

City of Longwood Summer Camp 2017 Registration Form



It Starts in Parks

T-Shirt Size: (Please circle Adult OR Youth and a size) **Adult Youth / X-L L M S**

Camper's Name (Last) _____ (First) _____

Gender: Male _____ Female _____

Address _____ Apt. _____ City _____ Zip _____

Parent/Guardian Name (Mother) _____ Parent/Guardian Name (Father) _____

Parent/ Guardian e-mail address _____

Phone Home _____ Work Mother _____

Work Father _____ Cell Mother _____

Cell Father _____

Emergency Contact Name _____ Phone _____

Relationship to Camper _____

Date of Birth: _____ Grade in Fall: _____ Exact Age at camp time: _____ yrs.

Medical Release Form

In case of medical emergency, I understand every effort will be made to contact parents or guardians of campers. In the event I cannot be reached, I hereby give permission to the physician on duty to hospitalize; secure proper treatments; and order injection and/or anesthesia and/ or surgery for me/ or my child as named above. This form may be photocopied for use out of camp. I also give permission to the Camp Director to administer first aid care for my child at camp.

Signature of parent or guardian: _____ Date: _____

MEDICAL HISTORY

Child's Name _____

Name of family physician _____ Phone Number _____

Address of physician _____

Name of dentist _____ Phone Number _____

Name of orthodontist _____ Phone Number _____

Do you carry medical/hospital insurance? Yes ___ No ___

If so, please indicate: Carrier _____ Policy/Group # _____

Operations or serious injuries (dates)

Chronic or recurring illness/medical condition

Dietary restrictions

Allergies (e.g. food, drug, plant, insect, etc.)

Current Medications

Please indicate with a check (and dates if appropriate) if your child has experienced any of the following:

Frequent ear infections Heart Condition/Disease Seizures/Epilepsy Diabetes
 Asthma Bleeding/Clotting Disorders Hypertension Mononucleosis
 Lyme Disease

Has your child had any of the following diseases?

Chicken Pox Measles German Measles Mumps

This health history is correct as far as I know, and the person herein described has permission to engage in all camp activities except as noted.

Signature of parent/guardian _____ Date _____

CITY OF LONGWOOD SUMMER CAMP RULES AND REGULATIONS

1. All campers must be signed in and out by their parent/legal guardian. No one is permitted to leave the facility without a note from parent/legal guardian.
2. **Campers need to bring a reusable water bottle daily.** We will provide a lunch and one snack each day, please provide your child with a morning snack. Children may bring lunches or snack items from home; we do not provide a morning snack.
3. Campers must remain in their groups at all times.
4. Behavior that might cause an accident or hurt feelings to another will not be tolerated. "Time out" will be issued for an infraction. Continued discipline problems will result in a child's termination from the program and the parent/guardian will be ineligible for a refund.
5. Campers must have permission from staff to go to the restroom or get a drink of water and must be accompanied by a counselor or another child.
6. Do not send sick campers to camp. Parents/guardians will be called and asked to pick up their child if he/she seems too sick to participate in activities.
7. **STAFF IS NOT PERMITTED TO ADMINISTER MEDICATION OF ANY KIND. IF YOUR CHILD REQUIRES MEDICAL ATTENTION BEYOND A BAND-AID, THE CITY PARAMEDICS WILL BE CALLED. MEDICATION WILL NOT BE STORED AT THE CAMP FACILITY.**
8. Do not allow your child to bring any items from home such as skateboard, roller blades, toys, **phones**, I-pads/pods, radios, MP3 player, CD's, wallets, purses, video games, etc. The City of Longwood will not be responsible for lost or stolen items.
9. ***The program is not a day care service; therefore, parents whose children require continual supervision to ensure their compliance with rules should carefully consider whether their child is a good candidate for this program. Children requiring too much attention from the staff due to inappropriate behavior will be terminated from the program.***
10. **Payment is due no later than Monday morning before each week.** If payment is not received by that Monday, you will forfeit your child's spot in camp.
11. If you pick your child up late there will be a fee charged at a rate of \$1.00 per minute (in cash) at the time you pick up your child, no exceptions! **Camp Hours 7:00am-6:00pm**
12. Campers must wear their CAMP T-SHIRT on designated field trips.
13. Family members/friends are not allowed to attend camp for the day or go on field trips.
14. All Summer Camp staff attends all field trips. If your child is not attending a field trip, you must make other arrangements for them.

Parent/Legal Guardian _____ Date _____

Please print Parent/Legal Guardian _____

Child' Name _____

Camp Behavior:

Behavior that might cause an accident or hurt feelings to another camper will not be tolerated.

Parents whose children require continual supervision to ensure their compliance with rules should carefully consider whether their child is a good candidate for this program. Positive reinforcement principles will be used to relate to your child. Children requiring too much attention from the staff due to bad behavior will be terminated from the program.

Discipline is teaching children appropriate behavior, not punishing. Therefore, the camp staff will use a three-strike system.

Strike One: Verbal warning, sometimes children do not understand what they did was wrong.

Strike Two: Time out and discussion with parent/guardian regarding inappropriate behavior.

Strike Three: Expulsion from camp at the discretion of the Camp Director.

**The only exception to the three-strike rule is a physical altercation. There is ZERO TOLERANCE for fighting, kicking, biting, or hitting, and there will be immediate time out and parents will be notified of each event. If a physical altercation occurs, it is the discretion of the Camp Director to notify the parents immediately to have the child removed from camp.

Parent's signature _____ **Date** _____

Camper's Name _____

Strike 1
Incident _____

Warning given by Camp Director _____ Date _____

Strike 2
Incident _____

Time out & discussion between parent & Camp Director _____ Date _____

Parent's signature after Strike 2 _____ Date _____

Strike 3
Incident _____

Expulsion at discretion of Camp Director _____ Date _____

No refunds will be given

Parent's signature after Strike 3 _____ Date _____

Camp Schedule

Resident
\$95.00

Non-Resident
\$120.00

Additional Weeks
\$10.00 per week (non-refundable)

Dates

Dates	Resident	Non-Resident	Additional Weeks
June 5- June 9			
June 12 - June 16			
June 19 - June 23			
June 26 – June 30			
July 3- July 7			
Tuesday, July 4th - (no camp)			
July 10 – July 14			
July 17 - July 21			
July 24 - July 28			
July 31 – August 4			
Camp Ends	*****	*****	*****

Method of payment:

Cash amount: _____

Credit Card amount: _____

Check amount: _____

Receipt Number: _____

Conditions of Enrollment

1. The Camp Director reserves the right to dismiss a camper who is, in their opinion, a hazard to the safety and the rights of others, or who appears to him/ her to have rejected the reasonable controls of Camp.
2. The parents or guardians submitting this application are those having legal custody over the child. Conditions of custody, if applicable, must be fully communicated in writing to the Camp, including a photocopy of the section of any court order referring to visitation rights. The signature on the registration form signifies that both parents/guardians are in agreement with the conditions of enrollment.
3. Care is taken for the safety and good health of our campers, but in the event of accident or sickness, City of Longwood Summer Camp, including the Camp staff and the employees of facilities outside of the Camp grounds are hereby released from any liability.
4. Camp staff cannot administer any medication to the camper.
5. I give permission for Longwood Summer Camp to use any photograph my child is in for promotional material.
6. No refund will be made for dismissals due to disciplinary action.
7. Make sure your child wears the appropriate shoes for outside activity (sneakers); and brings a bathing suit, towel and sunscreen when we have water activities.
8. **Most of our field trips/ activities are outside; please make sure your child has sunscreen applied to them prior to the start of each day.**
9. Children will be responsible for their own money, even on field trips.
10. Campers will not be allowed to visit gift shops on field trips.
11. **Parents/Guardians must notify camp of camper's absence at least 1 week in advance to obtain any kind of refund.**
12. I give permission for the City of Longwood to take my child on Field Trips using Seminole County Public School bus.

I have read, understood and accepted the conditions of enrollment as stated above.

Parent/Legal Guardian _____ Date _____

Please print Parent/Legal Guardian _____

Child' Name _____

Price Reminder and Refunds

Sign-ups for the summer camp registration for **residents only** will begin on April 3rd. **Non Resident** registration will begin on April 10th. Registration will be located at Longwood City Hall Commission chambers (175 West Warren Avenue, Longwood, FL 32750). Registration prices will be \$95.00 per week for residents and \$120.00 per week for non-residents. These prices will not change throughout the duration of camp. You must pay for your child's first week in full. Additional camp weeks can be reserved by paying a \$10 reservation fee per week. The \$10.00 reservation fee will go towards your weekly fee and will only reserve a spot for your child. **You will be responsible for paying the remainder of the weekly fee by the Monday of the designated camp week.** Please see chart below for dates and prices. Refunds will be given if notification is provided at least one week in advance. Any person giving notification in less than one weeks' time may not receive a refund.

Camp Dates	Resident	Non-Resident
6/5/17 thru 8/4/17	\$95.00	\$120.00

I have read, understood and accepted the conditions of enrollment as stated above.

Signature Parent/ Guardian: _____ Date: _____

REMINDER TO ALL PARENTS

CELL PHONES!!

Parents, children will not be allowed to bring cell phones with them to camp. If a child is seen with a phone, it will be confiscated and returned to the parent at the time of pick up.

There will be a camp cell phone located directly on site every day that can be contacted in the event of an emergency. You may also call the Recreation Coordinator if need be.

The first time a child is seen with a cell phone, it will be confiscated and held for the parent to retrieve. If this occurs a second time, it will be up to the discretion of the Recreation Coordinator to expell the child from camp. No refunds will be given for unattended weeks following the expulsion.

I have read, understood and accepted the conditions of enrollment as stated above.

Signature Parent/ Guardian: _____ Date: _____