

St. Agnes Academy-Houston

Academic (C)



## VDP Week 2, Session 2: VentureCraft

Welcome to VentureCraft – an exciting entrepreneurial course that will empower students to unleash their creativity and business acumen! In this dynamic workshop, participants will dive headfirst into the world of entrepreneurship, collaborating in groups or individually to conceptualize, create, market, and sell their own products. From innovative inventions to artisanal crafts, students will have the opportunity to bring their ideas to life while learning essential business skills along the way. As the course progresses, students will delve into market research, branding strategies, and sales techniques, honing their entrepreneurial mindset and problem-solving abilities. The culmination of the course will be a “farmers market” type event where participants will vie to attract customers and make sales. Get ready to unlock your potential and embark on a journey of innovation, collaboration, and business success!

**Camp Start Date:** June 9, 2025

**Start Time:** 10:00:00 AM

**Camp End Date:** June 13, 2025

**End Time:** 12:00:00 PM

**Date Details:** Every day June 9-13 from 10am-12pm

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**Venue Name:** Rotunda

**Venue Address:** 9000 Bellaire Blvd, Houston, TX 77036

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**Camp Cost:** \$125.00

**Questions:** Katie Fritsch [kfritsch@st-agnes.org](mailto:kfritsch@st-agnes.org) (713) 219

**Special Notes:**

For rising 6th-8th graders (currently enrolled in 5th-7th grade)

**Medical Info:**

We (or I) hereby request that you accept the application for the Veritas Discovery Program at St. Agnes Academy on the dates set forth. In consideration of your acceptance of this application, we (or I) hereby release St. Agnes Academy and all its employees and agents from all claims on account of any injuries which may be sustained by our (or my) daughter while attending the St. Agnes Middle School Summer Program, and its employees and agents for any claim which may be hereafter presented by our (or my) minor daughter. We (or I) know of no mental or physical problems which may affect our (or my) daughter's ability to safely participate in the program. I further certify that the above mentioned person has insurance in case of emergency. Additionally, I consent to any medical treatment deemed necessary by the Summer Program Director in the event of illness or injury to my child or dependent.

