, medications being taken and any physical impairer to which camp staff or physician (in emergency) should be alerted:				
Allergies:				
Action to be Taken:				
Other Medical Information:				
Date of Last Tetanus:	NOTE: Should be within last 5 years			
Name of Physician or Clinic:				Phone:
Address:	City:	State:	Zip Code:	
Name of Dentist or Clinic:				Phone:
Address:	City:	State:	Zip Code:	
I understand that ACES and its partners can provide basic first aid only and that in the case of an emergency, if reasonable attempts are unsuccessful to contact me or the emergency contacts as indicated above, I hereby give my consent for: 1) The administration of any treatment deemed necessary by the physician indicated below, or in the event that physician is not available, by any other licensed physician. 2) The transfer of my child _____ (name of child) to _____ (name of hospital or physician) or emergency care or to the nearest source of assistance.				
This authorization does not cover major surgery unless the medical opinions of two other licensed physicians, concurring in the necessity of such surgery, are obtained prior to the performance of surgery. I recognize that ACES and its partner's or employees in therefore, are not liable for an act, causing harm or injury which occurs in performance and within the scope of this duty, unless such act be of a malicious, or delibererate nature.				
<b>Parent/Legal Guardian Signature:</b>				
<b>Date:</b> _____				



Achievement thru Community Education & Support

## LORAIN COOPERATIVE MINISTRY & PARTNERS

### General Release of Liability

#### PLEASE READ CAREFULLY

Each participant parent must sign this Liability Release before their child is allowed to participate in the 2024 ACES, Lorain Cooperative Ministry & collaborating partners Summer of Innovation (SOI) program activities & associated fieldtrips. It will be the parent's responsibility to transport their child, or children to and from the Greater Victory Church during the weeklong program or programs for which their child, or children have been registered. Parents should read the information below and sign if you would like your child to participate. Please call Mike Ferrer, Project Director, at 440-336-1501 with questions.

I understand and certify that my child's participation in the ACES, Lorain Cooperative Ministries and collaborating partner's Summer of Innovation (SOI) program is completely voluntary. I have been informed of the program and activities in which my child will be participating in, including games, structured STEM focused projects (engineering, robotics, rocketry, etc.), movie Days, and water/swim activities at a supervised area pool.

I recognize that certain hazards and dangers, including but not limited to insect bites and stings, are inherent at all locations and particularly, but not limited to activities involving walking, and activities at outdoor venues. ACES, the Lorain Cooperative Ministry and its program delivery partners cannot insure, nor guarantee that equipment, premises and/or activities will be free of hazards, accidents, or injuries. I further recognize and have instructed my child in the importance of knowing and abiding by program rules, regulations, and procedures outlined and reviewed for the safety of program participants.

Therefore, for myself/my spouse, and my child, I knowingly/voluntarily assume all risks involved in participation, and do hereby release, indemnify, and hold harmless, ACES, the Lorain Cooperative Ministry, Greater Victory Christian Ministries and other organizations contributing to this project, their members, trustees, officers, employees, independent contractors, and agents from all liability, damages, costs, and expenses arising out of, or relating to bodily or psychological injury and/or loss of personal property that may occur as a result of participating in our Summer of Innovation (SOI) weekly programs.

I have read, understand, and accept all terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon the parties during the duration of participation in Summer of Innovation activities. I am also allowing the taking of group photos to document the activities in which program participants will be involved in. No child has ever been seriously hurt while participating in our SOI camps.

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Name of Child/Participant (Print)

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Name of Parent/Guardian (Print)

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## SUMMER CAMP SELECTIONS

**I WOULD LIKE TO SIGN MY CHILD UP FOR THE FOLLOWING WEEK - LONG CAMPS LISTED BELOW: Camp subject matter may change by the start of camp. Visit our website at [acesloraincounty.org](http://acesloraincounty.org) before camp start for updates.**

**Place an X on the camps your child **is committing** to attending this summer.**

_____	<b>“LET’S GET PHYSICAL”</b>	<b>June 17 – June 21, 2024</b>
_____	<b>“WET &amp; WILD”</b>	<b>June 24 – June 28, 2024</b>
_____	<b>“CARNIVAL OF WONDERS”</b>	<b>July 1 – July 5, 2024 (No Thurs)</b>
_____	<b>“ACTION-REACTION”</b>	<b>July 8 – July 12, 2024</b>
_____	<b>“SCIENCE DISCOVERY”</b>	<b>July 15 – July 19, 2024</b>
_____	<b>“TOP THRILL THEME PARK”</b>	<b>July 22 – July 26, 2024</b>
_____	<b>“DOWN WITH GRAVITY”</b>	<b>July 29 – August 2, 2024</b>
_____	<b>“CELEBRATE GOOD TIMES”</b>	<b>August 5 – Aug 8, 2024</b>

**The partners collaborating on these SOI STE(A)M focused weeklong camps desire that every child possible who wants to participate in the program, will be given an opportunity to do so.**

**If for any reason your child cannot attend a weeklong camp for which she/he has registered, it is imperative you contact us prior to the start of that camp so that we can release that week’s slot to a child who may be on the waiting list.**

**If your child does not show up to a week-long camp for which he/she has been registered, and we have received no notification from the parent that he/she will not be attending, we will assume that your child will no longer be attending the remaining sessions for which you have registered him/her and will release your remaining camp slot(s) to another child from our waiting list.**

\_\_\_\_\_  
**Child’s Name (Please Print)**

\_\_\_\_\_  
**Parent Signature**

## **SUMMER CAMP WEEKLY CAMPS SHORT DESCRIPTIONS**

### **Week 1: “LET’S GET PHYSICAL” (Sports Week)**

Camp kickoff packed with physical activities to keep your body moving! Basketball, kickball, dodgeball, relay races, and tons of fun!

### **Week 2: “WET & WILD” (Water Week)**

Are you ready to get wet? Take a break from the summer heat with wacky water games and slippery relays, while learning about the unique properties of water.

### **Week 3: “CARNIVAL OF WONDERS” (Carnival Week)**

Do you love playing games, winning prizes, and eating yummy comfort food at carnivals? This year we are hosting our 1<sup>st</sup> Annual “Carnival of Wonders” – where you can be a kid and have some FUN!

### **Week 4: “ACTION-REACTION” (Chemical Reactions Week)**

Do you like to see things get slimy or erupt? Play around with different types of chemical reactions this week, learning how different materials mix together to make colorful, bursting messes! You will erupt volcanoes, make fluffy slime, mix mentos & diet coke, and even make ice cream from scratch that you will be able to eat!

### **Week 5: “SCIENCE DISCOVERY” (Experiments Week)**

This week you get to be a real SCIENTIST! You will put on lab aprons and safety glasses and learn about the wonderful world of Biology! You will swab surfaces on a petri dish to observe bacterial growth, dissect owl pellets, and even make rock candy that you will be able to eat!

### **Week 6: “TOP THRILL THEME PARK” (Roller Coaster/Motion Week)**

This week is all about MOTION! You will work in teams to see how the energy of motion works while creatively building your own roller coaster! How many loops and hills can you include in your coaster to make the marble make it from start to finish? Learn motion principles by conducting balloon collisions across the room.

### **Week 7: “DOWN WITH GRAVITY” (Rocket Week)**

Stimulate your mind by learning about flight and the powerful force of gravity! Have you ever wanted to be an astronaut? Engage in “out of this world” fun as we design, test, and launch rockets with REAL engines. You will observe gravity in a teamwork egg drop experiment!

### **Week 8: “CELEBRATE GOOD TIMES” (Final Celebration Week)**

This week is all about YOU! We will celebrate the accomplishments of the past 7 weeks. Parents may be invited to join us on Thursday, August 8<sup>th</sup> for lunch as we honor both the students and the sponsors of our program. Only children having completed a previous camp week can attend the final celebration week. *Come celebrate with us!*

Signature of Parent/Guardian

Date





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## **Summer of Innovation Request for Scholarship**

The Achievement thru Community Education & Support (ACES) – 8 Week Summer of Innovation STE(A)M focused camps will accept students on a weekly basis throughout the summer months (June 17 – August 8, 2024) and is a program of ACES Lorain County and the Lorain Cooperative Ministry in collaboration with NASA and other providers. Costs normally associated with participation in STE(A)M focused camps may make it difficult for many youth to participate. ACES and the Lorain Cooperative Ministry are therefore providing 60 camp scholarships each week (made possible through the Nordson Corporation and the Community Foundation of Lorain County) for youth wanting to participate in a summer filled with STE(A)M focused fun. By signing this request and accepting an ACES/Lorain Cooperative Ministry SOI Program Scholarship, I/we understand our child's obligation to complete all facets of the weekly programs and display adaptive social/behavioral skills. This Scholarship is good for participation in one or more weeks of the program. If your child is accepted into the program they may participate in additional weeks of the program and the Scholarship will be renewed at no cost to the parents for each additional week.

Youth Participant Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

ACES, The Lorain Cooperative Ministry and its collaborating partners can only accept a limited number of youth into our Summer of Innovation weekly STE(A)M camps. By signing above, the Youth (verified by parent) makes a commitment to complete the weekly program he/she signs up for and attend all required sessions. This scholarship will cover all costs associated with the Project. If you have any questions regarding the Scholarship being presented to your child upon acceptance into the program please feel free to contact Michael Ferrer, Program Director at 440-336-1501 at your convenience.

**Primary Funding for the Summer of Innovation Project is provided by:**

**The Nordson Corporation  
The Community Foundation of Lorain County  
The Lorain Cooperative Ministry**