



Montgomery Catholic Preparatory School

2021 Summer MakerSpace & Robotics Camps

Summer MakerSpace Institute (6 Week Camp Experience)

For rising 7th – 12th graders

June 14 – July 1 and July 12 – 29 (Monday – Thursday each week)

1:00 – 4:00PM

Cost: \$200

Does your child want to spend the summer learning about our MakerSpace and expanding their creative and technical skills? This 6-week project-based learning opportunity may be exactly what your child needs. Our MakersSpace is a one-of-a-kind learning environment to inspire students to combine hands-on training and cutting-edge technology that allows your students an exceptional opportunity for brain development outside of the standard classroom environment.

To attend, you must apply and be accepted to the MakerSpace Institute program.

Applications should include a project proposal that introduces themselves and explains their area of interest. Applications can be submitted to Lynn Galvin in the high school office or emailed to lgalvin@montgomerycatholic.org

The application deadline is May 27.

Interviews will be held the following week.

Acceptance into the program will be announced no later than **Friday, June 4.**

Suggested areas of interest include:

- Art based on the laser cutter and 3D printing
- Building an amateur radio station, and getting an amateur radio license
- Basic electronics (requires strong algebra skills)
- Microcontroller and Mechanoelectronics
- Aviation using Radio Control and Flight Simulator

* Masks will be required for any camp that is indoors.

*Camp will start and end at designated times.
Participants **MUST** be picked up within 15 minutes of dismissal.
All fees are non-refundable.*



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~~Junior Engineers Camp (2 age groups)~~

~~For rising 2nd—5th graders and rising 6th—9th graders (limit of 10 students)~~

~~June 8—10 from 1:00—4:00PM~~

~~Cost: \$75~~

~~This experience focuses on exploration and discovery in all that our MakerSpace has to offer in Engineering and Technology. Students will have access to a wide variety of tools and techniques including laser cutting, 3D printing, amateur radio operation, and flight simulation.~~

~~(Please be aware that the laser cutter will only be used by trained adults)~~

~~Laser Cut Creations Camp (2 age groups)~~

~~For rising 2nd—5th graders and rising 6th—9th graders (limit of 10 students)~~

~~July 6—8 from 8:30—11:30AM~~

~~Cost: \$75~~

~~Students will explore a variety of artistic mediums and techniques, primarily implementing laser cutting technology. The inclusion of the laser cutter allows for the use of precut design elements that will be available to students as they construct in both 2D and 3D.~~

~~(Please be aware that the laser cutter will only be used by trained adults)~~

Robotics Camp

For rising 7th – 12th graders (limit of 10 students)

July 6 – 8 from 1:00 – 4:00PM

Cost: \$75

VEX robotics is a hands-on robotics program for elementary through university students. This camp will focus on building a VEX Robotics Competition V5 Clawbot with specific guided instructions, learning to drive the V5 Clawbot and an introduction to basic programming commands used by the V5 Clawbot.

* Masks will be required for any camp that is indoors.

*Camp will start and end at designated times.
Participants MUST be picked up within 15 minutes of dismissal.
All fees are non-refundable.*



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Registration Form

Please complete both sides of the registration form and one form per participant.

Participant's Name:	
Grade for 2021-22:	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female Campus <input type="checkbox"/> St. Bede <input type="checkbox"/> Holy Spirit <input type="checkbox"/> MS or HS
Parent/Guardian Name:	
Parent/Guardian Cell:	
Home Address:	
Email:	@montgomerycatholic.org
T-Shirt Size:	Youth <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large
	Adult <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large

Select your camps

<input type="checkbox"/>	Summer MakerSpace Institute	June 14 – July 1, July 12 – 29	\$200
<input type="checkbox"/>	Junior Engineers (2nd–5th grade)	June 8–10	\$75
<input type="checkbox"/>	Junior Engineers (6th–9th grade)	June 8–10	\$75
<input type="checkbox"/>	Laser Cut Creations (2nd–5th grade)	July 6–8	\$75
<input type="checkbox"/>	Laser Cut Creations (6th–9th grade)	July 6–8	\$75
<input type="checkbox"/>	Robotics	July 6 – 8	\$75

TOTAL

Student Agreement / Code of Conduct

While participating in this summer camp, I will accept responsibility for maintaining good conduct. I will listen attentively, follow directions and be respectful to everyone. I understand and accept that all school and camp rules and disciplinary actions apply to this camp. My parent(s)/ guardian(s) and I have discussed this code of conduct for these summer camps.

Participant's Signature:

Date: _____

Deadline to register for all camps: **Thursday, May 27.**

Attach a check for the total amount of camp fees payable to MCPS. If you are paying for multiple participants, please list the children's names on the check.

Pay online at MySchoolBucks and attach a copy of the receipt.



Montgomery Catholic Preparatory School 2021 Summer MakerSpace & Robotics Camps

Summer MakerSpace Institute Application

(Please complete the Application and the Registration Form)

Applicant's Name: _____

Tell us a little about yourself:

Project Proposal:

Deadline to register for all camps: **Thursday, May 27.**

Attach a check for the total amount of camp fees payable to MCPS. If you are paying for multiple participants, please list the children's names on the check.

Pay online at MySchoolBucks and attach a copy of the receipt.



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Liability Waiver

I agree on behalf of myself, my child named herein, or ours heirs, successors, and assigns, to hold harmless and defend Montgomery Catholic Preparatory School, its officers, directors, employees and agents, and the Archdiocese of Mobile, its employees and agents, and chaperones, or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the parish/school/institution, its officers, directors and agents and the Archdiocese of Mobile, its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses that may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the parish/school/institution/archdiocese.

Parent/Guardian Signature: _____ Date: _____
(Required)

Medical Information

In the event of an emergency, if you are unable to reach me at the number listed, contact:

Emergency contact name (*please print*): _____ Relationship to participant: _____

Phone: _____

YES___ NO___ **Emergency Medical Treatment:** In the event of an emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be notified prior to any further treatment by the hospital or doctor.

YES___ NO___ **Other Medical Treatment:** In the event it comes to the attention of the parish/school/institution, its officers, directors and agents, and the Archdiocese of Mobile, chaperones, or representatives associated with the activity that my child becomes ill with symptoms such as headache, vomiting, sore throat, fever, diarrhea, I want to be called.

YES___ NO___ **Medication:** Medication of any type, whether prescription or non-prescription, may be administered to my child unless the situation is life-threatening and the emergency treatment is rendered.

YES___ NO___ I hereby grant permission for non-prescription medication (*such as non-aspirin products, acetaminophen or ibuprofen, throat lozenges, cough syrup*) to be given to my child, if deemed appropriate.

Specific Medical Information The school will take reasonable care to see that the following information will be held in confidence:

Medications: My child is taking medication at present. My child will bring all such medications necessary, and such medications will be well-labeled. Names of medications and contain directions for seeing that child take such medications, including dosage and frequency of dosage, are as follows: _____

Allergic reactions (*medications, foods, plants, insects, etc.*): _____

Does this child have any physical or other limitations? _____

Additional special medical conditions of my child: _____

I hereby warrant that to the best of my knowledge, my child is in good health, and I assume responsibility for the health of my child.

Parent/Guardian Signature: _____ Date: _____
(Required)



Montgomery Catholic Preparatory School 2021 Summer MakerSpace & Robotics Camps

ARCHDIOCESE OF MOBILE PARENTAL/GUARDIAN COVID-19 CONSENT FORM AND LIABILITY WAIVER

Participant's name: _____

Birth date: _____ Sex: _____

Parent/Guardian's name: _____

Home address: _____

Home phone : _____ Business phone: _____

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and as a result, social distancing is recommended. **Montgomery Catholic Preparatory School** will follow state and local standards of conduct and has put in place reasonable preventative measures to reduce the spread of COVID-19 at its **Montgomery Catholic Preparatory School** activity (including but not limited to summer camp). However, even though such standards will be followed and reasonable measures put into place, **Montgomery Catholic Preparatory School** cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the **Montgomery Catholic Preparatory School** activity could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and that my child(ren) and I may be exposed to or infected by COVID-19 by participating in the **Montgomery Catholic Preparatory School** activity and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at **Montgomery Catholic Preparatory School** may result from the actions, omissions, or negligence of myself and others, including, but not limited to, **Montgomery Catholic Preparatory School** employees, volunteers, and program participants and their families.

Considering the foregoing, however, I, _____, grant permission for my child, _____, to participate in this ~~camp~~ activity that may require transportation to a location away from the parish site, notwithstanding the risks associated with the COVID-19 virus and group activities.

I confirm that there are no necessary changes to the Medical Information Consent form for my child that I previously submitted. If there are any necessary changes, I will complete another Medical Information Consent form.

I further agree on behalf of myself, my child named herein, and my spouse, our heirs, successors, and assigns, to release, indemnify, and hold harmless **Montgomery Catholic Preparatory School** and The Roman Catholic Church of the Archdiocese of Mobile, their members, directors, officers, employees, agents and representatives ("Indemnitees") associated with the event arising from or in connection with the negligent acts or omissions of the Indemnitees ONLY in regard to prevention of the spread of the COVID-19 virus. I SPECIFICALLY ACKNOWLEDGE AND AGREE TO THE FOREGOING.

Signature: _____ Date: _____