



JAMES ISLAND CHARTER HIGH SCHOOL TROJAN TRANSITION SUMMER CAMP

2018-2019 Incoming Freshmen

Each camp will include activities in:

- **W**ritten Expression
- **E**xpanded Science
- **M**ath Enrichment
- **A**wareness of Rules and Campus
- **T**echnology Activities
- **T**eam Building Activities
- **E**ducational Speakers
- **R**hythmic Music



Questions: Contact Carrie Holland
9th Grade Assistant Principal
carrie_holland@charleston.k12.sc.us
843-762-5212

Choose **ONE** of the following camp sessions:

Session #1: June 11th – June 14th (Applications due by May 29th)
8:00AM – 1:30PM, Monday – Thursday

Session #2: July 9th – July 12th (Applications due by June 25th)
8:00AM – 1:30PM, Monday – Thursday

If demand exceeds capacity, late applications may be placed on a waitlist.

This camp is **FREE** to enrolled 9TH graders.

LUNCH WILL BE PROVIDED!!

Students with food allergies are asked to pack a lunch each day.

Complete and return the application to JICHS to ensure a space in the program for your child.

**Students must be enrolled at JICHS for the 2018-2019 school year in order to participate.
Enrollment questions? Please contact the JICHS attendance office.
Original documentation is required for enrollment.**

PLEASE PRINT LEGIBLY

Name of student: _____ D.O.B. _____
Street address: _____
City: _____ Zip Code: _____ Gender (circle one): M / F
Parent's Name: _____
Parent's Phone (home): _____ (work): _____ (cell): _____
E-mail Address: _____
Medical Conditions: _____
Allergies: _____ Preferred Doctor: _____
Doctor's Phone: _____ Current Middle School: _____

Student T-shirt size (adult sizes): XS S M L XL 2XL 3XL

**Would you like to ride the bus to and from Summer Camp?
(Only for James Island and Folly Beach residents) _____ YES _____ NO**

Is your child enrolled in a special education class? _____ YES _____ NO

If YES, please specify the class _____

Do they require a SPED Bus? _____

Does your child have a current 504 plan? _____ YES _____ NO

*All medications must be checked in with the program coordinator.

_____ Please sign me up
for session #1
June 11 – June 14

OR

_____ Please sign me up
for session #2
July 9 – July 12

STUDENTS WILL BE NOTIFIED VIA MAIL AT LEAST ONE WEEK BEFORE REGISTERED CAMP.
Packet mailed will contain information needed for first day of camp and important documents
to complete.

**Contact: Carrie Holland, 9th Grade Assistant Principal
carrie_holland@charleston.k12.sc.us**

**Phone 843-762-5212
Fax 843-762-5228**

I understand the rules and requirements of Trojan Transition Summer Camp and
agree to abide by them. I understand that if I do not comply, I will lose the
privilege of participating in the remainder of the session.

Student Signature

Parent Signature

RETURN THIS PAGE TO MRS. HOLLAND.