



ATTENTION ALL INCOMING 6TH-8TH GRADERS!

MONTY TECH IS HOSTING 13 SUMMER PROGRAMS THIS YEAR! EACH FOUR-DAY CAMP OFFERS A VARIETY OF FUN, HANDS-ON LESSONS AND ACTIVITIES IN ONE PROGRAM OF YOUR CHILD'S CHOICE.

TIME 8:30 - 2:30 | COST: \$200/CAMP *

*AN ADDITIONAL \$25 MATERIALS FEE IS REQUIRED FOR BAKING AND CULINARY CAMPS.

COST INCLUDES ALL PROGRAM MATERIALS & ACTIVITIES, T-SHIRT, DAILY SNACK & LUNCH.

Registration Deadline: May 30, 2023

Christine Leamy, Dean of Admissions
1050 Westminster Street
Fitchburg, MA 01420
(978) 345-9200 x 5231
leamy-christine@montytech.net

\$20 DEPOSIT PER PROGRAM DUE WITH REGISTRATION.

REMAINING BALANCE DUE THE FIRST DAY OF CAMP.

MAKE CHECKS PAYABLE TO:

"MONTY TECH SUMMER CAMP"

AND LIST CHILD'S NAME ON LOWER LEFT OF CHECK.

Scholarships are available for income-eligible students.

*Please note - All camps are subject to cancellation if a minimum of 10 enrollees is not met.

Students who live outside the Monty Tech School District will be placed on a waitlist and will be enrolled only if space allows.

***A School nurse is on site at all times.**

Week 1: June 26 - 29 8:30-2:30

BAKING *ADDITIONAL \$25 MATERIAL FEE

DID SOMEONE SAY FONDANT? GET READY TO BAKE AND DECORATE SOME AMAZING CREATIONS WITH THE OWNER OF SIMPLY SWEET BY CHRISTINE!

CAD - DRAFTING AND DESIGN

WE'LL USE A VARIETY OF SOFTWARE TO CREATE SOLID MODELS, 3D PRINTED OBJECTS, STICKERS, AND ENGRAVINGS!

COSMETOLOGY

HAVE FUN LEARNING THE BASICS OF HAIR STYLING, FACIALS AND MANICURES!


CULINARY ARTS *ADDITIONAL \$25 MATERIAL FEE

LEARN HOW TO SAFELY PREPARE A VARIETY OF DELICIOUS FOODS - THERE WILL BE SOME TO TAKE HOME AND ENJOY EACH DAY!

CYBERSTEM

DO YOU WANT TO KNOW HOW COMPUTERS ARE CHANGING OUR WORLD? YOU WILL LEARN CYBER SECURITY CONCEPTS SUCH AS CRYPTOGRAPHY AND FORENSICS AS WELL AS PROGRAMMING ROBOTS, DRONES AND MICROCONTROLLERS IN PYTHON AND BLOCK-BASED CODING LANGUAGES.

ENGINEERING

EXCITED ABOUT ENGINEERING? DIVE INTO FUN, HANDS-ON ACTIVITIES THAT WILL TEACH YOU THE CONCEPTS OF LIGHTING, LAUNCHING, DROPPING AND MORE! THIS CAMP HAS BEEN GENEROUSLY SPONSORED BY  LEONARDO DRS

GRAPHIC COMMUNICATIONS

ENJOY A PHOTOGRAPHY SCAVENGER HUNT, FUN WITH PHOTOSHOP, CUSTOM T-SHIRT DESIGNING AND MORE!

Week 2: July 10 - July 13 8:30-2:30

Priority for week two will be given to students from Athol/Royalston, Gardner, Murdock, and Narragansett Middle Schools.

ART

EXPLORE A VARIETY OF ARTISTIC CONCEPTS, CREATIVE DRAWING WITH MUSIC AND SELF-PORTRAITS!

BAKING*ADDITIONAL \$25 MATERIAL FEE

(SEE WEEK 1 DESCRIPTION)

COSMETOLOGY

(SEE WEEK 1 DESCRIPTION)

CULINARY ARTS *ADDITIONAL \$25 MATERIAL FEE

(SEE WEEK 1 DESCRIPTION)

ENGINEERING

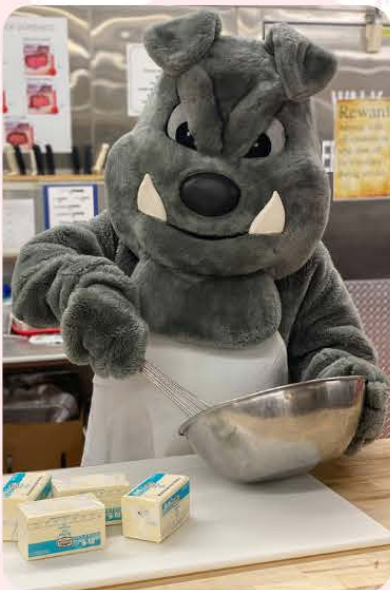
(SEE WEEK 1 DESCRIPTION)

GRAPHIC COMMUNICATIONS

(SEE WEEK 1 DESCRIPTION)



WE ARE VERY EXCITED TO OFFER OUR
1ST BAKING CAMP WITH THE TALENTED
BAKING PROFESSIONALS OF
SIMPLY SWEET BY CHRISTINE!



FUTURE BULLDOG BAKING CAMP!

Christine Konich opened the area's newest (and sweetest) bakery in 2022 and is ready to share her talents at her former high school Monty Tech! Baking instructors will offer everything from the baking basics to decorating a cake. Your camper will be introduced to pastries, cookies, cupcakes, creative frosting techniques, fondant, and more. The best part is they will be bringing their confectionary masterpieces home!



SUMMER CAMP

Field Trip

All summer camp students are invited to attend an optional field trip!

FRIDAY, JUNE 30TH (WEEK 1)

FRIDAY, JULY 14TH (WEEK 2)

8:30 A.M. - 2:30 P.M.

- ✓ Enjoy arcade fun!
- ✓ Lunch will be provided
- ✓ Payment of \$30, per field trip, is due the first day of camp in order to secure your spot on the field trip as space is limited
- ✓ Students are responsible for any valuables they bring



APEX ENTERTAINMENT

21 Apex Dr.

Marlborough, MA 01752

<https://www.apexentertainment.com/marlborough/>



2023 Summer Camp Registration Form

Montachusett Regional Vocational Technical School

1050 Westminster Street - Fitchburg, MA 01420

Christine Leamy, Dean of Admissions

(978) 345-9200 x 5231 leamy-christine@montytech.net

Registration Deadline: May 30, 2023

(Please print clearly)

Camper Name: _____ DOB: _____

Current School: _____ Grade in fall of 2023 ____6 ____7 ____8

Mailing Street Address: _____

City: _____ State: _____ Zip: _____

*please note – students who live outside the Monty Tech School District will be placed on a waitlist and will be enrolled if space allows.

Parent/Guardian Name(s): _____

Primary Phone Number: _____

Secondary Phone Number: _____

Email Address: _____

In case of emergency and the parent/guardian cannot be reached, please list additional people we may contact (different from those listed above):

Emergency Contact 1: _____ Phone: _____

Emergency Contact 2: _____ Phone: _____

Please list any other individuals (from those already listed) authorized to pick up your child:

Campers are placed in one program for the entirety of the four-day camp. Priority for Week 2 will be given to students who attend Athol/Royalston Middle, Gardner Middle, Murdock Middle and Narragansett Middle

Week 1

(Please pick three – rank in order of preference)

_____ Baking _____ CAD/Drafting
_____ Cosmetology _____ Culinary Arts
_____ Cyber STEM _____ Engineering
_____ Graphics

Week 2

(Please pick three – rank in order of preference)

_____ Art _____ Baking
_____ Cosmetology _____ Culinary Arts
_____ Engineering _____ Graphics

Priority for Week 2 will be given to students who attend Athol/Royalston Middle, Gardner Middle, Murdock Middle and Narragansett Middle

Camper's T-shirt Size:

_____ Youth Small _____ Youth Medium _____ Youth Large _____ Youth XL

_____ Adult Small _____ Adult Medium _____ Adult Large _____ Adult XL

Return: 1. Registration, 2. Behavior Contract, 3. Waiver, 4. Student Emergency and Health History and 5. Field Trip form(s) with a \$20 deposit per program and \$30 payment per field trip, if attending.

The remaining balance is due the first day of camp.

Make checks payable to: "Monty Tech Summer Camp" and list child's name on bottom left of check.

Monty Tech Summer Camp Behavior Contract

Safety is extremely important at Monty Tech as students are exposed to different equipment, tools and machinery. It is imperative that you talk with your child about demonstrating self-control, restraint and respect while attending Summer Camp at Monty Tech.

Behavior expectations include:

- Campers are to keep their hands and bodies to themselves at all times.
- Appropriate language is to be used at all times. Showing disrespect to other campers and/or staff will not be tolerated.
- No horseplay, rough housing or touching anything they do not have permission to interact with will be allowed.

To ensure all campers have a safe and enjoyable camp experience, we ask parents to visit with their camper to discuss these expectations. Campers should understand that removal from the program may result from an infraction of this contract. A parent/guardian and the camper are asked to sign this Behavior Contract acknowledging this understanding.

In the event that a safety concern arises or the camper demonstrates disrespectful behavior, a parent/guardian will be notified and possible removal from summer camp or an inability to attend the field trip may occur.

Refunds will not be issued if a student is removed from camp due to breaking the behavior contract.

Parent Signature

Date

Student Signature

Date

MONTACHUSETT REGIONAL VOCATIONAL TECHNICAL SCHOOL DISTRICT WAIVER OF LIABILITY AND RELEASE AGREEMENT

RELEASE, HOLD HARMLESS, COVENANT NOT TO SUE, ASSUMPTION OF RISK AND INDEMNIFICATION

I, _____ (parent name), of _____ (city, state), in consideration of my Child's participation in the Summer Camps at Montachusett Regional Vocational Technical School (the "School") during the summer of _____, do hereby agree as follows:

Child's name: _____

Please read carefully. This is a release and waiver of important legal rights.

Although reasonable precautions are taken to provide proper organization, instruction, and equipment for your Child's participation in the Summer Camps at the School, there can be no guarantee of absolute safety against injury and accident. There are elements of risk in any activity and in any program (individually, an "Activity" and collectively, the "Activities"). I, on behalf of my Child, and myself understand that my Child may be involved in Activities, including but not limited to art, baking, culinary, photography, cosmetology, engineering, and all activities related thereto. I acknowledge that participation by my Child in any Activity is voluntary and that my Child may decline to participate in all Activities.

ACKNOWLEDGMENT OF RISKS: I recognize that there is inherent danger in Activities; that although the program may not be strenuous, injuries or medical complications may occur; that certain foreseeable and unforeseeable events unique to each Activity can contribute to the unpredictability of the Activity; and that unfamiliarity with the Activities may affect the occurrence of accidents and injuries.

EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY: In recognition of the inherent risks of the Activities in which my Child will be engaged, both seen and unforeseen, I confirm that my Child is capable of participating in the Activities. I assume full responsibility for personal injury, accidents or illnesses, including death to my Child, except to the extent caused by the negligence of Montachusett Regional Vocational Technical School District, or anyone for whom it is legally responsible. I also assume responsibility for loss of or damage to my Child's personal property. On behalf of my Child, and myself I assume the risk(s) of personal injury, accidents, and/or illnesses of all kinds and nature.

AUTHORIZATION: I hereby authorize any medical treatment deemed necessary in the event of any injury to my Child while participating in the Activities. I have appropriate insurance or, in its absence, I agree to pay all costs of medical services and medical transport as may be incurred on behalf of my Child.

RELEASE, HOLD HARMLESS AND COVENANT NOT TO SUE: In consideration of my Child's participation in the Activities, I do hereby for myself, my Child and our respective administrators, executors, heirs, spouse, dependents, successors, and assigns, knowingly and intentionally release, forever discharge and covenant not to sue Montachusett Regional Vocational Technical School District and the Monty Tech Foundation, its directors, trustees, officers, agents, employees and volunteers (collectively, "Monty Tech") from and against any claims, demands, expenses, actions and causes of action of every name, type, and nature I or we now have or may ever have arising out of my Child's participation in the Activities on the above dates and on any subsequent dates during which he or she participates in the Activities.

ACKNOWLEDGMENT: In signing this Agreement, I acknowledge and represent that I have fully reviewed it and understand what it means, and that I sign this document as my free act and deed. No oral representations, statements, or inducements, apart from the foregoing written statement, have been made. I further agree that this Agreement shall be construed in accordance with the laws of the Commonwealth of Massachusetts. If any of its terms or provisions shall be held illegal, unenforceable, or in conflict with any law, the validity of the remaining portions shall not be affected thereby to the fullest extent permitted by law. I further state that I agree that I, my child and our respective estates, heirs, administrators, personal representatives, and assigns shall be bound by the same.

Signature of Parent/Guardian

Date

Health Insurance Information:

Company: _____

Subscriber: _____

Policy #: _____

PHOTO/ VIDEO RELEASE

I, _____, hereby grant Montachusett Regional Vocational Technical School District, its representatives and employees, the right to take photographs and record video of my child in connection with the Monty Tech Summer Camp. I authorize Montachusett Regional Vocational Technical School District to use and publish the photos/video in print and/or electronically. I agree that Montachusett Regional Vocational Technical School District may use such photographic or video recordings for the purposes of marketing and publicity of future camp programs.

Signature of Parent/Guardian

Date

Montachusett Regional Vocational Technical School
STUDENT EMERGENCY AND HEALTH RECORD
Summer Camp 2023

Name: _____ Current Grade _____ Birthdate _____
Primary Language Spoken _____
Home address: _____ Phone# _____
Parent/Guardian Email: _____

Mother/Guardian _____ Home Phone _____
Home Address _____ Cell Phone _____
Work Phone _____

Father/Guardian _____ Home Phone _____
Home Address _____ Cell Phone _____
Work Phone _____

Dates Attending Camp: _____

- Are there any legal restrictions for the release of your child or his/her records to the non-custodial parent?
___ YES ___ NO. If yes, please specify and provide legal documents: _____

List two people to whom we may release your child to assume temporary care of him/her if the school is unable to contact you.

1. Name: _____ Relationship _____
Home #: _____ Work #: _____ Cell#: _____
2. Name: _____ Relationship _____
Home #: _____ Work #: _____ Cell#: _____

List two people to whom we may release your child to assume temporary care for your child in the case of a disciplinary removal from school. If this information is the same as above, please write "same as above".

3. Name: _____ Relationship _____
Home #: _____ Work #: _____ Cell#: _____
4. Name: _____ Relationship _____
Home #: _____ Work #: _____ Cell#: _____

Physician Name: _____ Telephone # _____

Does your child have health insurance? ___ Y ___ N Name: _____ Policy # _____

Dentist Name: _____ Telephone # _____

Does your child have dental insurance? ___ Y ___ N Name: _____ Policy# _____

Does your child see a dentist every 6 months? _____ Fluoride treatment _____ Sealants _____

By signing below:

- I am authorizing the school to release my child to any of the people listed above,
- I release all parties from all liability and responsibility while acting in the best interest of the above named child.

Signature of Parent/Guardian: _____ Date: _____

*******PLEASE NOTIFY THE SCHOOL OF ANY CHANGES AS SOON AS POSSIBLE*******

HEALTH HISTORY; LIFE THREATENING ALLERGIES; MEDICATIONS

Please indicate if your child has a physician verified allergy to any of the following. If yes, please provide official documentation by your child's physician and an Emergency Care Plan to the Nurse's Office at the start of summer camp.

Written MD orders are required for all EpiPens, Inhalers, Benadryl and prescription medications.

ALLERGIES:

Bee Stings _____ Peanuts _____ Nuts _____ Medications _____ Other _____

Is an EpiPen Required? Yes _____ No _____

Benadryl required? Yes _____ No _____

Has an EpiPen ever been used? Yes _____ No _____

Does your child carry their EpiPen? Yes _____ No _____

ILLNESS/CHRONIC CONDITIONS (Indicate if your child has experienced any of the following and explain)

Asthma	Anxiety	Attention-Deficit	Concussion
Depression	Diabetes	Fainting	Heart Condition
Hearing Deficit	Hospitalization	Lactose Intolerant	Migraines
Injuries	Scoliosis	Seizures	Other _____

Please explain condition: _____

Vision: Eye Glasses/Contacts: Yes _____ No _____ Date of last eye exam: _____

Sports: Do you know of any reason your child should not participate in sports? Please explain: _____

MEDICATIONS (Please list prescribed and over the counter medications your child takes. Include herbal treatments.)

Name of Medication & Dose	Reason	Home	School

Statement: "I hereby authorize the school to arrange transportation via ambulance to the hospital in case of accident or serious illness. I understand that all attempts will be made to reach me. I give permission to the School Nurse to share information relevant to my child's health with appropriate school personnel/bus driver when needed to meet my child's health and safety needs. I give permission to exchange information with my child's primary care physician and specialists for the purpose of referral, diagnosis and treatment, as well as obtaining current immunization and physical exam status."

***Parent/Guardian Signature: _____ Date: _____

MEDICATION PERMISSION

Yes	No	I give permission to the School Nurse to administer Acetaminophen 325-975 mg by mouth.
Yes	No	I give permission to the School Nurse to administer Ibuprofen 200-800 mg by mouth.
Yes	No	I give permission to the School Nurse to administer Tums (or generic equivalent) 1-2 tabs.

***Parent/Guardian Signature: _____ Date: _____

Our School Physician, Dr. Lee Mancini, has agreed to grant his permission for the administration of Acetaminophen, Ibuprofen and Tums in the school at the discretion of the School Nurse, with written parental permission. Please complete above.

Monty Tech Summer Camp Field Trip (Optional)

****Please note there is a \$30 payment needed at time of registration to attend the field trip****

Friday, June 30, 2023

Apex - Marlboro, MA



8:30 a.m. Drop off at Monty Tech

9:00 a.m. Depart for Apex, Marlboro

10:00 a.m. – 1:30 p.m. Time at Apex (We will be staying together in the Apex area only)

- Students will have 1.5 hours to bowl, shoe rental is included
- Lunch is two slices of cheese/pepperoni pizza, soft drinks/water and an ice cream sandwich
- 60 minute arcade card
- Laser Tag, Bumper Cars and Sports Simulators
- Time to turn in tickets and chose prizes

1:30 p.m. Depart for Monty Tech

2:30 p.m. Parent pick up at Monty Tech (please allow some flexibility in case we encounter traffic on the way home)

***Please note, campers are responsible for any valuables they take on the trip (phone, spending money, etc.); Money is not required but they may bring some if they want to purchase more time in the arcade – this will only be possible if time allows. A nurse will be accompanying us on the field trip.

Camp Coordinator - Christine Leamy

Please fill out the bottom portion and return it with your camp registration. Checks for \$30 should be made out to “Monty Tech Summer Camp” with your child’s name and field trip date on the memo line, if your child will be attending.

Retain the top portion for your information.

Campers Name: _____

June 30th Field Trip

Please check one:

_____ Will be attending the field trip
to Apex on Friday, June 30th

_____ Will NOT be attending the field trip
to Apex on Friday, June 30th

Monty Tech Summer Camp Field Trip (Optional)

****Please note there is a \$30 payment needed at time of registration to attend the field trip****

Friday, July 14, 2023

Apex - Marlboro, MA



8:30 a.m. Drop off at Monty Tech

8:45 a.m. Depart for Apex, Marlboro

9:30 a.m. – 1:30 p.m. Time at Apex (We will be staying together in the Apex area only)

- Students will have 1 hour to bowl, shoe rental is included
- Lunch is two slices of cheese pizza, soft drinks/water
- 60 minute arcade card
- 2 tickets to play Laser Tag or Mini Golf
- Time to turn in tickets and chose prizes

1:30 p.m. Depart for Monty Tech

2:30 p.m. Parent pick up at Monty Tech (please allow some flexibility in case we encounter traffic on the way home)

***Please note, campers are responsible for any valuables they take on the trip (phone, spending money, etc.); Money is not required but they may bring some if they want to purchase more time in the arcade – this will only be possible if time allows. A nurse will be accompanying us on the field trip.

Camp Coordinator - Christine Leamy

Please fill out the bottom portion and return it with your camp registration. Checks for \$30 should be made out to “Monty Tech Summer Camp” with your child’s name and field trip date on the memo line, if your child will be attending.

Retain the top portion for your information.

Campers Name: _____

July 14th Field Trip

Please check one:

_____ Will be attending the field trip
to Apex on Friday, July 14th

_____ Will NOT be attending the field trip
to Apex on Friday, July 14th

2023 Summer Camp Scholarship Application Montachusett Regional Vocational Technical School

Scholarship Application Deadline: June 2, 2023

If you need financial assistance with paying for your child to attend camp,
please have a school staff member complete the application.

Candidates should qualify for free/reduced lunch.

Please mail or scan completed forms to:
Christine Leamy, Dean of Admissions
1050 Westminster Street
Fitchburg, MA 01420
leamy-christine@montytech.net

School Staff Name and Position: _____

School/District: _____

Student Name: _____ Current Grade: _____

How long have you known the student? : _____

Please rate the student in the following categories:

	Lowest					Highest
Behavior	1	2	3	4	5	
Respect for Others	1	2	3	4	5	
Willingness to Learn	1	2	3	4	5	
Willingness to Participate	1	2	3	4	5	
Student's Motivation	1	2	3	4	5	
Student's Need for Financial Aid	1	2	3	4	5	

Additional Comments: _____

