



Welcome to Rancho Christian School's **STEMQuest Summer Camp**. STEMQuest is an exciting, hands-on adventure where curiosity leads the way! Designed for students in grades K–7, this dynamic camp invites children to explore science, technology, engineering, and math through creative projects, interactive experiments, and real-world problem solving.

Throughout the summer, campers will embark on themed challenges that encourage critical thinking, teamwork, and innovation. From building and testing inventions to conducting fun science experiments and tackling engineering quests, students will learn by doing in an engaging and supportive environment. We believe learning should be joyful and meaningful. Our camp fosters creativity, confidence, and perseverance while helping students discover how their unique gifts can be used to explore and care for God's world.

Nate Porter

Vice Principal/Director

Nate.porter@ranchochristian.org

(951) 303-1408 ext. 6208

Summer Camp 2026

Fees and Tuition Rates		
Registration Fee <i>Deadline May 31st</i>	\$40 for enrolled RCS students (26-27 school year) \$60 per child (non-RCS students)	
Late Registration Fee <i>Starts June 1st</i>	\$40 per child for enrolled RCS students (26-27 school year) \$80 per child (non-RCS students)	This fee also applies to "drop-ins." Students must have paid the one-time registration fee.
Camp Tuition Rates	Camp from 7 AM-5 PM is \$7.00 per hour or \$350 a week. If selecting individual days the rate is \$8.50 per hour or \$85 per day.	Camp from 9 AM-3 PM is \$12.50 per hour or \$75 per day. A weekly rate is not offered for this time frame.
	Tuition is due the Thursday of the prior week by 6 PM.	
On Campus Events	The cost for all on-campus events ranges between \$10–\$20 per event . Pricing is based on the experience being offered and will be reflected in the daily rate when registering online.	
Drop-In Fee <i>(The Registration Fee must be paid prior to enrollment)</i>	Drop-ins are only permitted if space allows. A \$20 drop in fee is added to the daily tuition rate of each day selected.	Call for availability: 951-303-1408 Ext. 6208 or 1209

Camp Dates	Tuition Due Dates	Weekly Theme
Week 1 June 8 - 12	June 4	Tinker Lab
Week 2 June 15 - 19	June 11	Experiment Station
Week 3 June 22 - 26	June 18	EPIC Experiments
Week 4 June 29 - July 3	June 25	NEXTGEN
Week 5 July 6 - 10	July 2	Discovery Lab
Week 6 July 13 - 17	July 9	Explorers
Week 7 July 20 - 24	July 16	Mission Discovery
Week 8 July 27 - 31	July 23	Science Safari

RANCHO CHRISTIAN SUMMER CAMP POLICIES AND PROCEDURES

Welcome to Rancho Christian School's 2026 Summer Camp! We are excited you are joining us this Summer! R.C.S. Summer Camp is designed to provide a safe, fun, nurturing, Christ-centered environment with opportunities for educational enrichment and organized play.

Please Initial next to each section:

BULLY FREE ZONE

Your child's well-being is very important to the Enrichment staff. There is zero tolerance for bullying at R.C.S. Children who are caught bullying other campers may be asked to not return to R.C.S. Summer Camp.

TUITION PAYMENT POLICY

Tuition payments are due **prior to the actual** week of attendance. Please see the tuition due date schedule. **Children will not be admitted without payment.** All payments are to be made online at Ranchochristian.org/enrichment.

REGISTRATION FEE

A non-refundable registration fee is required each year. This includes "drop-ins". A registration form must be on file for all students.

LATE / DROP IN FEE

A \$2.00 late fee will be charged for each minute after 5:00 PM (a minimum charge of \$20.00 per day/per child). **Late fees must be paid at time of pick up.** A \$20.00 drop in fee is added to the daily tuition rate of each day selected ***if tuition fees are not paid by Thursday at 6 PM of the week prior.*** Drop-ins are only permitted if space allows.

HOURS OF OPERATION

R.C.S. Summer Camp is open Monday-Friday starting at 7:00 AM - 5:00 PM. Camp begins June 8, 2026 through July 31, 2026.

REFUNDS

Staff are scheduled according to the number of students registered; therefore, there are ***no refunds*** due to absences.

SCHEDULE CHANGE POLICY-*IMPORTANT*

If you find that you need to make a change to your child's original weekly schedule, you **MUST** email Nate Porter, Vice Principal/Director of Summer Camp at Nate.porter@ranchochristian.org two weeks prior to attendance. While there are no refunds, schedule changes may be considered and granted at the discretion of administration. All changes must be emailed and acknowledged by Nate Porter.

SICKNESS

Children who have a fever, green runny nose, severe cough or are vomiting, will not be permitted to attend camp. Children with the listed symptoms will not be permitted to camp for 24 hours.

SIGN-IN/SIGN-OUT

All students must be checked in and out of Summer Camp by an adult (18+). If someone other than yourself will be picking up your child, they must be on the emergency pick up list and have identification. To make last-minute pick-up arrangements for someone not on your child's emergency sheet, email Nate Porter. Verbal confirmations are not permitted.

ROTATIONS

A variety of age appropriate curriculum will be taught by our qualified staff and will include educational and creative opportunities.

ELECTRONIC POLICY

K - 7th grade students are allowed to use electronic devices such as: iPads and cell phones only during approved times that Summer Camp Staff sets forth. Rancho Christian School and Staff are not liable for any damage, lost or stolen electronic devices that a student may bring. Parents and students that knowingly bring such devices are doing so at their own risk. In addition, all games must be school appropriate. Students not playing school appropriate games may be asked not to bring their devices to camp.

On-Camp Entertainment

On campus entertainment will range in cost from \$10-\$20.00 (for the daily rate registrations only). All field trip fees are added to the appropriate camp days.

MEDICATION

In order to administer medication, parents must fill out and sign a medication form and bring all medications in **original packaging**, clearly labeled to the school office.

DRESS CODE

Students must wear appropriate summer attire; shorts under dresses or skirts are required; tank tops for boys are permitted; Girls may wear spaghetti straps, but please dress modestly. Some days require swimwear.

SNACK/LUNCH

Snacks will be provided twice daily, please pack your child a lunch each day of attendance. A lunch may be purchased at the snack shack. Parents are able to purchase a preloaded snack card at the sign in cart. Refunds are not given for cards with a balance.

SUMMER CAMP FAMILY INFORMATION FORM

Student Last Name:	First Name:	
DOB:	Entering Grade:	
Home Address:	City:	Zip Code:
Mother's Name:	Father's Name:	
Cell #:	Cell #:	
Work Phone #:	Work Phone #:	
Email:	Email:	

Emergency Contacts

Please give name, relationship and phone number of persons other than parents to have your child picked up if he/she becomes ill at Summer Camp and parents cannot be reached. **Students will only be released to those persons listed below. Please notify the Staff whenever this information changes.**

#	Name	Relationship	Phone #
1			
2			
3			
4			

Medical Information: Please place a check in the box(es) that apply to your child.

NO KNOWN HEALTH PROBLEMS

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Allergy-Pollen/Dust/Hay fever
<input type="checkbox"/> Allergy-Food (List)
<input type="checkbox"/> Allergy-Medication (List)
<input type="checkbox"/> Asthma- (no medication needed)
<input type="checkbox"/> Asthma- (medication needed) | <input type="checkbox"/> Blood Disorder
<input type="checkbox"/> Cancer/Leukemia
<input type="checkbox"/> Cerebral Palsy
<input type="checkbox"/> Color Blindness
<input type="checkbox"/> Diabetic | <input type="checkbox"/> Hearing Aid Used
<input type="checkbox"/> Hemophilia
<input type="checkbox"/> ADD/ADHD
<input type="checkbox"/> Epilepsy/Seizures
<input type="checkbox"/> Hearing Loss (which ear _____) | <input type="checkbox"/> Speech Problem
<input type="checkbox"/> Glasses/Contacts
<input type="checkbox"/> Allergy-Bee Sting
<input type="checkbox"/> Others (list below) |
|---|---|--|--|

Are there any physical conditions, which need special consideration in the event of an emergency?

IMPORTANT: ALL MEDICATIONS DISPENSED AT SCHOOL MUST BE IN ITS ORIGINAL CONTAINER.

RCS staff does not dispense any type of medication (prescription & non-prescription) to students unless brought in by the parent, in its original container, and a consent form is signed.

PRESCRIPTION & NONPRESCRIPTION MEDICATIONS ARE TO BE DISPENSED BY RCS STAFF ONLY.

Medical Insurance Carrier:

Policy:

Dear Parent/Guardian: Your signature below authorizes RCS to render the necessary emergency treatment for serious injury or accident (at your expense) if neither parent/guardian can be reached. In the event of an emergency, your child will be taken to the nearest hospital or emergency room.

Signature of Parent/Guardian

Date

PARENT OR GUARDIAN RELEASE

The undersigned Parent/Guardian (hereinafter, "I") understands that the students will be supervised while participating during scheduled times. Summer Camp will have live-scanned adults in the presence of the children.

I, hereby, agree to release RCC & RCS and its agents, employees, volunteers, or members harmless from all actions, claims, liability, and expenses, whether known or unknown, present or future relating to or arising from or connected in any manner with the students participating during Summer Camp herein. I read, understand and agree to the Policy and Procedures set forth by Rancho Christian School Summer Camp.

This form must be signed and turned in along with all Summer Camp Forms no later than the first day of attendance. No child will be permitted to be dropped off unless this form has been signed and turned into RCS.

Last Name (child)

Middle

First Name (child)

Signature of Parent/Guardian

Date

MEDIA RELEASE:

Rancho Christian School highlights positive news, events and programs in publications such as newsletters, on our website, on social media, with press releases and occasionally in video productions. Our Media/Photo release form allows you to withhold consent for the release of your child's photo or likeness in publications or productions such as those listed. This includes: Newsletters Video productions Websites Social Media Press releases The Media release form DOES NOT govern publication of a student's name or photo: a) in site specific publications, such as a Yearbook (video or print), School Activity Program or School Athletic Program or b) by the news media. The news media is protected by California Civil Code Section 3344 (subsection d), which states that "use of a photograph or likeness in connection with any news, public affairs or sports broadcast ...shall not constitute a use for which consent is required." Therefore, if you do not want your child talking to a member of the press, we suggest you instruct him/her not to comment if approached by a media representative.

2026-2027 MEDIA RELEASE: Please check a box below

☐ I GIVE PERMISSION for my child's photograph or image to be used by Rancho Christian School and/or those acting under its permission and on its authority.

☐ I DO NOT GIVE PERMISSION for my child's photograph or image to be used by Rancho Christian School and/or those acting under its permission and on its authority. Student's Name: (Print Clearly)

Last Name (child)

Middle

First Name (child)

Signature of Parent/Guardian

Date



ENRICHMENT RANCHO

Summer Camp 2026 On Campus Permission Slip & Release of Liability

I, _____ (PRINTED NAME OF PARENT/GUARDIAN), being the parent or legal guardian of _____ (PRINTED NAME OF MINOR), have been informed of the above activity sponsored by RCS Enrichment and hereby give my consent for my minor child to participate in this activity.

I understand that all reasonable safety precautions will be taken by the leaders of this activity and that the possibility of an unforeseen hazard does exist. I further agree not to hold RCS, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the minor listed on this form.

Please initial all of the highlighted lines below.

☐ The Learning Project
On Campus (June 11)

☐ The Learning Project
On Campus (June 18)

☐ Water Slide
On Campus (July 2)

☐ Water Slide
On Campus (July 8)

☐ The Learning Project
On Campus (July 9)

☐ Water Slide
On Campus (July 17)

☐ Science Guys
On Campus (July 16)

☐ The Learning Project
On Campus (July 23)

☐ Water Slide
On Campus (July 30)

Home: _____ Cell: _____ Work: _____

Parent Signature: _____ Date: _____

CONSENT TO TREAT A MINOR

Being the parent or legal guardian of _____ (MINORS PRINTED NAME), I _____ (PARENT/GUARDIAN'S PRINTED NAME) do consent to any x-ray, anesthetic, medical, surgical, or dental diagnosis or treatment that may be deemed necessary for my minor child. Further, I understand that all efforts will be made to contact me prior to treatment. In the event I cannot be reached in an emergency, I give permission to the activity leader to make the decisions necessary for treatment. Should there be no activity leader available, I give permission to the attending physician to treat my minor child. I further understand that the doctors, dentists, and other providers attending to my child will take all reasonable safety precautions during their case.

Further, as parent or legal guardian, I am responsible for the health care decisions of my minor child and agree that my insurance plan is the primary plan to pay for the dental, medical, or hospital care or treatment that is given to my child. Any policy of RCS sponsoring this event will be used as the secondary coverage.

Insurance Provider: _____ Policy #: _____

Parent Signature: _____ Date: _____