



Camp Dates: May 26th – July 24th

Camp Kroc 2026: “Kingdom Quest”, is for children ages 5-15 and will meet from 7:30 AM – 5:00 PM for 9 weeks. Campers will participate in exciting field trips, daily devotionals, challenging classes (Sports, Arts & Crafts, Dance, Music, Theater/Production) and discipleship from our amazing staff!

Breakfast, lunch, and a snack will be provided daily. Please send food items if your child has unique dietary needs, allergies or restrictions.

NO CAMP ON: 6/19 (Juneteenth Holiday)

OVERNIGHT CAMP 1: 6/29-7/4: Ages 7-12 and 13 - 15: Space is limited!

(No camp at Atlanta Kroc!)

Open House Opportunities: Wednesday, March 18 & April 15, 2026: 5:30PM – 6:30PM



By completing an additonal (online) application that can be found at the Adminicamp.com site, your child (ages 7-15 only) could experience one full week of overnight/sleep away camp at Camp Grandview in Jasper, GA. This experience will include outdoor activities, swimming, campfires, and lodging in a cabin with other children from Salvation Army Centers throughout Georgia. At an additional cost of only \$25 per camper!



For more information: Please email Era.Stewart@uss.salvationarmy.org



GET READY TO EXPLORE THIS SUMMER!

We're so excited to spend the summer with your child as we take part in an epic journey to learn about God's good news and important characteristics and elements of His Kingdom! Please read through this packet and keep the first five (5) pages as a reference throughout the summer.

Atlanta Kroc Summer Day Camp is committed to creating a safe, welcoming, and inclusive environment for every camper. We prioritize the mental, emotional, and social wellbeing of all children, recognizing that each camper deserves to feel valued, supported, and respected. Our staff works intentionally to foster positive relationships, encourage healthy self-expression, and promote a sense of belonging so every child can thrive, grow, and fully participate in the camp experience. Your voice matters; your story matters. You belong here!

Policies and Procedures:

Age Policy: Kroc Center Summer Day Camps are for children who are 5-15 years old at the time of camp.

Drop off and Pick up Procedures: Drop-off and pick-up will occur at the gym reception desk. Campers must be signed in and out by a designated adult in the presence of a designated staff member. We are requiring that we have a copy of the identification of your "designated adults" who are listed on this application. Campers will only be released to adults who are listed as "authorized to pick-up" and adults MUST present their ID upon pick-up.

Camp hours: Day camps will be held from Monday through Friday 7:30am – 6:00pm. A \$1 per minute, per child charge will be added for each minute after 6:05 pm. All fees must be paid before returning to the camp.

Camp Schedule: Camp will be offered Monday – Friday each week, excluding holidays, for the dates listed below. We are offering 9 weeks of camp, one of which is an away camp.

- **Weeks 1 – 5: May 26th – June 26th** (We are closed Friday, June 19th for the Juneteenth holiday)
- **Week 6: June 29th – July 4th** (Away Camp at Camp Grandview: Ages 7-15)
 - There is an additional cost to register for Camp Grandview: \$25 per camper
 - You must register your child using a separate application that can be found at Adminicamp.com in order for your child to participate in an away camp that is hosted at Camp Grandview.
 - Space is limited, so register as soon as the registration session has opened.
 - The Registration Period will be provided as soon as possible.
- **Weeks 7 – 9: July 6th – July 24th**

Kroc Kingdom Crews:

Camp "Kingdom Quest" will be split into 5 different age groups/tribes, providing them with opportunities to gain knowledge and grow in teamwork, competition, dance, theatre/production, or music. The 7 Kingdom Crews are as follows: ages 5-6: Silver Hawks, ages 7-8: Air & 7-8: Water (A & B), ages 9-10: Earth & 9 – 10 Fire (A & B), ages 11-12: Metal & ages 13-15: Warriors.



Fees, Transfers, & Refunds:

Camp fees are nonrefundable. No pro-rated fees will be given for partial attendance to include illness and behavioral issues. All fees (Deposit: \$50 per child + Camp Registration Fee: See details below) **must be paid in full by May 01, 2026.** The Total Price includes Summer Camp Tuition, Deposit, and Field trips.

Atlanta Kroc Camp 2026 Fee Information: Ages 5 – 12 (Cost includes the \$50 Deposit per child & Registration Fee per child.

- 1 Child: \$200 Total
 - 2 Children: \$375 Total
 - 3 Children: \$550 Total
 - 4 Children: \$700 Total
 - 5 Children: \$800 Total
 - 6 Children: \$855 Total (\$5.00 Tuition plus \$50 Deposit)
- (Any Additional Children within this age range costs are \$5.00 Tuition plus \$50 Deposit each)**

Atlanta Kroc Teen Camp 2026 Fee Information: Ages 13 – 15

- **Cost: \$75/Ages 13-15 yrs. old - per camper plus \$50 deposit per camper**
 - 1 Child: \$125 Total (within this age range)
 - 2 Children: \$250 Total (within this age range)
 - Etc. (Add \$75 per child and the \$50 deposit to the total for each additional child within this age range)

Enrollment Forms:

Camp Waivers: A waiver form must be on file prior to a camper's first day of camp. Campers cannot participate in camp activities without having this document on file.

Medical Release Form: A medical release form must be filled out for each camper before the camper's first day of camp. To ensure that we properly care for any allergies or medical concerns, please include all medical information on the waiver including prescription and non-prescription medications. If your child must carry medication at our Overnight camp, a Medication Form must be completed. Kroc Atlanta discourages campers from bringing medication to Day Camp. Please notify Era Stewart, Program Manager, if this is a requirement.

For Overnight Camp, **medication(s) must be in its original container with the child's name printed on the label and placed in a plastic bag.**

If your child has any special medical needs, please include this information on the waiver form. This includes all medical or behavioral diagnoses that may affect your child's experience at camp. Even if your child does not take



medication for the condition, knowledge of the condition helps our counselors to provide the best possible care for your child within our ability to provide reasonable accommodations. If you have a copy of your child's documentation from school or a medical professional (IEP, 504, etc.), please include a copy with their completed application and waivers.

Attire:

It is recommended that campers come ready to play! They will enjoy activities the most if they wear socks, as well as shoes that enclose your child's entire foot, and that have rubber-soles (Example: sneakers). We do not recommend wearing skirts and dresses. No clothing with inappropriate graphics or words. Sandals and flip-flops are **not allowed** for everyday camp wear. – **Closed toe shoes are required. Campers may be required to wear attire that can get dirty due to an art project or may be required to bring a swimsuit for a field trip. Advanced notice will be provided.**

Lost Items:

Lost items are kept for 4 weeks and then they are then donated to The Salvation Army Clothing Closet. We recommend labeling your child's clothing to assist them in not losing these articles. Lost items will be placed in the blue bin that is located in the Fitness Center across from the Membership Administration booth.

What not to bring to camp:

Some items are not welcome at Atlanta Kroc camps for the children's safety and encourage interactions amongst campers. These items include electronics, expensive jewelry, shoes with wheels in the soles, drugs, or alcohol, weapons (real or pretend), graphic pictures or literature, make-up, and toys. If our camp counselors see these items, they will be taken from the camper and given to the care giver(s) at sign-out. **(PLEASE NO CELL PHONES WHILE CAMP IS IN SESSION)** As a courtesy to families that require that their child has access to a cell phone upon dismissal, cell phones will be collected at sign-in daily, and stored in a locked location during camp hours, and given back to the owner, at sign-out each day.

Illness Policies:

Camp is not designed to handle ill children. If your camper becomes ill while at camp, our staff will contact you to pick them up. Staff will treat minor injuries requiring the application of a bandage or ice. If further medical attention is required or if we are unsure of the severity of the injury, care givers will be notified immediately. *9-1-1 will be called at the discretion of the camp staff. If we cannot reach the care givers and a child needs immediate medical attention, she/he will be transported to the hospital in an ambulance, and we will continue trying to contact the adults listed on the Camp Waiver Form. All expenses for emergency medical care are the responsibility of the child's legal guardian(s).*

Inclusion Support & Behavior Expectations:

The Atlanta Kroc Camp strives to offer every child, regardless of ability, the opportunity to participate in arts, recreational, and educational activities that are both fun and allow him or her to learn new skills, foster relationships and build self-confidence. We do not have a dedicated or specialized, Inclusion Support Team, so our camp and counselors do not currently have the capacity to provide specialized care for children who require 1:1 accommodation. We ask all caregivers to take this into consideration prior to enrolling your child into our summer program. We take bullying or any kind very seriously and our Camp Counselors are trained in using positive discipline techniques to create a positive environment that welcomes campers to grow and learn.



Behavior Management: Preventing negative behavior from happening is the best way to avoid consequences for misbehavior. Should disciplinary action become necessary, our camp staff will utilize verbal warnings, time out sessions to allow a camper time to reflect on their choices and actions, restorative practices: which at its roots, consists of displaying the **Fruits of the Spirit: love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-control.** The most serious instances could result in suspension or expulsion from camp, such as use of profanity, fighting, theft, disrespectful behavior, creating an unsafe camp environment (refusing to follow instructions, failure to listen), and possession of weapons and drugs. Keep in mind that we do not issue refunds for summer day camp related fees (This includes: Deposits & Registration Fees).

Communications:

We will provide a link to the Church Center/Planning Center app (our communication platform) during our April 2026, Open House, so that you can receive personal and group text or email notifications during Atlanta Kroc Camp 2026. You may also contact the Program Manager for any questions or concerns at Era.Stewart@uss.salvationarmy.org.

Faith-Based Activities: Our camp will consist of teaching the Bible to campers through classes, devotional sessions, and Chapel. This part of camp meets our mission which can be read below.

Our Mission

The Salvation Army, an international movement, is an evangelical part of the universal Christian Church. Its message is based on the Bible. Its ministry is motivated by the love of God. Its mission is to preach the gospel of Jesus Christ and to meet human needs in His name without discrimination.

Parent/Guardian First and Last Name: _____



CAMPER INFORMATION – Table #1

Please fill out one registration form per child.

First & Last Name	Date of Birth MM/DD/YYYY	Current Age & Grade	Can Your Child Swim? Yes or No	T-Shirt Size Youth/Adult S/M/Lg/XL 2XL/3XL/4XL ETC.	Gender Male or Female
Child #1					
Child #2					
Child #3					
Child #4					
Child #5					
Child #6					
Child #7					
Child #8					

Parent/Guardian First and Last Name: _____



CAMPER HEALTH HISTORY: Table #2

The information provided below will assist our staff in providing the best care for your child.

List children in the order as found in Table #1	Allergies to animals or Insects ants, bees, dogs, cats, etc.	Food Allergies or Dietary Restrictions	Does Your Child Carry or Require an EpiPen? Yes or No	Medications & Purpose of Medication (Inhaler – Asthma)	Medication Allergies Please List
Child #1					
Child #2					
Child #3					
Child #4					
Child #5					
Child #6					
Child #7					
Child #8					



Parent/Guardian First and Last Name: _____

PLEASE LIST ANYTHING ELSE THAT MAY AFFECT YOUR CHILD'S EXPERIENCE WHILE AT CAMP (i.e., moving, family trauma, etc.) (continue at the bottom of the page if necessary) *Extra details that you would like to share about your child/children

PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN #1 (First, Middle, and Last Name)

PARENT/GUARDIAN'S DATE OF BIRTH (MM/DD/YYYY) _____

PRIMARY PHONE NUMBER (PERSONAL CELL NUMBER) _____

SECONDARY PHONE NUMBER (WORK) _____

ADDRESS _____

CITY, STATE, ZIP _____

EMAIL _____

PARENT/GUARDIAN #2 (First, Middle, and Last Name)

PARENT/GUARDIAN #2 DATE OF BIRTH (MM/DD/YYYY) _____

PARENT/GUARDIAN #2 PHONE NUMBER (PERSONAL CELL NUMBER) _____

SECONDARY PHONE NUMBER (WORK) _____

ADDRESS _____

CITY, STATE, ZIP _____

EMAIL _____

INFORMATION REQUIRED IN CASE OF EMERGENCY

HEALTH INSURANCE: YES NO

COMPANY _____

POLICY NUMBER _____

FAMILY DOCTOR PHONE NUMBER _____



ASSUMPTION OF RISK & LIABILITY WAIVER

Parent/Legal Guardian is required to sign authorization and waiver below to acknowledge understanding and agreement of the content.

In a condition of the participation of my child in The Salvation Army’s Day Camp program at the Ray and Joan Kroc Corps Community Center, I agree, on behalf of myself and my child, to make no claims or file any lawsuits against The Salvation Army or any of its agents or employees or volunteers for any loss or damage to my child’s personal property or for any injury to my child. To the maximum extent permitted by law, this liability waiver will apply regardless of whether the injury or damage was caused by the negligent act or omission of The Salvation Army or anyone acting on its behalf. I further agree to defend, indemnify, and hold harmless The Salvation Army its agents, employees, and volunteers against liability for any claims, lawsuit, losses, damages, or expenses arising out of any personal injury or property damage caused by my child in connection with his participation in Day Camp.

I do hereby authorize The Salvation Army Ray and Joan Kroc Corps Community Center as agent for the undersigned, to consent with respect to said minor, to any x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under general California Medical Practice Act by the medical staff of any hospital, whether such diagnosis or treatment is rendered at the office of the physician or at the hospital. I understand that The Salvation Army Ray and Joan Kroc Corps Community Center is not responsible for the cost incurred for medical care.

I HAVE CAREFULLY READ THIS LIABILITY WAIVER AND FULLY UNDERSTAND AND AGREE TO ITS CONTENTS. I AM AWARE THAT BY SIGNING THIS DOCUMENT, I AM GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE SALVATION ARMY.

PARENT/GUARDIAN’S NAME (PRINTED) _____

SIGNATURE _____ DATE _____

Authorized Pick-Up List - Please print the name of those (age 18 and older) authorized to pick up your child. Please include 3 additional trusted adults. Your child will only be released to individuals who are listed herein and who provide official photo identification. (continue on back if necessary)

Name Relationship Phone

Name Relationship Phone

Day Camp Guidelines Acknowledgement Form

Please sign this form to acknowledge that you have received, read, and agree to abide by all policies. These guidelines, policies, and rules may be updated periodically, and notice will be provided to you. Thank you for entrusting your children to The Salvation Army Ray and Joan Kroc Corps Community Center.

Parent/Guardian Signature

Date

RELEASE AND WAIVER FORM



PHOTO RELEASE -- I certify that I am the age of majority, and having the right to contract in my own name and on behalf of all minors on the Membership Application, Day Pass, or other form of admittance to the Kroc Center and to the extent herein set forth. I hereby irrevocably grant to The Salvation Army, its successors and assigns, its agents and those by whom it is commissioned, the absolute, unrestricted and unlimited license, right, permission, and consent to use and reuse, disseminate, copyright, print, reproduce, publish and republish, for any and all trade purposes or commercial or other advertising or public purposes, and in any and all advertising, publicity, display, publication or media, my and my minor's names, signature and likenesses, and any portraits, pictures, photographic prints or other representations of me and/or my minors, or in which any may appear, or any reproductions or sketches thereof or parts thereof, photographic or otherwise, with such additions, deletions, alterations or changes therein as you in your discretion may make, either separately or together with names or fictitious names, or the name of another person, with or without any statements or testimonials made by me, or authorized by me which you may, in your discretion, prepare for use in connection therewith. I warrant that I have not limited or restricted the use of my or my minor's name or photograph to the use of any organization or person. I hereby grant unrestricted use of audio tracks or text by The Salvation Army for such purposes as The Salvation Army may deem appropriate. I hereby release and discharge The Salvation Army, its successors, assigns and agents from any and all claims and demands arising out of or in connection with the use of any of the foregoing, including any claims for defamation, invasion of privacy or violation of any statutory right.

Member Initials _____

LIABILITY WAIVER – I understand that the use of facilities and equipment at The Salvation Army Kroc Center may involve risk of bodily injury or property damage. I agree to assume such risks to me and on behalf of all minors on the Membership Application, Day Pass, or other form of admittance to the Kroc Center. I understand it is up to me to consult with physicians or other medical professionals to ensure that I and my minors can safely participate in activities and events at The Salvation Army Kroc Center. I understand and agree that I am relinquishing my right and the rights of my estate or heirs to make any claim of any nature against The Salvation Army, its agents, employees, and volunteers.

Member Initials _____

I represent to The Salvation Army, that neither I, nor anyone I am signing on the behalf of, are registered sex offenders in any legal jurisdiction and that furthermore, I have an affirmative duty to The Salvation Army to immediately disclose to The Salvation Army any change in registered sex offender status for myself or anyone I am signing for who seeks admittance at the RJKCC. For the safety of all concerned, membership is denied to known registered sex offenders.

Member Initials _____

NOTICE - In order to promote a safe and secure environment, The Salvation Army Kroc Center has placed video cameras in various locations. As part of our commitment to the safety of children and vulnerable persons, The Salvation Army Kroc Center reserves the right to consult public sources to determine whether any member or guest of any member poses an unreasonable risk of harm to its patrons, staff, or visitors.

RETURNED CHECK / ELECTRONIC FUNDS TRANSFER POLICY - There is a \$30 charge for each non-sufficient funds transaction. Non-payment may result in termination of membership.

Member Initials _____

CANCELLATION POLICY - Membership fees are non-refundable. In order to cancel or make a change to a membership agreement, the Primary Member must fill out a Membership Change Form. If submitted after the 10th of the month, it will not be effective until the end of the following month.

Member Initials _____

RELEASE AUTHORIZATION – I hereby agree to each of the consents and waivers listed above, including the Liability Waiver, as pertaining to my own or my minor's participation, in functions, activities, special events, and field trips. I hereby certify that I am the parent/legal guardian of all minor children or dependents on the Membership Application, Day Pass, or other form of admittance to the Kroc Center and have executed these releases on (his)/(her) behalf. I understand that this is a legal document. I acknowledge that I have read this document and that I understand the words and language in it.

Member Initials _____

By signing this Membership Application, I (we) agree to the following: (1) members and any guests in his / her party will abide by terms of this Agreement at all times during the period of membership and will comply with all rules and regulations posted or otherwise communicated to members, (2) in case of illness or injury, The Salvation Army Kroc Center is authorized to secure emergency medical treatment at the member's expense, (3) The Salvation Army Kroc Center reserves the right to remove from the facility or terminate the membership of any member who fails to comply with any posted rules and regulations or otherwise breaches the terms of this Agreement, in which case member will not be entitled to a refund of dues, and (4) membership rights are not transferable.

Parent/Guardian Signature: _____ Date: _____

(if necessary)

Revised 9.2024



KROC ATLANTA

SUMMER CAMP 2026



TO: Parents, Guardians, and Caregivers

FROM: Era Stewart, Camp Kroc Director

RE: Summer Camp Field Trip Permission Form

My consent is hereby given for my child or children listed below to visit all field trips with The Salvation Army Ray & Joan Kroc Corps Community Center Summer Camp Program. I understand and acknowledge that participation in each trip involves inherent risks of injury to my child(ren) including risks associated with transportation by motor vehicle. I agree to indemnify The Salvation Army Ray & Joan Kroc Corps Community Center and its employees for any cost or expenses arising out of my child(ren)'s participation in the activities including the cost of any medical care given to my child and/or any expenses or fees incurred in any legal action arising as a result of the damage or injuries caused by my child in the course of participation in the activity. Additionally, while all attempts will be made to reach me in case of emergency, I consent to the rendering of such care, including diagnostic procedures, surgical and medical treatment and blood transfusions by medical doctors, hospitals or their authorized designees, as may in their professional judgment be necessary for the medical, surgical or emergency care of my child(ren).

Field Trips could include, but are not limited to: Swimming (Star Park Pool, Local Pools, etc.), Zoo Atlanta, Children’s Museum of Atlanta, Panola State Park, Sweetwater Creek State Park, Other State and City Parks, Botanical Gardens of Atlanta, etc. **(TBD)**

Child Name (please print)	Child Name (please print)
Child Name (please print)	Child Name (please print)
Child Name (please print)	Child Name (please print)
Child Name (please print)	Child Name (please print)

Caregiver’s Name (Please Print) _____

Caregiver’s Signature _____

Caregiver’s Ph. Number 1st: _____ 2nd Number: _____

Emergency Contact’s Name & Ph#: _____

Family’s Home Address: _____
