



Parkway West Career & Technology Center

Summer Career Camp Registration Form (Camp Dates – Wednesday, June 27th & Thursday, June 28th)

Please return the completed form with attention to Natasha Johnston through one of the following methods:

Mail: 7101 Steubenville Pike, Oakdale, PA 15071 **Email:** Johnston@parkwaywest.org **Fax:** 412-787-7257

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School _____ Entering Grade ____/____/____ Date of Birth

First Name _____ Last Name _____ Male Female
Gender (Check One)

Street Address _____ City _____ Zip

Parent/Guardian Email Address: _____

Father's Name: _____ Phone: _____

Mother's Name: _____ Phone: _____

Please list two emergency contacts in case parent(s)/guardians(s) are unavailable:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Please list any food or environmental allergies we should be aware of: _____

Does he/she require any daily medications we may need to administer: _____

Please indicate two (2) programs you would like to experience. Please note: *Programs with low enrollment may be cancelled.*

- | | |
|---|--|
| <input type="checkbox"/> Auto Body Repair (Use metal to construct a mail box) | <input type="checkbox"/> Health Assistant (Take vital Signs, Blood Pressure, and Care for a Patient) |
| <input type="checkbox"/> Automotive Technology (Learn how to change a tire; oil and filter change) | <input type="checkbox"/> Heating, Ventilation, Air-Conditioning/Refrigeration (Learn about brazing and copper tubing) |
| <input type="checkbox"/> Building Construction Technology (Use Hand Tools to Construct a Tool Box) | <input type="checkbox"/> Sports Medicine & Rehabilitation Therapy Technology (Learn about sports injury aid) |
| <input type="checkbox"/> Cosmetology (Hand Massage & Paraffin Wax Treatment; May also learn Braiding techniques) | <input type="checkbox"/> Veterinary Technology (Learn how to take vital signs and care for an animal) |
| <input type="checkbox"/> Culinary Arts (Prepare an Entrée & Decorate Baked Goods; Eat what you Make!) | <input type="checkbox"/> Welding Technology (Cut & Weld Steel into your initials) |
| <input type="checkbox"/> Electrical Systems Technology (Build a robot that can turn on with a light switch) | |

As parent/guardian of _____, I agree that this student has my consent to enroll in PWCTC'S two day Summer Career Camp. I understand that PWCTC's Career Camp may require my child to perform physical work, have contact with or use electricity, chemicals, and/or hazardous equipment. My child has my consent to participate in all aspects of the Summer Camp experience. I understand that in the event of an emergency, I will be notified, however, my son/daughter will be transported to the nearest hospital by ambulance without my authorization. I understand that my child must adhere to the dress code requirements for the programs in which they participate. I understand my child may be photographed during the Summer Career Camp for PR purposes. If I do not wish to grant the school permission to take photos or video of my son/daughter, I will notify PWCTC in writing, no later than Friday, June 22, 2018.

By signing below, you hereby agree to the terms and conditions stated on this form. If not signed, this form will not be accepted.

Parent/Guardian Signature _____ Date



Parkway West Career and Technology Center



Information Packet

Wednesday, June 27th & Thursday, June 28th

8:00 AM - 3:00 PM

Summer Career Camp Programs

Auto Body Repair

(Use metal to construct a mail box)

Automotive Technology

Learn how to change a tire; oil and filter change

Building Construction Technology

(Use Hand Tools to Construct a Tool Box)

Cosmetology

(Hand Massage and Paraffin Wax Treatment; May also learn Braiding Techniques)

Culinary Arts

(Prepare an Entrée & Decorate Baked Goods; Eat what you make!)

Electrical Systems Technology

(Create a robot using electrical wiring)

Health Assistant

(Take Vital Signs, Blood pressure and Care for a patient)

Heating, Ventilation, Air-Conditioning/Refrigeration (HVAC/R)

(Learn heating and cooling techniques)

Sports Medicine & Rehabilitation Therapy Technology

(Learn about sports medicine and physical therapy procedures)

Veterinary Technology

(Learn how to take the vital signs and care for an animal)

Welding Technology

(Cut and weld steel into your initials)



Parkway West Career and Technology Center

Guidelines/FAQ's

| | |
|---------------------------------------|--|
| When? | Wednesday, June 27 th & Thursday, June 28 th |
| What time? | 8:00 AM to 3:00 PM |
| What is the daily schedule? | AM Session 8:00 AM - 11:15 AM Lunch: 11:15 AM - 11:45 AM PM Session 11:45 AM to 3:00 PM |
| Is transportation provided? | No, transportation will be the responsibility of the parent/guardian of the enrolled student |
| Is lunch provided? | Yes, lunch is provided for all students, although students are permitted to bring their own lunch. Additionally, there will be vending machines available. <ul style="list-style-type: none">• Please note any food or environmental allergies on your child's application |
| How can a student be Eligible? | Students that have completed the 6 th , 7 th or 8 th grade from any of our sending schools are welcome to attend. |
| What is the dress code? | All programs require different dress codes. Please refer to the "Dress Code Requirements" sheet. <ul style="list-style-type: none">• It is essential for all students who attend the camp to wear the appropriate attire; otherwise they will not be able to perform certain tasks. |
| What programs will be offered? | Please refer to the "Summer Career Camp Programs" <i>(Programs are subject to availability)</i> |
| How many programs can a student take? | Students need to choose two (2) programs. They will attend one in the morning, and one in the afternoon. (Programs with low enrollment may be cancelled) |
| How many students will be in a class? | There will be a 10:1 Student to Teacher ratio. Program availability is on a "first come-first serve" basis. (Additional instructors may be added for demanding programs and programs with low enrollment may be cancelled) |
| Who should I contact child? | The student's current guidance counselor will have all the required information, or you may contact PWCTC directly by calling Mrs. Natasha Johnston at 412-923-1772 x 139. Or you can email any questions to Johnston@parkwaywest.org |



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Dress Code Requirements

| <i>Program:</i> | <i>Required Attire:</i> | <i>Not Permitted:</i> |
|---|---|--|
| Auto Body Repair | <ul style="list-style-type: none"> - Work Pants or Jeans - T-shirt - Work Boots/Closed Toe Shoes - <i>Wear old clothes, you will get dirty.</i> - <i>Safety Materials will be provided</i> | <ul style="list-style-type: none"> - Tank tops/shirts with cut-off sleeves - Shorts - Flip Flops/Open toed shoes |
| Automotive Technology | <ul style="list-style-type: none"> - Work pants or Jeans - Work style shirt or T-shirt - Steel toed boots or shoes with hard soles - <i>Wear old clothes, you will get dirty</i> - <i>Safety Materials will be provided</i> | <ul style="list-style-type: none"> - Tank tops/shirts with cut-off sleeves - Shorts - Flip Flops/Open toed shoes |
| Building Construction & HVAC/R | <ul style="list-style-type: none"> - Work pants/Jeans - Work style shirt/T-shirt - Work boots/closed toes shoes - <i>Safety Materials will be provided</i> | <ul style="list-style-type: none"> - Tank tops/shirts - Shorts - Flip-flops/open toed shoes |
| Cosmetology & Vet Tech & Public Safety | <ul style="list-style-type: none"> - Follow your schools dress code - Closed toed athletic style shoes with socks are required | <ul style="list-style-type: none"> - <i>Tank tops</i> - <i>Open toed shoes</i> |
| Culinary Arts | <ul style="list-style-type: none"> - T-shirt - Long pants - Closed toed athletic style shoes with socks - If you have longer hair, bring a hair tie to pull your hair back - *Aprons will be provided | <ul style="list-style-type: none"> - Tank tops or shirts with cut off sleeves - Shorts - Open toed shoes/flip flops |
| Electrical Systems Technology | <ul style="list-style-type: none"> - Work pants or jeans - Work boots/closed toed shoes | <ul style="list-style-type: none"> - Tank tops/shirts with cut-off sleeves - Shorts - Open toed shoes |
| Health Assistant | <ul style="list-style-type: none"> - Tank tops/shirts - Shorts - Flip-flops/open toed shoes | |
| Welding Technology | <ul style="list-style-type: none"> - Work pants/Jeans - Work style shirt/T-shirt - Work boots/closed toes shoes - <i>Safety Materials will be provided</i> | <ul style="list-style-type: none"> - Tank tops/shirts - Shorts - Flip-flops/open toed shoes |
| Sports Medicine & ITE & Digital Multimedia | <ul style="list-style-type: none"> - Follow your schools dress code - Closed toed athletic style shoes with socks are recommended | |



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2018 Summer Career Camp

Parental Consent/Emergency Information Form

Please read and initial to acknowledge you agree with the following statements:

As parent or guardian of _____, I agree that:
(Student's Full Name)

Initial

- This student has my consent to enroll in PWCTCs Two-Day Career Summer Camp _____
- I understand that PWCTCs Career Summer Camp may require my child to perform physical work, have contact with or use electricity, chemicals, hazardous equipment, and animals. My child has my consent to participate in all aspects of the Summer Camp experience. _____
- I understand that in the event of an emergency, I will be notified, however, my son/daughter will be transported to the nearest hospital by ambulance without my authorization. _____
- I understand my child must adhere to the dress code requirements for the program(s) they enroll in to participate in the scheduled activities. _____
- I understand my child may be photographed during the Career Summer Camp for press releases and PR purposes. If I do not wish to grant the school permission to take photos or video of my son/daughter, I will notify PWCTC in writing, no later than **Friday, June 12, 2018**. _____
- I understand that my child may be interacting with animals at camp which could result in an animal bite. _____

I hereby give my child consent to the above terms and understand that it is my responsibility to provide the proper attire for my child, in addition to transportation or necessary treatment whether covered by my insurance or not.

Date Student's Name Student's Home School Entering Grade

Parent(s)/Guardian(s) Name Cell Phone Student's Date of Birth

Student's Home Address City Zip Code

Does Student Live with both parents? Yes No If no, student lives with: Mother Father

Father's Employer: _____ Work Phone: () _____

Mother's Employer: _____ Work Phone: () _____

Please list any allergies we should be aware of (food and environmental): _____

Last Tetanus Booster: _____ Preferred Hospital, in case of emergency: _____

Emergency Contacts if parent(s)/guardians are unavailable:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

By signing below, you agree to all terms and conditions stated on this form. If not signed, this form will not be accepted.

Parent/Guardian Signature Date