

# TOWN OF CARY PARKS, RECREATION, & CULTURAL RESOURCES CAMPS

**WELCOME!** Please read the following information thoroughly and complete the requested material.

The below sections are pertinent information for the parent/guardian to fill out prior to campers attending a camp program with the Town of Cary. The Town of Cary Parks, Recreation & Cultural Resources Department strives to provide the safest and best possible experience for your camper, therefore the information provided on the following forms will be shared with program staff. Please initial next to each section once you have completed.

**Please print all information.**

CAMPER(S) NAME(S) \_\_\_\_\_

1. \_\_\_\_\_ **Participant Information** (Required Information)
2. \_\_\_\_\_ **Emergency Contact & Release Authorization** (Required Information)  
This section contains information for emergency contacts and authorized individuals to pick-up your camper and phone numbers (someone other than parent or guardian).
3. \_\_\_\_\_ **PARTICIPANT INFORMATION – Medical Information** (Read each section and complete if it pertains to your camper)
  - a. SECTION 1: Please complete this section of the form listing any medical concerns or allergies our staff will need to be made aware of in order to provide the best camp experience for your child.
  - b. SECTION 2: Only complete this section if you are sending any medication with your child to be administered while they are attending camp.
4. \_\_\_\_\_ **Release and Waiver of Liability for Administering Emergency Treatment** (Required Information)  
This form gives permission for staff to administer medical treatment to your camper and gives authorization to transport to a medical facility should the need arise. **One camper per form.**
5. \_\_\_\_\_ **Discipline Policy** (Required Information)  
Please read our discipline policy printed on the last page of this packet. Both parent and camper must sign the section below acknowledging all parties have read/have been read the policy and will adhere to the guidelines.

By signing below, I also acknowledge the following:

- That all information provided on the following forms is accurate and correct;
- That Town of Cary staff will only allow the parent/guardian whose signature appears on the bottom of this form to make changes to these forms;
- For camps with scheduled off-site field trips, your permission is given for your camper(s) to be transported in a Town of Cary or Town approved vehicle driven by a Town of Cary employee or Town contracted service.
- In accordance with the NC Child Passenger Safety Law – G.S. 20-137.1, the Town of Cary will require children who are less than 8 years old to use a child restraint device when being transported in a passenger vehicle excluding a charter coach bus.
- I have been given a copy of the Town of Cary Discipline Policy for participation in the camp programs. I agree to adhere to the guidelines set for participants. These guidelines will be followed, and I understand if they are not, the appropriate discipline procedures will be used. I also understand the guidelines and responsibilities that should be followed by the staff to ensure the safety and entertainment of my child. Any questions or concerns I have will be directed to camp staff, directors, or program supervisors.

Parent/Guardian Name

Parent/Guardian Signature

Date

Parent/Guardian Name

Parent/Guardian Signature

Date

Please Circle Which Type of School Your Child Attends:    Traditional    Year-Round    Track # \_\_\_\_\_  
Modified    Home School

**For Camper Acknowledgement of Discipline Policy:** I have read/been read the guidelines that I should follow while participating in Town of Cary Camp Programs. I am here to have fun and enjoy my time, but if I do not follow the guidelines, I understand that disciplinary action will be taken.

Signature of Camper(s)

Signature of Camper(s)

Updated: April 2015

# TOWN OF CARY PARKS, RECREATION, AND CULTURAL RESOURCES CAMPS

## PARTICIPANT INFORMATION (PLEASE PRINT ALL INFORMATION)

The Town of Cary Parks, Recreation & Cultural Resources Department strives to provide the safest and best possible experience for your camper, therefore the information provided on this form will be shared with program staff.

Multiple campers' information may be written on this form.

Camper(s) Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

## EMERGENCY CONTACT and RELEASE AUTHORIZATION (PLEASE PRINT ALL INFORMATION)

Please list up to four additional names other than the parent/guardian listed above, 16 or older, that are authorized to be contacted in case of an emergency or may pick up your camper.

**Authorized individuals will be required to show a picture ID or have a pick-up card.**

1) Contact Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Emergency Contact       Authorized Pick-Up

Please check the box if you authorize staff to disclose information about the participant's behavior and other activities at camp to the above named person.

2) Contact Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Emergency Contact       Authorized Pick-Up

Please check the box if you authorize staff to disclose information about the participant's behavior and other activities at camp to the above named person.

3) Contact Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Emergency Contact       Authorized Pick-Up

Please check the box if you authorize staff to disclose information about the participant's behavior and other activities at camp to the above named person.

4) Contact Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Emergency Contact       Authorized Pick-Up

Please check the box if you authorize staff to disclose information about the participant's behavior and other activities at camp to the above named person.

**SUNCREEN & BUGSPRAY** For camps with outdoor activities, it is recommended to apply sunscreen and/or bug spray to your camper prior to arriving to camp each day. You may send sunscreen/bug spray with your camper; however they must be able to apply themselves under adult supervision. Sunscreen/bug spray must be labeled with child's name. Campers are not to share these products with other campers. Should conditions warrant, please check YES or NO if you would like for us to supply sunscreen or bug repellent to your child.

**Yes**       **No**

# TOWN OF CARY PARKS, RECREATION, AND CULTURAL RESOURCES CAMPS

## PARTICIPANT INFORMATION – MEDICAL INFORMATION (PLEASE PRINT ALL INFORMATION)

In order for Cary Parks, Recreation & Cultural Resources to provide the safest and best possible experience for your camper, the below information will be shared with program staff as necessary. One camper information per form.

**SECTION 1** NAME OF CAMPER: \_\_\_\_\_

Please list below and make our staff aware of any allergies (food or environmental) or medical concerns so that we may provide the safest environment for your camper. Please include additional information for anything listed below, including special instructions for allergic reactions.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My child has a latex allergy:  **Yes**  **No**

**SECTION 2 ONLY COMPLETE THE BELOW INFORMATION IF YOU ARE SENDING MEDICATION TO CAMP FOR YOUR CHILD (TO INCLUDE EPI-PENS AND INHALERS)**

The Parent/Guardian is responsible for the following with ALL medications:

1. Parent/guardian must transport medication to program site and give directly to program staff.
2. Provide new, labeled containers if/when medication changes are made.
3. Parent/guardian should check to ensure the medication does not exceed the printed expiration date. Program staff will not accept expired medication.
4. Parent/guardian should notify program staff as soon as possible if there are any changes to instructions for the administration of medication once this form has been submitted. A new form may be required.

**For prescription medications:**

1. The pharmacy label will serve as the physician's authorization for the medication to be administered.
2. Medications must be provided in an original container with a visible label including the name of medication, the date of expiration, and clear dosage amount and administration directions with the participant's name CLEARLY INDICATED. Inhalers outside the original package must be accompanied by a copy of the original package label noting the above information.

**For non-prescription medication (e.g. Tylenol, Alka-Seltzer, Pepto-Bismol, etc.):**

1. The medication will be administered according to the below instructions given by the parent/guardian.
2. Only one (1) dosage of non-prescription medication per day may be brought to camp. Medication must be provided in an original container.

PLEASE PRINT ALL INFORMATION

This medication is being given for the following condition(s): \_\_\_\_\_

\_\_\_\_\_

MEDICATION DOSAGE	HOUR GIVEN	DATES TO ADMINISTER
-------------------	------------	---------------------

\_\_\_\_\_

Additional Directions \_\_\_\_\_

\_\_\_\_\_

I authorize Program Staff to administer the above named medication(s) to my child.

Parent/Guardian Name	Parent/Guardian Signature	Date
----------------------	---------------------------	------

# TOWN OF CARY PARKS, RECREATION, AND CULTURAL RESOURCES CAMPS

## RELEASE AND WAIVER OF LIABILITY FOR ADMINISTERING EMERGENCY TREATMENT TO PROGRAM PARTICIPANTS ONE CAMPER PER FORM

This is a **RELEASE AND WAIVER OF LIABILITY FOR ADMINISTERING EMERGENCY TREATMENT TO CHILDREN** (hereinafter, referred to as the "Release") made by and between Town of Cary and

\_\_\_\_\_ residing at \_\_\_\_\_ who

(Parent/Guardian)

(Address)

is the Parent/Guardian of \_\_\_\_\_ (a minor).

(Child's Name)

In consideration of being allowed to participate in a Town of Cary Parks, Recreation, and Cultural Resources Camp or other activity, I the undersigned parent/guardian of the minor named above, acknowledge, appreciate, and agree that:

1. Town of Cary staff may administer treatment or medicine and may contact appropriate medical help for the minor during emergency medical situations.

2. In the event that I cannot be reached in an emergency, I hereby give permission to any licensed physician, surgeon, clinic, or hospital to secure proper treatment, and to order anesthesia, for the minor named above.

3. **THE MINOR IS ALLERGIC TO THE FOLLOWING MEDICATIONS:** \_\_\_\_\_

4. I, for myself and for my heirs, assigns, executors, and administrators agree to release, waive and discharge any legal rights I may have, or that I may assert on behalf of the minor, to seek payment or relief of any kind from the Town of Cary, its officers, employees or agents, for injury, illness, or death resulting from Town of Cary employees or agents administering treatment, administering medicine, or calling or failing to call for medical help for the minor, during emergency medical situations, provided the Town of Cary has used reasonable care.

TOWN OF CARY REPRESENTATIVE

PARENT(S) OR GUARDIAN(S)

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Relationship: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

# TOWN OF CARY PARKS, RECREATION, AND CULTURAL RESOURCES CAMPS

## DISCIPLINE POLICY

Please read our discipline policy below. Both parent and camper must sign the acknowledgment section on the front page of this packet acknowledging all parties have read/have been read the policy and will adhere to the guidelines.

THIS PAGE DOES NOT NEED TO BE RETURNED

The Town of Cary Parks and Recreation Department will follow the guidelines below for Town of Cary Camp Programs:

### Staff Responsibilities

The job of the Camp Staff is to create a fun and safe environment for participants in the program. Participant behavior that is not conducive to this environment or that is destructive to others or property will be dealt with in a professional, positive, and timely manner to correct the behavior. Some of the proper procedures are as follows:

- Discuss behavior problem with the participant.
- Use “time out” technique if inappropriate behavior continues. One minute out per activity per year of age might be a rule of thumb for initial problems. Time out should be done in close proximity to a staff member.
- Discuss the problem with the parents and ask for their input on ways to manage the behavior.
- If the situation does not improve, contact your supervisor for assistance.

### Reinforce positive behavior:

- Use certificates, praise, and privileges to encourage good behavior.
- Learn to talk to participants at eye level. For example, get down on your knees to talk to a small participant.

### Participant Responsibility

It is the responsibility of each participant to follow the guidelines of camp for his/her one safety. Following procedures will ensure a fun and memorable experience. Some examples of guidelines are:

- Follow directions given by camp staff at all times.
- Stay in your assigned area.
- If you leave the assigned area, use the buddy system and always let an adult know where you are.
- Respect others, yourself, and property

### Incident Report Procedures

In the event that a participant does not follow the camp guidelines, an incident report will be written to document and correct behavior.

#### **First incident report**

1. This report is written **only for repeated behavior** by the participant that cannot be corrected by the counselors with time-out or other forms of behavior modifications.
2. A copy of the report will be given to the parent the same day. Incident reports will be discussed privately with parent.
3. A copy of this report will be kept on file in the camp office.

#### **Second incident report**

1. This report should be written if the behavior is repeated or new behavior problems occur by the same participant. This report will follow the same criteria as the first, **but a one or two-day suspension could accompany this report.**
2. A copy of the report will be given to the parent the same day. Incident reports will be discussed privately with parent by a camp director or supervisor.
3. A copy of this report will be kept on file in the camp office.

#### **Third incident report**

1. This report will be completed using the same criteria as the first two. The full-time staff and camp director should write this report.
2. The full-time staff of the camp will give this report to the parent. Incident reports will be discussed privately with parent by a camp director or supervisor. Dismissal from program can occur at this time.
3. A copy of this report will be kept on file in the camp office.

**\*Immediate dismissal from the program can occur at any time given severe circumstances. Refunds for missed days due to a discipline dismissal may not be granted.**