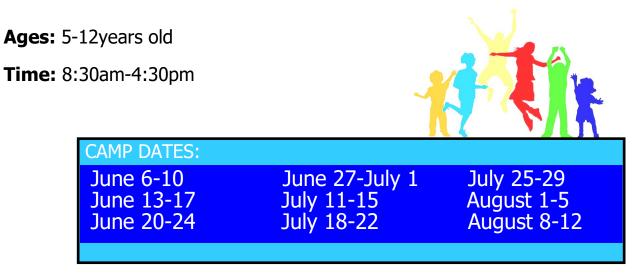


2022 Summer Camp Packet

Welcome to another season of summer camp! We thank you for choosing SRAC's summer camp and we hope that your child has an enjoyable summer experience. Your child will be doing a variety of activities including swimming, outside fun (hiking, playground, games), inside recreational activities, art and other craft activities and so much more!

Camp drop off and pick up will be in the multipurpose room unless camp staff advises differently. Your child will be responsible for bringing the following: a swim suit, towel, lunch w/drink, 2 snacks and a change of clothes (as needed).

Camp Registration Begins April 4, 2022. You can sign up for camp all at once or sign up throughout the summer. Please be aware that we do have a limit on the number of children that can participate in camp.



SRAC offers early drop off (7:30am) and late pick up(5:30pm) for an extra \$25/week. <u>Children must be registered</u> for this program in order to not be penalized the late pick up fee. Children who participate in the early drop off/late pick up will be involved in quiet activities.

Fees: \$110/week Smithfield Resident \$150/week Non-Smithfield Resident

A \$25 non-refundable deposit is due at time of registration to hold your child's space in camp for each week that you sign up for.

Annual SRAC Members receive 10% off of camp fees.

Each child is required to bring each day: swim suit, towel, bagged lunch w/drink, 2 snacks, water bottle, sunscreen/insect repellent (if needed), and change of clothes (if needed).

DISCIPLINE POLICY

We utilize and encourage the practice of praise and positive reinforcement as effective methods of behavior management. We believe that when participants receive positive, non-violent, and understanding interactions they can develop good self-concept, problem solving abilities, and self-discipline.

BEHAVIOR MANAGEMENT POLICY

The Smithfield Parks and Recreation Department supports and practices the following Behavior Management Policies:

- 1) Quiet Verbal Warning.
- 2) After repeated behavior problems, a written incident report will be given to the parent/guardian.
- 3) Additional behavioral problems will constitute a second written incident report given to parent/guardian and a possible 1-2 day suspension.
- 4) If negative behavior persists, a third written incident report constitutes that the participant will be asked to leave the program and no refund will be given.
- 5) For severe offenses, such as but not limited to fighting, theft, vandalism, possession of a weapon or drugs, severe verbal threats, or sexual misconduct, the participant will be dismissed from the program immediately bypassing any of the steps above.

CONFIDENTIALITY POLICY

SPRD/SRAC is dedicated to protecting the confidentiality of all program participants. All participants are encouraged to respect the confidentiality of other participants by not disclosing personal information in public displays such as Facebook, Twitter, etc.

SPRD/SRAC staff policy states that employees are not to share personal information about participants outside of the workplace.

PAYMENT POLICY

Must be paid in full prior to the start of camp.

WITHDRAWAL AND TRANSFER REQUESTS

All withdrawals and transfers must be received in writing 7 days or more in advance of the start date of the program. Non-attendance or Non-participation in a program does not entitle a patron a credit/refund of the registration fee.

REFUND POLICY

All requests must be made in writing. Two weeks or more in advance = Refund minus \$10 administration fee 5-7 days in advance = 50% Refund Minus \$10 administrative fee No Refund = if not notified by the Wednesday before camp starts

ELECTRONIC DEVICES

No electronic devices are allowed (examples: cell phones, MP3 players, gaming devices, etc.).

MEDICATION/ MEDICAL TREATMENT

Should your child require medications, which are medically necessary and cannot be scheduled outside the hours of the camp program, please contact the camp supervisor. Action will be considered on a case by case basis. In the case of an emergency, every effort will be made to contact parents/guardians. By signing your camp forms, if you cannot be reached, you authorize the SPRD/SRAC Staff to seek appropriate medical care.

SICKNESS

If your child is not feeling well or is running a temperature, please keep them at home. Children must be fever free for 24 hours before returning to camp. Please call and let staff know if your child is not coming in to camp.

DRESS CODE

In order to maintain a positive experience and to focus on the safety of campers, SPRD/SRAC recommends appropriate attire. Campers will participate in recreational or athletic activities almost everyday so they should wear cool, comfortable clothing, and jewelry should be left at home. Parents will be asked to bring acceptable clothing or will be required to come pick up their child. **Unacceptable attire:** sandals or flip flops; shirts with spaghetti straps; clothing that displays drugs, alcohol, tobacco or gang references; excessively loose pants or shirts; revealing clothing.

LATE PICK UP POLICY

Participants that are picked up late from the closing time of camp will be charged a late fee. The fee is as follows: Once the parent is 10 minutes late a \$5.00 fee will be charged per family. An additional \$1.00 will be added every minute past 10 minutes late. Payment is due at the time of late pick-up. Habitual tardiness could result in participant's dismissal from the program.

LOST ITEMS

The Smithfield Parks and Recreation Department is not responsible for any personal items lost or stolen at our programs.

Please contact SRAC Summer Camp Staff if your child will be absent.

(Parents, please retain this for your records)



2022 Camp Registration Form

(One form per camper copy as needed)

| Camper Name: | | | | Gender |
|---------------|---------|----------------------|---------------|--------|
| · | (First) | (Las | | |
| Age: | | (As of June 1, 2022) | Date of Birth | |
| Parents Name: | | | | |

Primary Phone #: Secondary Phone #:

Email address:

| DATES OF CAMP | FEE | Early/Late Childcare | Total | |
|----------------|-------------|--------------------------|-------|--|
| June 6-10 | \$110/\$150 | Y-\$25/N | | |
| June 13-17 | \$110/\$150 | Y-\$25/N | | |
| June 20-24 | \$110/\$150 | Y-\$25/N | | |
| June 27-July 1 | \$110/\$150 | Y-\$25/N | | |
| July 11-15 | \$110/\$150 | Y-\$25/N | | |
| July 18-22 | \$110/\$150 | Y-\$25/N | | |
| July 25-29 | \$110/\$150 | Y-\$25/N | | |
| August 1-5 | \$110/\$150 | Y-\$25/N | | |
| August 8-12 | \$110/\$150 | Y-\$25/N | | |
| | Т | Total Amount Due: | | |
| Deposit Due: | | | | |

Circle the weeks that you would like to sign up for.

Let us know if you would like early/late childcare.

A \$25 non-refundable deposit is due at time of registration to hold your child's space in camp for each week that you sign up for.

| Department Use ONLY | | | | | | |
|---------------------|------------------------|-------------------|-------------------------|-------------------|--|--|
| Amount Paid: | Date: | Receipt# | Cash/Check # | _Credit Card V/MC | | |
| Amount Due: | Date: | Receipt# | Cash/Check # | Credit Card V/MC | | |
| Please check all th | at have been received: | Registration Form | Camper Information Form | Medical Forms | | |
| Staff Name: | | Da | te: | | | |
| i i | | | | | | |

2022 Camper Information Form

Child Information

Smithfield Recreation & Aquatics Center

| Last Name | First Name | | | | Gender |
|--------------------------|------------------------|-----------------|-----------|----------------|-----------|
| Address | City | | | | Zip |
| Age: | _ (As of June 1, 2020) | Date of Birth | | | |
| Parent / Guardian Info | rmation | | | | |
| Mother/Guardian Last Nar | ne | | First Nan | าe | |
| Address | | City | | | Zip |
| Primary # | Work # | | Ext | Secondary # _ | |
| Email Address | Employer | | | | |
| Father/Guardian Last Nam | Name First Name | | | | |
| Address | | City | | | _Zip |
| Primary # | Work # | | Ext | Secondary # _ | |
| Email Address | Employer | | | | |
| Town of Smithfield Res | ident (residing inside | the incorporate | ed town l | limits) Yes | No |
| Emergency Contact (Ot | ther than Parent/Gu | uardian) If Pai | rent/Gu | ardian Can't B | e Reached |
| Name | Relationship to Child | | | | |
| Primary # | Secondary | , # | | _Other# | |
| Name | Relationship to Child | | | | |
| Primary # | Secondary | , # | | _Other# | |

The Smithfield Parks and Recreation Department welcomes the participation of all individuals in our programs, including those with disabilities. We are fully committed to complying with the ADA and providing reasonable accommodations to facilitate participation in our programs. The sooner we know about your special situation, the more time we have to make reasonable accommodations to improve a camper's recreation experience with us. *To aid staff in making accommodations, registrations should be received two weeks prior to the start of a program.*

Special Medical Circumstances (ex. cancer, physical disabilities, blindness, deafness, or diabetes): The Smithfield Parks and Recreation Department recommends that parents or guardians consult their camper's pediatrician, or health care professionals to assess their camper's illness to take part in our camps. It is required that parents or guardians provide in writing any additional instructions for their camper. The written instruction should be developed with the assistance of their camper's pediatrician or health care professional. This information should include the specific medical circumstance and requirement needs for the camper.

HEALTH INFORMATION CONTINUED ON BACK

CAMPER INFORMATION (Use one form per camper)

Health Information continued

Does your child have any allergies (plants, foods, insects, etc.)? If yes, please list:

Does your child have any health related conditions that might limit their activity? If yes, please list:

Does your child know how to swim?____

Does your child have any behavioral, psychological, or emotional issues?_____ If yes, please explain and offer suggestions that will help our staff work well with your child.

(Please use additional pages if necessary for any of the above questions)

Please make our staff aware of any allergies your camper may have. If your camper has severe allergies, please make sure that our staff has written instructions on what to do if your camper has a severe allergic reaction. This information should include the specific allergy and medical requirement needs for the camper. If needed at camp, a separate lunch table/area will be provided for campers who have been identified as having a nut allergy. The Smithfield Parks and Recreation Department cannot guarantee an environment free of nut products or nut oils. It is important that campers with a risk of anaphylaxis reaction to any substance (food, insect bites, or drugs) be identified. They must carry with them at all times the appropriate EpiPen kit and a letter of Permission from a parent or guardian to allow for the injection to be given by Smithfield Parks and Recreation Staff immediately in case of an emergency.

Allergy Type:_

Instructions if camper has an Allergic Reaction:

Daily Medications: We advise that medications be given before and/or after camp however, if that is not possible, an additional medication form must be completed to administer prescription medication during camp hours. Please check with camp staff. Please list medication name, what it is used for, date prescribed and number of times/day. Special Note: If your child carries and EpiPen or inhaler; Smithfield Parks and Recreation Department will require that two are available during camp.

I understand that the Smithfield Parks and Recreation provides no insurance coverage for the campers. By signing below I agree that I have read, understand, and agree to the Smithfield Parks and Recreation Department/SRAC Summer Camp program policies. By signing below, I am acknowledging that my camper is physically capable of participating in camp activities and the information that I have provided on the Camper Information Form is correct.

Release and Indemnity Agreement: I understand that in sports and recreational activities there are incidents of accidents and injury. I allow my child to participate voluntarily in these activities. I have received and read the camp policies agreement and understand its contents. I release and agree to hold harmless the Smithfield Parks and Recreation Department, the Smithfield Recreation and Aquatics Center, and the Town of Smithfield from any claims arising out of injury to my child.

SIGNATURE IS REQUIRED TO COMPLETE THE REGISTRATION PROCESS

Camper Name

Parent/ Guardian Signature