**[Date: July 1, 2024]**

**Subject: Acceptance Letter for Robotics Summer Camp 2024**

**Dear [Parent/Guardian's Name],**

We are delighted to inform you that **[Camper's Name]** has been accepted into the St Kitts and Nevis Robotics Summer Camp 2024! We are excited to have your child join us for an enriching and fun-filled camp experience, focusing on the fascinating world of robotics.

**Camp Details**

**Dates:** July 8th - July 26th, 2024
**Time:** 9:00 am - 3:00 pm daily
**Locations:**

* Immaculate Conception Catholic School, St Kitts
* Nevis Disaster Management Department, Nevis

**Registration Fee**

A registration fee of **EC $85.00** is required to secure your child’s spot in the camp. Please ensure the fee is paid by **July 5th, 2024**. Payment can be made online through our website or in person at our office.

**Important Information**

**Daily Schedule:**

* **9:00 am:** Morning assembly and brief
* **9:15 am:** Robotics lessons and activities
* **12:00 pm:** Lunch break
* **1:00 pm:** Afternoon projects and challenges
* **3:00 pm:** Dismissal

**Drop-off and Pick-up Procedures:**

* **St Kitts:** Drop-off at the main entrance of Immaculate Conception Catholic School. Pick-up will be at the same location.
* **Nevis:** Drop-off at the Nevis Disaster Management Department. Pick-up will be at the same location.

**What to Bring**

* **Packed lunch and snacks:** Nut-free and allergy-aware.
* **Water bottle:** Clearly labeled with your child’s name.
* **Comfortable clothing:** Suitable for hands-on activities.
* **Sunscreen and hat:** For outdoor activities.

**Required Documents**

All required documents, including the health and medical form, camp policies, and more, can be downloaded at the following link:
<https://www.sknra.org/documents-for-robomindset-summer-camp/>

Please complete and return the health and medical form by **July 5th, 2024**.

**Contact Information**

For any questions or additional information, please feel free to contact us:

**Mrs. Michelle-Ann Neil**
Community Engagement Officer and Camp Manager
Email: michelle.ann.neil@sknra.org
Support Email: support@sknra.org

**Health and Safety**

Your child's safety is our top priority. Please complete and return the attached health and medical form by **July 5th, 2024**. Ensure all relevant medical information and emergency contacts are provided.

**Social Media Challenges**

As part of our camp activities, we will engage in daily social media challenges. We encourage you to follow our social media pages to see updates and highlights of the camp.

We are thrilled to welcome **[Camper's Name]** to the Robotics Summer Camp 2024 and look forward to an exciting journey of learning and discovery. Thank you for entrusting us with your child's summer experience.

Best regards,

**[Your Name]**
Programmes Manager
St Kitts and Nevis Robotics Association