

Upper Chichester Township Summer Camp

8500 Furey Rd Upper Chichester Twp.

June 19th – July 28th

APPLICATION / REGISTRATION FORM

PARTICIPANT INFORMATION

Please type or print legibly.

First Name: _____ Last Name: _____

Nickname: _____ Age: _____

Home address: _____

City: _____ State/Province: _____ Postal/Zip Code: _____

Country: _____ Telephone: _____ Cell: _____

Parent email: _____

(Include area code with telephone)

Mother's name: _____ Father's name: _____

Mother's day phone: _____ Father's day phone: _____

Mother's cell: _____ Father's cell: _____

Person(s) Authorized to pick up child:

1. _____ 2. _____ 3. _____

(Must provide their ID at time of pick up)

Other Dismissal Arrangements _____

Emergency contact*: _____ Relationship: _____ Phone: _____

Emergency contact*: _____ Relationship: _____ Phone: _____

REQUIRES PARENT'S SIGNATURE:

You have our permission, in the event of an emergency and in case we are unavailable, to authorize any physician, nurse practitioner, medical personnel or camp counselor to examine, interview, test and if necessary, treat my child _____ as they may deem advisable.

Parent/Legal guardian name _____ Date _____


Parent/Legal guardian Signature _____ Date _____

Student Allergies _____

Does your child take any medication? _____ Yes _____ No

Doctor _____ Phone number _____

Insurance carrier _____ Policy number _____

 Please list ADA Accommodations if needed: _____

Does your camper have any behavioral or emotional issues the staff should know about?

Medication

Dose

Reason

<u>Medication</u>	<u>Dose</u>	<u>Reason</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PARENT STATEMENT

I hereby state that (camper's name) _____ is in good mental and physical health condition to participate in the activities provided by **Upper Chichester Township**, including but not limited to all aspects of the camp we signed up for. I am fully aware that any activity involving motion, height or athletic activity creates the possibility of serious injury. I hereby release **Upper Chichester Township, its employee and its staff** from liability to the above-named camper, of the person claiming through him/her, arising from injury to the person or property of the above named camper occurring in the premises of **Upper Chichester Township**, including any event sponsored or sanctioned by **Upper Chichester Township**, and or travel to and from such activities.

I understand that **Upper Chichester Township**, has the right to deny admittance to any camper not meeting the standards of the program as it sees fit. I also agree not to hold these parties responsible in the event that my son/daughter/child engages in inappropriate conduct (including, but not limited to disruptive or volatile behavior in or out of camp, etc.) or becomes involved in any activity or with any persons not associated with **Upper Chichester Township**, or its scheduled program and that **Upper Chichester Township**, has the right to send him/her home for inappropriate conduct. I further attest that the information contained in this application is correct to the best of my knowledge. In addition, I have agreed to the policy and fee statement and agree to comply.

Parent Signature _____ Date _____

Camp Info

Fees and Payments

Summer camp runs from June 27th to July 29th between the hours of 8am and 4pm, M-F. Each session of summer camp is \$300.00 for ages 6-12. Children must be picked up by 4pm or a \$5 late fee will be charged for every 5 minutes that a parent/guardian is late for pick up. Application/Registration fee \$25.00 per camper (Non-Refundable).

1st Child \$300.00 per session, 2nd Child \$250.00 per session, 3rd Child \$200.00 per session.

YOU MUST PAY FOR THE ENTIRE SESSION YOUR CHILD ATTENDS.

*****All campers must live in the same household to receive the multi camper discount*****
To guarantee your child a spot in summer camp, fees must be paid in full by cash, money order or check no later than the fee schedule below: **Payable to Upper Chichester Township - PLEASE CIRCLE WHICH SESSION YOUR CAMPER WILL ATTEND**

Camp Week of	Sessions	Payment Due
Application/Registration	Registration Fee	First come, first serve until full
June 19 -June 30	First Session	May 26, 2023
July 3 -July 14	Second Session	June 16, 2023
July 17 – July 28	Third Session	June 30, 2023

I, _____, understand that if I do not have my summer camp payments submitted to Upper Chichester Township by the dates listed in column (3) above, that my child, _____, is NOT guaranteed a spot in summer camp _____(initials)

Pick up and Drop Off Policy

All campers MUST BE SIGNED IN AND OUT by a parent/legal guardian or a person listed on the contact information form. If your camper is 12 years of age or older, he/she may sign themselves into camp and out of camp beginning at 3pm to walk or ride a bike home. If pick up is from someone not on this form, the Township must be notified by the parent/guardian, and this person must show ID at the time of Pick up.

Please initial which statement below that pertains to your child:

- My camper is 12 years of age or older and may WALK and/or RIDE BIKE home beginning at 3pm. _____(initials)
- My camper is 12 years of age or older and will be picked up by a parent/guardian or person listed on the contact information form. _____(initials)
- My camper is under 12 years of age and will be picked up by a parent/guardian or person listed on the contact information form. _____(initials)

Meals & Snacks

It is the responsibility of each family to pack their camper at least two (2) snacks and one (1) lunch for each day the child attends camp.

- Campers are NOT permitted to leave for food _____(initial)
- Campers and Parents are not permitted to have lunch ordered in _____(initial)
- If you will be sending your child's snack, please be sure that your child's lunch is clearly marked with your child's name and last name.
- Your child is responsible for their own snack, no sharing is allowed. Glass bottles/containers are not allowed.

COVID -19 Guidelines and Precautions

Anyone showing signs of illness of any kind or who may have been exposed to COVID-19 should not be in the day camp facility.

Drop-off/arrival procedure:

Before arrival: Parents be on the alert for any symptoms of COVID-19 and to keep the child(ren) home if showing any signs of illness.

Symptoms of COVID-19 • fever* • cough • shortness of breath or difficulty breathing

Additional symptoms include chills, new loss of taste or smell, and vomiting/diarrhea (children only). While symptoms in children are similar to adults, children may have milder symptoms.

*Fever is determined by a thermometer reading 100.4 or higher or by subjective signs such as flushed cheeks, fatigue, extreme fussiness, chills, shivering, sweating, achiness, headache, not eating or drinking.

Arrive - Staff member to greet children outside as they arrive and check camper's temperatures. Staff will monitor and discourage congregation at arrival and drop-off. If possible, the same parent or designated person should drop off and pick up the child every day. Avoid designating those considered at high risk such as elderly grandparents who are over 65 years of age. Hand hygiene stations will be set up at the entrance of the camp, so that staff and children can clean their hands before they enter. Keeping hand sanitizer out of children's reach and supervised use. All campers will walk directly to their assign area. Each camper will have the same assigned area each day of the camp.

Preventing the spread of the virus in the camp/program facility:

Follow social distancing strategies. As instructed campers will stay 6 feet apart. Signage and other messaging to remind campers and staff of physical distancing will be posted. All parents should wait in their vehicles for their camper.

Follow proper hand hygiene guidance for adults and children such as washing hands frequently with soap and water for at least 20 seconds (about as long as it takes to sing "Happy Birthday" twice). In addition to usual handwashing, make sure to wash hands:

- Upon arrival in the morning before and after eating meals and snacks. After blowing noses, coughing, or sneezing or when in contact with bodily fluids or after using the bathroom.

Follow face coverings guidelines: Staff members and campers will wear face coverings when in the camp

Follow CDC Guidance for wearing cloth face coverings. Avoid touching eyes, nose, and mouth. Cover coughs and sneezes with a tissue or an elbow.

Children or staffs who develop symptoms during the day:

- If a child or staff member develops any symptoms of COVID-19, they will be sent home as soon as possible along with their family members.
- While waiting for a sick child to be picked up, staff will stay with the child in an area isolated from others. If the child has symptoms of COVID-19, staff will remain as far away as safely possible from the child (preferably, 6 feet) while maintaining visual supervision. Staff will wear a cloth face covering.

For people who think they might have COVID-19 or have mild symptoms, the Centers for Disease Control and Prevention recommends they stay home and call their doctor for medical advice and if it is recommended they get tested

Anyone with more serious symptoms should seek medical attention immediately, by calling their doctor or 911 right away. More serious symptoms can include trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, bluish lips or face

Camp will instruct and enforce that campers and staff who are sick (any fever, respiratory, or gastrointestinal symptoms) or believe they might have COVID-19 should stay home and separate themselves from other people in the home as much as possible. They should be excluded from the camp until they can answer YES to all the following questions: ✓ Has it been at least 10 days since you first had symptoms? ✓ Have you been without fever for three days (72 hours) without any medicine for fever? ✓ Has it been three days (72 hours) since your symptoms have improved?

Household members and people who have been in close contact with someone who has had symptoms of COVID-19 should stay home as much as possible for 14 days, monitor themselves for symptoms, and consult with their local health department. Close contact means within six feet for at least 10 minutes. If they start having symptoms of COVID-19, they should take the same steps as above to prevent spreading it.

Parent Signature

Date

Camp Releases

Transportation and Planned Field Trips/ Unscheduled Walking Trips I, _____, the parent/legal guardian of _____, who is my minor child, hereby give permission for my child to be transported to and from off-site locations and to attend planned scheduled field trips. I agree that they may be transported by Upper Chichester Township, rented vans, or a private bus company on said trips. I also give permission for my child to go for unscheduled walking trips. _____ Initials

Unscheduled Emergency Evacuation I, _____, the parent/ legal guardian of _____, who is my minor child, hereby give permission for my child to be transported in the event of inclement weather or for the purpose of emergency evacuation. _____ Initials

Photo Release I, _____, the parent/legal guardian of _____, who is my minor child, hereby give permission for my child's image, photograph, or other reproduction to be taken without reimbursement for the sole purpose of advertising programs from Upper Chichester Township. _____ Initials

I, _____, the parent /legal guardian of _____, am aware that toys, games, electronics, and/ or any other items of value are not to be brought to Upper Chichester Township Summer Camp. I am aware that Upper Chichester Township will not be held responsible for lost, broken or stolen items from home to camp. _____ Initials

Parent Signature

Date

Read & Initial All Rules carefully. You will be responsible for all of them.

- _____ 1. Campers are expected to respect Camp Rules and Camp Staff.
- _____ 2. Campers are not allowed to "hang out" in unauthorized areas.
- _____ 3. Campers are not allowed to leave the building without staff and/or parental permission.
- _____ 4. Campers must use appropriate language at all times; derogatory language, cursing, teasing, "Name calling" etc. is prohibited.
- _____ 5. Campers must demonstrate appropriate behavior. Fighting, play fighting, pushing, grabbing, and throwing objects are not appropriate behavior and will result in SUSPENSION.
- _____ 6. Use or possession of tobacco, alcohol, or other drugs is strictly prohibited. ANYONE caught breaking this rule will be SUSPENDED IMMEDIATELY.
- _____ 7. Campers bringing weapons of ANY KIND, including toy weapons will be SUSPENDED IMMEDIATELY.
- _____ 8. Campers causing damage to Upper Chichester Township property will be suspended and responsible for restitution for all damages.
- _____ 9. Campers are ONLY permitted to have food and drinks in designated areas. ALL CAMPERS/MEMBERS will be responsible for cleaning up trash.
- _____ 10. Any Campers having problems with another participant should report the problem to staff immediately.
- _____ 11. Campers are not allowed to sell, trade, take, or buy property while involved in Summer Camp.
- _____ 12. Campers who become ill, sustain an injury, or are not feeling well should report to a staff member immediately.
- _____ 13. Campers must wear appropriate clothing at all times. Must arrive with closed toed shoes preferably sneakers or tennis shoes. This includes but not limited to, the necessary and appropriate swim gear, clothing that is in good taste (non-revealing, and without negative or foul wording or designs).
- _____ 14. Campers should not bring valuables to the camp; the Township is not responsible for lost or stolen items.

Parent Signature

Date

Campers Signature

Date