

DREAM CAMP

2025



SHINE YOUR LIGHT!

Dream Camp: K-5th
Grade Middle School Blast: 6th-8th

Join SONS Outreach for a fun filled summer as we discover how to Shine Your Light!
Register online at www.sonsoutreach.org, or mail registration to P.O.Box 610385
Port Huron, Michigan 48061-0385. for more information call SONS at 810.989.7667

100\$ FIRST SESSION: June 16th - July 17th 8:30AM - 1:30PM

100\$ SECOND SESSION: July 21st - August 23rd 8:30 - 1:30

Hosted At:

Harrison School "SONS Center" 55 15th Street

Proudly Sponsored By OST MiLEAP GRANT!

Arts &
Crafts

Field
Trips

Story
Time

Recreation
Time

STEM
Activities



SONS Outreach ~ Dream Camp \$100 Per Session & Registration Fee \$25

Student Name: _____ Student #: ()

Home Address: _____ Birthdate: / /

School: _____ Grade: _____ Email: _____ T/S: _____

Parent Name: _____ Parent #: ()

Emergency Information

Special Medical Needs/Conditions: _____

Emergency Procedures (if applicable): _____

My child has permission to attend SONS Dream Camp and travel with them to all designated field trips. I understand the arrangements and give permission for my child to attend. I also agree to indemnify and hold harmless the sponsoring institutes:

SONS Outreach, PHASD, and their sponsors from liability arising from any accident or injury occurring during the trips. This specifically includes injury arising from negligence on the part of those mentioned above. This recognizes a shared responsibility among organization, student, and home. This does not include gross negligence on the part of those mentioned above.

I also give SONS Outreach permission to use photos/videos on website and/or social media.

Parent Signature: _____ Date: / /

Please Mail a Completed Form & Check to: SONS Outreach • PO Box 610385 • Port Huron, MI 48061-0385
or Bring this Completed Form with you on the First Day of Camp, along With Your Payment.