

Welcome

Thank you for choosing Camp Adventures as your summer care provider! It is our goal that each child has a safe, healthy, educational adventure shaped by fun, friends, natural wonder and family values. We will build spirit, mind, and body through indoor and outdoor recreation, field trips, and small group interactions.

Our camps allow children to create wonderful memories and have an incredible camp experience! We encourage personal growth in each child. Throughout the year, your child will make new friends, acquire new skills, feel valued for who they are, and develop a sense of belonging. Our camps are family centered and are facilitated by a nurturing and trained staff. Our staff is caring, respectful, honest, and responsible; in essence, a positive role model for your child!

Acceptable Ages/Groups

Camp Adventures accepts children ages 5 to 13 years old. No child under age 5 will be accepted; similar ages will be grouped together throughout the day. Children ages 10 to 13 who are mature and responsible may be considered for junior counselor positions; these students are considered “leaders” to set examples for younger children. They are NOT the same as adult camp staff members, but will be given age appropriate leadership responsibilities.

Days/Hours of Operation

Camp Adventures’ summer program will begin June 1st; hours will be 6:30AM-5:30PM daily. Camp Adventures’ after school program will operate during the school year; hours will be 3:05-5:30PM daily. Drop in hours will be 6:30-5:30 for holidays, in-services, etc.

All campers must be dropped off by 8:30 AM, unless accompanied by a doctor or dentist excuse. Please contact us if you will be late with an excuse. Unfortunately, we will not be able to accommodate campers’ late drop off on field trip days if we have already left the premises.

All campers must be picked up daily by 5:30. If you are late, a \$5 PER MINUTE charge will be applied to your child’s account. Late fees will be due before the next week of service begins. Please see late pickup policy on page 12 of this handbook.

Closures/Severe Weather

➤ Day before Mardi Gras	February 24 th	Monday
➤ Mardi Gras Day	February 25 th	Tuesday
➤ Good Friday	April 10 th	Friday
➤ Memorial Day	May 25 th	Monday
➤ Fourth of July	July 3 rd	Friday
➤ Labor Day	September 7 th	Monday
➤ Thanksgiving Day	November 26 th	Thursday
➤ Friday after Thanksgiving	November 27 th	Friday
➤ Christmas Holiday	December 24 th 25 th	Thursday, Friday
➤ New Year’s Holiday	December 31 st , January 1 st	Thursday, Friday

Parents are responsible for finding back-up care for their children when Camp Adventures is closed. Closures are subject to change, so please read newsletters and calendars carefully. In the event of an unforeseen emergency (including, but not limited to: inclement weather, power failure, water problems, heating and cooling problems which would affect the safe and reasonable operation of the center), we will notify parents of closure via phone, text, email, radio, or local TV stations. **Camp Adventures will typically follow local public school closures due to inclement weather.**

Attendance

At Camp Adventures, we keep daily attendance records. If your child is not planning to attend on any given day, please notify our staff the day before or morning of the absence through the Remind system.

Arrival/Departure Policy

Parents should park in designated spaces, and walk their child(ren) inside the building to meet their counselor face to face. Please do not allow your child to walk in or out of the building alone during arrival and departure times. Our parking lot will be busy, so please be mindful and aware of children in the parking lot.

Parent cell phone policy

We ask that parents do not use cell phones past the front door during arrival and departure times; these times of day tend to be very busy, and require everyone's full attention (counselor, student, and parent). We also ask that parents use cell phones sparingly in the parking lot, due to safety concerns. Safety and healthy interactions are extremely important parts of our daily routine here at Camp Adventures.

Parents and caregivers are required to sign their child in and out daily with exact times. Students will only be released to those listed on the mastercard; **the person picking up must be 18 years or older**, for everyone's safety. Persons picking up students should have pictured ID ready to show if needed.

Custody issues

All custody issues must be resolved outside of Camp Adventures. If there are any special custody issues, we must have a copy of court documents in your child's file. Excessive problems between custodial and non-custodial parents will be grounds for immediate termination from Camp Adventures.

Afterschool Program

Camp Adventures provides transportation for our after school program; we currently offer after school pickup from Middlebrook Elementary, Katharine Drexel, Green T. Lindon, Ernest Gallet, Billeaud Elementary, and Acadiana Renaissance Charter Academy (ARCA). Students are picked up at school and brought to Camp Adventures. Upon arrival, students will have an afternoon snack then work on their homework. Students will complete their homework before moving on to other activities.

General Financial Policies

- Camp t shirts must be worn **every day**, even on the very first day of camp. Shirts will be available for purchase for \$10 each at parent orientation and throughout the summer.
- Families with multiple children attending will receive a family registration rate, and a \$5 weekly tuition discount will be applied for second and third children enrolled.
- If the entire summer tuition is paid in full by May 22, 2020, a 10% discount will be applied.
- Students may choose up to **TWO** weeks to attend other camps, go on vacations, etc., during our summer semester. These dates **MUST BE** chosen by May 15. During the chosen two weeks, tuition will not be due.
- If dates are not given by orientation, full weekly tuition will be due each week, **regardless of attendance.**
- **Camp Adventures is not a “week by week” attendance option.**

Tuition is payable in advance; be sure to count the amount of FRIDAYS As of May 29, 2020, the only acceptable forms of payment are credit cards or ACH bank draft; checks will be accepted from May 4th to May 31st. Parents will fill out paperwork authorizing Camp Adventures to process the weekly payment.

Payment will be drafted on Fridays for the **upcoming week**. If you choose to use a debit/credit card for payment, there will be a \$3.95 fee each time we process a payment. If you choose to use bank draft/ACH for payment, there is no extra fee. If there is an issue with processing payment, there will be a \$5 charge for every day that tuition is late, with a maximum charge of \$25. After 5 days, services will be terminated for your child if the balance (late fees included) is not paid in full.

There will be a \$30 charge for NSF checks. **After 2 NSF checks are issued, the parent will have to pay with cash or money order.** Anyone who is consistently late with payments risks losing their spot in our program.

You will receive notification of increases in prices and/or tuition no later than 3 months prior to the increase date. **If a child does not pay registration for the upcoming semester, the child’s last day will be determined by management. This date should be about 2 weeks before the semester ends, allowing new incoming students to start at Camp Adventures. Registration fees are non-refundable.**

Missed days

Tuition will not be credited, nor will makeup days be granted for vacation periods given after April 25th (not discussed with management prior to open house), sick days, emergency school closures, sickness, family emergencies, etc.

Payment in case of withdrawal

A two week notice is REQUIRED in writing prior to withdrawing your child from Camp Adventures. The two weeks will begin the day of the notice; for example, if you would like your child to finish on a Friday, please give the two weeks’ notice on a Friday. Once given, the payment will be due in full, the week before the child’s withdrawal date. **If a parent does not give a notice prior to withdrawing, the full two**

weeks tuition will be due, even if the child does not attend. If a two week notice is given after summer tuition has already been paid in full, refunds may be given as appropriate.

Outstanding balances/ Collections

Outstanding balances are due BEFORE a child withdraws from Camp Adventures. In the event of an unpaid balance, Camp Adventures' management will contact the parent in an attempt to collect the balance. If the balance still remains unpaid, **Camp Adventures will turn over the debt to a collection agency; the customer will be held responsible for costs associated with collection efforts.**

Referral Incentive

Word of mouth is our best form of advertising; consequently, we offer a \$50 referral incentive to our families each time a child registers with us because of your recommendation! Incentives are limited to one child per incoming family; for example, you earn \$50 even if two children of the same family register. However, you can earn a \$50 incentive as many times as you want!!

Dress Code

All children should arrive dressed in appropriate, comfortable clothing. **Students are required to wear camp t shirts every day, beginning on the first day of camp.** Students may wear shorts, skirt (with shorts underneath) or pants, depending on the time of year. Please do not send your child in clothes that cannot get dirty; our campers have a great time playing each day; sometimes clothes get dirty. You are more than welcome to send a labeled change of clothes just in case.

Open toed shoes will be allowed at the parent's discretion; tennis shoes are the best option, as campers participate in many physical activities. Campers must wear shoes at all times, unless he/she is swimming or participating in water activities. Please keep in mind that flip flops break very easily; please make sure your child has an extra pair in their bag. On water days, you can send flip flops with your child in their bag if you prefer. Please send your child with their swimsuit **already on** underneath their clothes; don't forget to send a towel and **wet bag** too! Please make sure that ALL clothing is clearly labeled with your child's name.

Sunscreen policy

Much of our activities/field trips at Camp Adventures involve outside time in the mornings, and usually involve being in the sun. It is YOUR responsibility as a parent to know your child's tendency for sunburn upon being in the sun; **please apply sunscreen at home each morning before camp.**

We understand that some children may require reapplication of sunscreen before water activities. Campers in the green and yellow groups will **provide and apply** their own labeled **spray** bottle of sunscreen. Campers in the red and blue groups that **NEED** reapplication have to bring a labeled spray bottle of sunscreen; these campers will have sunscreen sprayed on by a camp counselor. Camp Adventures is not responsible for sunburns; please notify either Mrs. Jonaye or Mrs. Felicia if your child requires reapplication.

Bug spray policy

It is your responsibility to apply bug spray in the morning; Camp Adventures will not reapply bug spray throughout the day.

Meals

A basic morning and afternoon snack will be served daily; these are included in weekly tuition for summer. Campers that eat with us will be served lunch each day; we will have pizza/ sandwiches periodically, as field trips keep us out and about. Children that bring their own lunch daily follow the following guidelines:

- No refrigeration or microwave options will be available; please send your child's food ready to eat in an insulated container, with appropriate utensils, ice packs, and napkins as needed.
- Camp Adventures is a NUT FREE facility; this includes Nutella/cashew/almond/peanut spread, granola bars with peanut butter, Reese's/Butterfinger items inside Lunchables. Any item that violates our nut free policy will be taken away.
- **If your child has a known food allergy, please let staff/administrators know immediately.**

Camp Behavior Expectations

Our staff is comprised of professionals in our field, but please keep in mind that we are not medical professionals, counselors, or therapists; we are not able to provide care beyond our level of training. In the event that a child exhibits or develops any serious physical, physiological, or psychological circumstances that prevent them from adapting to our daily set up, administrative staff will meet with parents to ensure that the child receives the best care possible. The "best care possible for the child" MUST adhere to our daily schedule/routine/ratios. In the event that a child's behavior and/or health needs surpass what Camp Adventures' staff and management can logically accommodate, management reserves the right to protect and uphold the safety of all students and staff members.

Camp Adventures' students will be expected to show positive behavior and character traits. These traits include empathy, kindness, patience, and understanding. Campers will throw their trash away in appropriate containers and eat in designated areas. Most areas of the building will be used for play purposes, but some areas will not be available to students. The office and restroom areas are not intended to be used as play areas; students will know which areas are off limits. Each child is expected to respect the facility, staff, fellow campers/belongings, vehicles, administrators, and overall rules:

- The use of blatant profanity is strictly prohibited. Any word(s) deemed degrading, inappropriate or unsuitable by a teacher or administrator will not be used.
- Aggressive physical behavior towards a fellow camper or teacher such as roughhousing, fighting, hitting, pushing, biting, is absolutely unacceptable, and will not be tolerated.
- Anyone **purposefully** marking, defacing, or destroying anything on Camp Adventures' property (including vehicles used for transportation) will be dealt with swiftly and appropriately. If any part of Camp Adventures is severely damaged by a student, the parents/guardians may be asked to pay for repairs.
- Bullying, in any form, will not be tolerated. Children are encouraged to let staff members/administrators know immediately if this is an issue. Parents, if your child mentions

anything regarding unkind behavior after hours, please reach out the same day via Remind. Open communication is absolutely vital between campers, parents, and staff at Camp Adventures.

Discipline Policy

At Camp Adventures, we believe that discipline is part of the education process. Discipline is about guiding each child to make healthy choices. It is our aim to reinforce acceptable behavior by setting up a safe environment, establishing predictable routines, and offering appropriate praise and active learning. This will help children gain a sense of pride and self-esteem. It will also teach children how to successfully interact with toys, adults and other children:

1. Children will be given an age appropriate “time out.” If needed, a staff member will fill out a “behavior sheet” to send home with parents to help address negative behaviors. If the behavior continues, the child is sent to the Director to evaluate the problem.
2. If the issue is not solved with the Director, the next step is parental notification. If the behavior is not resolved after notifying the parents, the parents will be called again, but this time to pick up the child within **ONE HOUR**. If a child has to be picked up for behavior three times, termination of care will occur the third time.
3. During a timeout, the child is asked to sit out of the ongoing activity one minute per year of age, but always in the teacher’s view. No child will sit in a corner facing the wall; no child will be subjected to verbal abuse or threats.
4. Physical or corporal punishment including , but not limited to yelling, slapping, spanking, yanking, shaking, pinching, exposure to extreme temperatures or other measures producing physical pain, putting anything in the mouth of a child, requiring a child to exercise, or placing a child in an uncomfortable position, will not be used at Camp Adventures.
5. Verbal abuse, including, but not limited to using offensive or profane language, telling a child to “shut up”, or making derogatory remarks regarding children and/or their parents in the presence of other children, will not be used at Camp Adventures.
6. Any threat of a prohibited action, even if there is no intent to follow through with the threat, will not be used at Camp Adventures.
7. No child will be allowed to bully another child.
8. No child or group of children will be allowed to discipline another child.
9. If a child is removed from the group for disciplinary reasons, he/she will never be out of a staff member’s sight.
10. No child will be deprived of meals or any part of a meal for disciplinary reasons.

At Camp Adventures, **we do not endorse or allow hitting back ‘on purpose’**. We teach the children to speak to an adult about a problem so that the adult may handle it. We will enforce the following steps regarding discipline

If you have spoken to your child’s teacher and the problem is not resolved, please speak to the Director and/or owner. We will do our best to resolve all issues in a timely manner. Thank you for your support and understanding.

In the event that a child’s behavior is out of the ordinary, or if a child causes harm to a fellow classmate, BOTH parents will be notified while maintaining **confidentiality**. Both parents will sign forms associated with the behavior/incident. In the event that multiple incident reports are filed for a specific, persistent behavior, the management of Camp Adventures will contact the parent to discuss further options to collectively try to fix the

behavior. Any negative behavior that remains unresolved after talking to the student and parents, even if it seems minor, can be grounds for dismissal/termination of care. Termination of care is a last resort, and can happen either gradually or **suddenly**, depending on the severity of the situation/behavior.

Health and Safety Policy

Your child's health and safety are of the utmost importance to the counselors and staff. Upon daily arrival, your child will have a health inspection. If any time during the day your child shows signs of illness, the Director will isolate him or her immediately and contact you to pick up your child. If your child has any bumps/bruises/sores/wounds from the weekend or night before, please notify your child's counselor.

Parental contact/pickup regarding sickness

If a staff member/management person contacts you via Remind or phone call regarding sickness, you **MUST** respond to Camp Adventures within 30 minutes. If a child needs to go home due to sickness, parents **MUST** make arrangements for pickup **WITHIN ONE HOUR** of the initial Remind message/phone call.

- If a parent does not respond to Camp Adventures regarding sickness within 30 minutes, management will contact persons on the emergency contact list for pickup.
- If persons on the emergency contact list either do not answer, or are unable to pick up the child (in the given time frame), management will contact persons on the regular pickup list next.

In the event that **all** above requirements are not met, Camp Adventures' management will contact local authorities and/or Child Protective Services for child pickup.

Fever

We provide IMMEDIATE parental notification when a child runs an axillary fever of 100.0 or higher. I realize that this may be an inconvenience, however, please remember that we are not medical professionals. We do not "diagnose" whether a fever is due to ear infection, etc. Once a child's temperature exceeds 99.9 degrees, the child must go home, and cannot return until he or she is fever free for 24 hours UNMEDICATED.

Vomiting/Diarrhea

If a child vomits more than once during the day, or has 2 loose bowel movements in one day, Camp Adventures' management will contact the parent to pick up their child.

Please keep your child home if he or she:

- ❖ Has a fever or has had a fever of 100.0 or higher within the last 24 hours WITHOUT medication
- ❖ Is on their first day of medication for pink eye
- ❖ Has vomited within the last 24 hours
- ❖ Has heavy nasal discharge
- ❖ Has an unexplained rash
 - ❖ Your child may return to Camp Adventures with a note from a physician stating that the rash is not contagious
- ❖ Has a constant or barking cough (croup)
- ❖ Has any symptom of a possible contagious disease
- ❖ Has lice, nits, or eggs

*Camp Adventures follows health department guidelines for all other illnesses. **A child in attendance must be able to participate in daily activities, unless a doctor's note validates exclusions.***

Medication

Camp Adventures' management will **only** administer medication that is **prescribed** to be given **3 or more times per day**. Medicine is only given at 12:00 and 4:00. Medications must adhere to the following procedures:

- ❖ Medicines **MUST** be in the original container
- ❖ Medicines cannot be expired
- ❖ Parents must complete and sign a medication administration form **daily**
- ❖ Parents must provide a side effects sheet for each medication
- ❖ **Over the counter medicine MUST have a physician's authorization on the bottle with the child's name, dosage, and strength of medicine on the pharmacy label. Siblings are not allowed to share medicine; each child should have his or her own bottle with their name on it.**
- ❖ Measuring spoons/syringes must accompany the medicine
- ❖ ALL medicines must be brought home daily
- ❖ Epi pens should have doctor's orders and cannot be expired
- ❖ Written authorization from a medical professional must be **CURRENT**, within the last 30 days, to be accepted for dispensing.

Do not place medicine in bags; please give it to someone in management each morning. If your child's medication is time sensitive, please let us know, as field trips/schedules need to be taken into consideration.

If your child has a chronic illness such as asthma, diabetes, food/environmental allergies, blood disorders, heart conditions, seizures, etc, please let an administrator know at sign up/orientation, and at the start of camp.

Incident/Accidents Policy

Our staff is trained to document **major** incidents/injuries/accidents. Our counselors will give the child necessary care and fill out an incident form with the details. Administrators will notify parents via the REMIND app, or a direct phone call if necessary. Parents will be contacted in a timely manner, depending on the severity of the situation. Parents will be required to sign incident reports daily as needed.

Parents will be notified immediately for the following reasons:

- ❖ **Fever of 100.0 or above**
- ❖ **Blood not contained in a Bandaid**
- ❖ **Head injury**
- ❖ **Impaled object**
- ❖ **Broken or dislodged teeth**
- ❖ **Any injury requiring professional medical attention**

Felicia Stephens, owner of Camp Adventures, is a certified instructor through the Red Cross for CPR and First Aid. Lead staff members will be trained in CPR/First Aid as part of their orientation. For critical injuries, we will immediately call 911 **before** contacting the parents. If the parent is not available, we will call the emergency contacts listed on the Mastercard. **Camp Adventures, LLC will not be held financially responsible if professional medical services are needed.** All children at Camp Adventures will have a parent's signed emergency treatment consent form. It is important to keep this form up to date with contact numbers and personal information. Please notify the counselor and/or Director if you will be out of town; let them know who will be responsible for your child.

Field Trips

Field trips are an extremely fun part of our weekly activities at Camp Adventures! Field trips are a privilege, not a camper's right. If a child's behavior is not deemed suitable to attend a field trip, he or she may not be able to participate, and will be asked to remain home for the field trip portion of that day. If you choose to withhold a field trip from your child for discipline purposes, your child will have to stay home for the field trip portion of the day. Campers will not be allowed to "stay behind" at Camp, and join another group color during the time of the field trip. To avoid these moments, it is extremely important that your child understands the importance of following ALL instructions given by our staff!

Camp Adventures provides field trip transportation for summer. All bus drivers are employed by Camp Adventures, and have a Class B CDL license with both school bus and passenger endorsements. The drivers also have a valid medical card. Each driver has been trained on transportation requirements; it is Camp Adventures' policy that drivers do not exit the vehicle while children are inside. Finally, the drivers will complete a documented visual check of each vehicle before exiting and locking the vehicle. This visual check includes checking underneath seats. Counselors will be present on each vehicle, in addition to the driver. On our vehicles, each child is expected to remain seated, buckled as necessary, and face forward while traveling.

During our summer semester, campers will swim (weather permitting) at Crawfish Aquatics. Parents will have to sign a separate authorization form for Crawfish Aquatics. During the first pool trip each summer, EVERY camper will have to conduct a safety swim test given by Crawfish Aquatics' lifeguards. This test will determine swimming ability; each child will be given a wristband (splash pad only, 3-4 feet only-floaties if needed, and all access). Children are allowed to bring/wear LABELED floaties, but Camp Adventures is not responsible for lost floaties. Children will be grouped according to their ability, and will only be able to utilize areas of the pool deemed appropriate by the lifeguards. Campers are welcome to retest throughout the summer as abilities change. ☺ Please remind your child to walk, not run around the pool, and don't forget the wet bag on water activity days!

REMIND System

At Camp Adventures, we use the REMIND system to communicate with parents each day for incidents, pictures, and general updates. The REMIND system is a text based app that allows us to message all parents either individually, or all at once, yet each parent can respond individually instead of a "group text" format. If you need immediate assistance, please call us. **It is each parent's responsibility to keep contact information up to date.** Children will not be able to use the phone at Camp Adventures; it is strictly for incoming calls, and staff/administrator calls.

Items brought from Home

Below, you will find a list of items that are ok to bring; however, some items that are prohibited. Please use your discretion when sending items to Camp Adventures with your child. If it is sentimental, important, or expensive, it may not be a good idea to send it with your child, especially younger children. Camp Adventures will not be responsible for damaged or lost items. Please note that electronics will only be used during specified times of the day. **Your child will not be allowed to play on electronics at his/her leisure;** our days are full of fun activities that do not involve electronics. ☺ Camp Adventures' staff will NOT provide the wifi password to students for their electronics.

Items that are allowed:

Nintendo DS, Nintendo Switch, action figures, playing cards, dolls, age appropriate books, coloring books, recreational balls (football, soccer), board games, etc are allowed, but not necessary.

Please make sure that EVERYTHING brought into Camp Adventures is labeled with your child's initials.

Prohibited items include, but are not limited to permanent markers, crafting supplies, trading cards (no trading will be allowed), nail polish, gum/candy, CELL PHONES, Smart Watches (no texting) cameras (no pictures), computers, anything that depicts violence, motorized items (scooters, hoverboards), tablets, Kindles, and Ipods/Ipads.

If your child brings anything on the prohibited list to Camp Adventures, it will be immediately taken away, and will be available during pickup at the end of the day. A staff member may take away an object, even if it is not listed as prohibited, for reasons including safety hazards, conflicts over the object, possibility of damage to property, or any reason a staff member decides upon.

No child will be allowed to have a cell phone or other communication device while on Camp Adventures' property, including Smart Watches. If your child is found using such an object, it can be grounds for immediate termination of care. If your child has to have a cell phone due to parental custody exchanges, etc., please let a staff member know. The cell phone must be turned off; we can keep the cell phone safe in our office until pickup time. Thanks for understanding this policy.

***Camp Adventures will supply an Xbox gaming system and games as an electronic option.**

All games played on the Xbox will be rated "E" for everyone.*

Lost and Found

If you notice that an item is missing, please let a staff member know immediately. We will do our best to locate lost items; please remember that **Camp Adventures is not responsible for lost, stolen, or damaged items.** Everything brought into the building should be clearly labeled with your child's name. It may be beneficial to send your child with a small book sack of some sort to keep lunches, toys, towels, extra clothes, games, devices, etc together. If you are concerned about an item, please do not send it to Camp Adventures.

Mandated Reporting

At Camp Adventures, we value the health and safety of your child. Consequently, if any counselor or staff member has cause to believe that a child's physical, mental health or welfare is affected by abuse or neglect, she will file a report with the local Child Protection Agency. This is in accordance with LA R.S. 14:403. This is a law in the state of Louisiana, as employees are considered "mandated reporters." The number to report child abuse/ neglect is 1-855-452-5437.

Non-Discriminatory Policy:

In accordance with Federal law and U.S. Department of Agriculture policy, Camp Adventures, LLC, shall not discriminate on the basis of race, color, creed, sex, and national origin, handicapping conditions, or ancestry. Any person(s) alleging discrimination has a right to file a complaint within 180 days of the alleged actions. All civil rights complaints, either written or verbal, should be forwarded to:

USDA

Director, Office of Civil Rights

Room 326-W Whitten Building

1400 Independence Avenue, S.W.

Washington, D.C. 20250-9410

Call (202)720-5964 (voice and TDD)

The complaint should include the name, address, and telephone number of the person filing the complaint, the specific location and name of entity for whom the complaint is against, and the nature of the incident or action that led the complainant to feel discrimination was a factor, the basis on which the complainant feels the discrimination exists, and the date, names, titles, and business addresses of persons who may have knowledge of the discriminatory actions.

The USDA is an equal opportunity provider and employer

Camp Adventures, LLC

105 Medical Park Dr.

Lafayette, LA 70508

Important Policies:

Late pickup policy

If a child is not picked up 5:30 PM, there will be an overtime charge of **\$5.00 per minute UNTIL the child is picked up from the center**. Consistent tardiness will be cause for withdrawal of care without prior notice, or without refund. If a staff member/management person contacts you at 5:30 via Remind or phone call regarding late pickup, you **MUST** respond to Camp Adventures within 15 minutes to give notice of the anticipated pick up time.

- If a parent does not respond to Camp Adventures regarding late pickup by 6:00 pm, management will contact persons on the emergency contact list for pickup.
- If persons on the emergency contact list either do not answer, or are unable to pick up the child **WITH AN APPROPRIATE CARSEAT** by 6:30 pm, management will contact persons on the regular pickup list next.
- In the event that **all** above requirements are not met, Camp Adventures management will contact local authorities and/or Child Protective Services for child pickup promptly at 6:30 pm.

If you think you will be late due to unforeseen circumstances, please notify Camp Adventures ASAP

Parental Access Policy/ Parental Involvement Policy

At Camp Adventures, we have an open door policy for our parents; you are always welcome! All parents with an enrolled child may come at any time, without prior notification, to visit or observe their child, or speak with the Director. Please check in at the office and the Director will assist you.

Court Orders affecting Enrolled Children

If the court issues an order concerning your child, you **MUST** provide Camp Adventures a copy of the order to retain in your child's file. If a court order regarding child custody excludes one of the legal parents/guardians, you must provide a copy of the custody papers to the Director at Camp Adventures.

Confidentiality Policy/ Disclosure of Information Policy

Children's records are available to the management **ONLY** at Camp Adventures. Regarding incidents, children's names are kept confidential. Regarding incidents, Camp Adventures' staff are not allowed to tell parents a child's name, gender, group color, or frequency of occurrence.

Parent Code of Conduct

At Camp Adventures, it is our responsibility to provide your child with a happy, safe, and secure environment. In order to provide this to your child, we require parent/guardian's cooperation. We strictly prohibit all swearing/ cursing, and threatening of staff, parents, or children. Quarreling with other parents or staff members is not allowed. We also ask that parents refrain from smoking or carrying a firearm on Camp Adventures' property. If any of these policies are violated, your child will be dismissed from care at Camp Adventures without any warning or tuition reimbursement.

Emergency Evacuation Procedure:

In the event of an emergency, all teachers and staff will take a number of children in their cars and report to **Foundations Church, located at 209 Southpark Road, Suite B, Lafayette, LA 70508**. We will all leave together and follow each other. The Director will bring the Master Binder with all phone numbers, and will contact each parent for pickup via text messaging.

Camp Adventures Child Biography

Child's name: _____ Nickname: _____

Does your child have any brothers and/or sister? If so, what are their sex/ages? _____

Are there any restrictions regarding play or activities? _____

Any speech/hearing/vision problems? _____

Is your child prone to any illness (headaches, tummy aches, etc)? _____

What do you expect from summer camp? _____

How did you hear about Camp Adventures? _____

Has your child ever been asked to leave a childcare facility/daycare/summer camp, etc., due to behavior? If yes, please explain: _____

Developmental

Does your child have any physiological/psychological delays or disorders that his/her teacher should know about (speech delay, autism, ODD, sensory processing, etc.)? If yes, please explain:

If your child has a delay/disorder, is he/she enrolled in a therapy program? If yes, please explain: _____

Date

Parent/guardian signature

Camp Adventures Student Application

Child's name: _____

Birthday: _____ Age: _____ Sex: _____

Address: _____ City: _____ State: _____ Zip: _____

Allergies: _____

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

Address: _____ Address: _____

Work #: _____ Work #: _____

Cell #: _____ Cell #: _____

Email address: _____ Email address: _____

Child is currently living with: (circle one) Mother Father Both parents Other

If other, please explain: _____

Name of guardian: _____

Address: _____

Work #: _____ Cell #: _____

Important Information: Please sign next to each statement

Did you receive and read through the admissions policies? _____

I acknowledge Camp Adventures' policy regarding parental contact and pickup in regards to sickness/incidents/behavior issues. I understand that I must respond to Camp Adventures within 30 minutes of notice, and that my child must be picked up within **ONE HOUR** of the first correspondence. If I cannot pickup my child within the hour time frame, I will make arrangements for my child to be picked up by someone either on the pickup list, or someone that I authorize for pickup in writing. I acknowledge that if I do not make a concerted effort to pick up my child within the allotted time frame, Camp Adventures reserves the right to contact local authorities/child protective services. _____

I acknowledge Camp Adventures' policy regarding parental contact and pickup in regards to late pickup. I understand that I must respond to Camp Adventures within 15 minutes of notice (by 5:45 pm), and that my child must be picked up within **45 minutes** of the first correspondence (by 6:15 pm). If I cannot pickup my child, I will IMMEDIATELY make arrangements for my child to be picked up by someone either on the pickup list, or someone that I authorize for pickup in writing. I acknowledge that if I do not make a concerted effort to pick up my child by 6:15 pm, Camp Adventures reserves the right to contact local authorities/child protective services. _____

Are you aware that we use a video monitoring system (for management purposes only) at Camp Adventures? _____

Are you aware that the registration fee is due before your first day at Camp Adventures? _____

Are you aware that tuition and registration fees are non-refundable? _____

Are you aware that weekly tuition will be drafted on Fridays for the upcoming week, REGARDLESS of attendance? This includes sickness, vacations, family emergencies, etc.? The only exceptions are dates given before May 15.

Are you aware that you are required to give management a two week notice **IN WRITING** prior to withdrawing your child from Camp Adventures? The two weeks will begin the day the notice is given, and will run through the applicable day of the week, two weeks later. For example, Tuesday through Tuesday. Daily rates may be charged during the last 2 or 3 days, depending on the day of the week? _____

If a two week notice is not given prior to withdrawal, I acknowledge that I will be held financially responsible for the two weeks tuition, even if my child does not attend Camp Adventures the last two weeks. _____

I acknowledge that any outstanding balance must be zeroed out prior to my child's last week of attendance at Camp Adventures, and that an unpaid balance will be turned over to a collection agency. I also acknowledge that I will be held responsible for any fees associated with the collections process. _____

My child, _____ will require sunscreen application before water activities. I grant permission to Camp Adventures' staff to apply **aerosol** sunscreen spray to my child. I understand that it is my responsibility to supply these items if they are needed. _____

I authorize Camp Adventures to contact me via texting, phone, or email for reminders, illness/incidents, emergencies, closure info, etc. I understand that it is my responsibility to ensure that my contact information is up to date. _____

I acknowledge that on occasion, a maximum rating of PG programming for movies may be shown to my child. I authorize my child to view PG movies. _____

I authorize my child, _____ to attend ALL field trips with Camp Adventures, LLC during summer 2020. _____

I hereby authorize Camp Adventures, LLC, to care for my child during the time he or she is in the facility. I authorize Camp Adventures, LLC, to secure emergency medical care for my child if the Director is unable to reach me by phone. I also certify that all the information provided on this application is true and correct.

Date

Parent/ guardian signature

Date

Director's signature

Camp Adventures, LLC

Child Pick-up Release Form

I, _____ authorize the following persons below to pick up my child, _____, from Camp Adventures.

I realize that my child will NOT be released to a person whose name is not listed below. _____

If I want to add and/or remove anyone from this list, it must be changed with **WRITTEN** notification from me, not verbal notification. _____

If a staff member at Camp Adventures does not recognize the person coming to pick up my child, that person will be required to show a picture id for verification purposes. _____

I acknowledge that anyone that picks up my child MUST be age 18 or over. _____

Name	Phone number	Relationship
Employee of Camp Adventures		Employee

Date

Parent/guardian signature

Camp Adventures, LLC Transportation Agreement

I give permission for my child, _____ to ride in Camp Adventures' vehicle. This pertains to all field trips, and in an emergency situation.

- The vehicle provided by Camp Adventures will be driven an adult staff member.
- An adult staff member will be present at all times when children are in the van.
- Each child will be seated in a child restraint system.
- In case of conflict between this agreement and any such notices, this agreement will prevail.
- In case of an emergency at the center, children will be transported to Foundations Church, located at 209 Southpark Road, Suite B, Lafayette, LA 70508.

As a parent/ guardian with custody and control of my child, I give permission for my child to ride in the vehicle provided for field trips, or in the event of an emergency. The child in this agreement will be transported to and from Camp Adventures.

Date

Parent/guardian's signature

Director's signature

Camp Adventures Photography Waiver

From time to time, I may take photos of the children during the day. Please indicate below if you give permission for your child's photo to be taken and/or shared.

For personal use:

_____ I give permission for my child's photo to be taken and sent to me.

_____ Please do not take any photos of my child.

Sharing with other parents:

(if two children are both shown in a photo I would send it to both parents)

_____ I give permission for my child's photos to be taken and sent to other parents, if their child is also in the photo.

_____ I give permission to share photos with other parents only if my child's face is not shown.

_____ Please do not share any photos of my child.

Website:

_____ I give permission for my child's photos to be used on the camp website or advertising.

_____ I give permission for photos of my child to be used in advertising, only if their face is not shown.

_____ Please do not use any photos of my child on the website or advertising.

Child's name

Parent's signature

Date

Acknowledgments: Please initial below

___ Operating hours are from 6:30AM-5:30PM.

___ Tuition is due every Monday by 5:30; a late fee of \$5 per day will be applied starting on Tuesday morning. If tuition is not paid in full, with late fees included by Monday morning, the child cannot attend the following week.

___ There will be a late fee of \$5 per minute charged after 5:30PM.

___ Morning snack is served at 8:30, lunch is served at 11:30; afternoon snack is served at 2:30.

___ During the hours of 8:30-2:00, no students are allowed to be dropped off, unless accompanied by a current doctor's excuse.

___ Anytime LPSS schools are closed due to weather conditions, Camp Adventures will likely close as well.

___ I acknowledge that Camp Adventures does not dispense over the counter medication, unless it is prescribed by a doctor. I have read Camp Adventures' policy on prescribed medication.

___ Any food brought in must be store bought and free of nuts.

___ Only those persons listed on the pickup form will be allowed to leave with my child; Camp Adventures will NOT accept authorizations for pick up over the phone.

___ Tuition and registration fees are non-refundable.

___ I acknowledge that my child will be participating in outside activities that involve being in the sun. I understand that my child may develop a sunburn due to outside activities; Camp Adventures is NOT responsible for sunburns.

___ In the event of an emergency for my child, Camp Adventures will call 911. Camp Adventures will not be held responsible for medical bills incurred. I understand and acknowledge that activities like sports activities, swimming, playing outside, etc., have an increased risk of injury. I will not hold Camp Adventures, or any staff member liable, in the event of an accident. I understand that Camp Adventures reserves the right to alter the daily schedule, field trip schedule, or monthly field trip schedule without notice if unexpected circumstances arise. I understand that Camp Adventures is not responsible for clothing or personal items that are lost or damaged.

___ I must **print** my first and last name, and notate exact times during pick up and drop off times.

___ I understand that correct behavior is a requirement for continued attendance; I have read Camp Adventures' behavior expectations and discipline policy. I will support Camp Adventures' management in enforcing these rules, policies, and procedures.

_____ Date	_____ Parent/guardian's signature	_____ Director's signature
___ Completed Admissions Policy	___ Orientation attendance	___ additional T-shirt purchase (if needed)
___ 2 Extra set of clothes (please label each)	___ Registration fee	

Please check off ONE option per category:

My child, _____

_____ will attend Camp Adventures all summer long with no missed weeks (full tuition due).

_____ will attend Camp Adventures all summer, except for the following two weeks:

Week 1 _____ Week 2 _____

_____ will attend Camp Adventures on specific days/weeks only, as per custody agreements. I acknowledge that the days/weeks listed below are set for the summer, and are not flexible:

My child will attend part time during the following summer week options **ONLY**, at an elevated rate (check all that apply):

_____ May 26th-May 29th at a rate of \$150 for the week

_____ June 29th – July 2nd AND July 6th-10th at a rate of \$300 for the two weeks

_____ August 3rd-7th at a rate of \$150 for the week

I would like to pay for tuition:

_____ On a weekly basis, drafted on Fridays for the **upcoming week**. If you choose to use a debit/credit card for payment, there will be a \$3.95 fee each time we process a payment. If you choose to use bank draft/ACH for payment, there is no extra fee.

_____ In full (10% discount will be applied).

I plan to start care at Camp Adventures on _____; I anticipate my last day at Camp Adventures will be _____.

My **TYPICAL** drop off time will be _____; my **TYPICAL** pick up time will be _____.

My child, _____ attends _____ school.

_____ I am NOT interested in BEFORE CARE for the 2020-2021 school year.

_____ I am NOT interested in AFTER CARE for the 2020-2021 school year.

_____ I am possibly interested in BEFORE CARE for the 2020-2021 school year.

_____ I am possibly interested in AFTER CARE for the 2020-2021 school year.

Parent's signature

Date



Event Name: Camp Adventures Summer Camp

Release of Liability & Waiver: Child Participant

I am the parent/guardian of the participant(s) identified herein and enrolled in a swimming program or event with Crawfish Aquatics. I acknowledge and understand that swimming is a hazardous activity and that there are risks inherent in the sport of swimming, including but not limited to drowning, fatigue, paralyzing injury and death.

I acknowledge that the participant(s) may participate in swimming activities at Crawfish Aquatics. I hereby agree to indemnify and hold harmless Crawfish Aquatics, its management, directors and agents, members, associates and employees against any and all liability for any injury that may occur to the participant(s) while present at Crawfish Aquatics or participating in a swimming program, regardless of the cause of the injury or damage. I also hereby agree to indemnify Crawfish Aquatics, its management, directors and agents, members, associates and employees against any damages arising from any injury, property damage, claim, demand, action or cause of action by or on behalf of the participant(s) while on the premises of Crawfish Aquatics, regardless of the cause of the injury or damage.

I agree to and hereby authorize any representative of Crawfish Aquatics to have the participant(s) treated in the event of any medical emergency which may arise and will pay all costs associated with any medical care and transportation for the participant(s).

Child's Name: _____

Parent Guardian Name: _____

Signature: _____

WAIVER AND AGREEMENT FOR ARBITRATION

Camp Adventures, L.L.C., Participant Agreement, Release and Assumption of Risk (requiring mutual ARBITRATION): For participants under age of 18, the information below must be completed by the parent, custodian or legal guardian.

In consideration for gaining access to 105 Medical Park Drive, Lafayette, LA 70508 (the "Location") and engaging the services of Camp Adventures, L.L.C., and engaging the services of its agents, owners, officers, directors, representatives, assigns affiliates, volunteers, participants, employees, suppliers, vendors, insurers, and all other persons or entities acting in any capacity on its behalf, "I on behalf of myself, my spouse, my minor child(ren), my parents, my heirs, assigns, personal representatives, estate, and insurers, agree as follows:

ASSUMPTION OF RISK: I acknowledge that my participation in or viewing of all Camp Adventures, L.L.C. activities, including, but not limited to, fun jumps and activities, at Camp Adventures, L.L.C.'s premises, entails known and unanticipated risks that could result in physical or emotional injury including, but not limited to broken bones, sprained or torn ligaments, paralysis, death, or other bodily injury or property damage to myself, my child(ren), minor participant(s) listed below, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. I agree and promise to accept and assume all of the risks existing in this activity and all obligations to protect myself and/or any minor child under my supervision against personal injury. My and/or my minor child(ren)'s participation in this activity is purely voluntary, and I elect to participate, in spite of the risks. If I and/or my child(ren) are injured, I acknowledge that I or my child(ren) may require medical assistance, which I acknowledge will be at my own expense or the expenses of my personal insurer(s). I hereby represent and affirm that I have adequate and appropriate insurance to provide coverage for such medical expense.

[] I Agree to the terms and provisions contained in the **Assumption of Risk** paragraph above.

ARBITRATION: I acknowledge that any dispute arising out of the participation at the Location or engaging in any of the services of Camp Adventures, L.L.C. by myself, my spouse, my minor child(ren), my parents, my heirs, assigns, and/or personal representatives, shall and must be settled by **BINDING ARBITRATION**. I further acknowledge and agree that I am waiving, on behalf of myself and my spouse, my minor child(ren), my parents, my heirs, assigns, and/or personal representatives, any and all rights to proceed in court of law with any claims that I might be entitled to assert, now or in the future against Camp Adventures, L.L.C.. This provision is mutual. I acknowledge that I have the right to refuse to sign this Agreement, that participating in all Camp Adventures, L.L.C. activities, including, but not limited to fun jumps and Camp Adventures, L.L.C. activities, on Camp Adventures, L.L.C.'s premises, is purely voluntary and a recreational activity, and activities, at Camp Adventures, L.L.C.'s premises, is purely voluntary and a recreational activity, and that Camp Adventures, L.L.C. has the right to refuse to allow me and/or any of my minor child(ren) to participate at any Camp Adventures, L.L.C. facility if I do not sign this Agreement. I, on behalf of myself and/or my minor child(ren), hereby agree that arbitration shall be initiated within one year of the date of any event giving rise to the need for arbitration, and that any and all disputes will be determined by binding

arbitration before one arbitrator to be administered by JAMS pursuant to its Comprehensive Arbitration Rules and Procedures and Policy on Consumer Minimum Standards Procedural Fairness. I further agree that arbitration will take place solely in the Parish of Lafayette, State of Louisiana, and that the substantive law of Louisiana shall apply to the claim and/or dispute. Notwithstanding the provision with respect to the application substantive law, any arbitration conducted pursuant to the terms of this Agreement shall be governed by the Federal Arbitration Act (9 U.S.C., Secs. 1 - 16). The arbitrator, and not any federal, state, or local court or agency, shall have exclusive authority to resolve any dispute relating to the interpretation, applicability, enforceability or formation of this Agreement. If a JAMS arbitrator is not present in Louisiana or cannot travel to Louisiana, then arbitration shall proceed with an arbitrator that is mutually agreeable to myself and Camp Adventures, L.L.C. or our respective attorneys (or if no agreement can be made, then by an arbitrator appointed by a court of competent jurisdiction following a motion or petition to appoint an arbitrator). If, despite the representation made in this Agreement, I or anyone on behalf of myself and/or my minor child(ren) file or otherwise initiate a lawsuit against Camp Adventures, L.L.C. for any purpose other than to name an arbitrator, in addition to my agreement to defend and indemnify Camp Adventures, L.L.C., I agree to pay and reimburse Camp Adventures, L.L.C. for any and all costs incurred by Camp Adventures, L.L.C. in enforcing the arbitration provisions of this Agreement, including by not limited to attorneys' fees and court costs. I further agree that both Camp Adventures, L.L.C. and I shall resolve any claims or disputes solely on an individual basis and shall not be entitled to join or consolidate claims or disputes as a class action, mass tort, representative action, collective action private attorney-general action, or any proceeding in which Camp Adventures, L.L.C. or I act in a representative capacity. This agreement does not permit class arbitrations event if the Rules and Procedures of JAMS would.

[] I Agree to the terms and provisions contained in the **ARBRITRATION** paragraph above.

RELEASE OF LIABILITY: In consideration for allowing me and my minor child(ren) identified herein to participate in all Camp Adventures, L.L.C. activities, including but not limited to, fun jumps and activities, at Camp Adventures, L.L.C. premises, I expressly and voluntarily agree to forever release, acquit, indemnify and discharge Camp Adventures, L.L.C. and agree to hold Camp Adventures, L.L.C. harmless on behalf of myself, my spouse, my minor child(ren), my parents, my guardians, and my heirs, assigns, personal representatives, estate, and insurers, and any and all other persons and entities who could, in any way, represent me or the minor child(ren) identified herein or to act on our respective behalves, from any and all actions or omission(s), cause or causes of action, suit, debts, damages, judgment, costs, including, but not limited to, attorney's fees, and claims and demands whatsoever, in law or in equity, for any personal injury, death or property damage that I and/or the minor child(ren) identified herein may suffer or incur arising from my and/or minor child(ren)'s use of all Camp Adventures, L.L.C. activities, including, but not limited to, fun jumps and activities, at Camp Adventures, L.L.C.'s premises. This waiver is intended to be a complete release of any and all responsibility or duties owed by Camp Adventures, L.L.C. as indemnities for personal injuries, death, and/or personal loss/damages sustained by myself or any of my minor child(ren) identified herein while on Camp Adventures, L.L.C.'s premises, or with respect to Camp Adventures, L.L.C. activities, whether using Camp Adventures, L.L.C. equipment or not, even if such injury or damage results from Camp Adventures, L.L.C.'s negligence, Camp Adventures, L.L.C. employee negligence,

improper supervision, improper maintenance of Camp Adventures, L.L.C. equipment or premises or negligence by other Camp Adventures, L.L.C. guests.

☐ I Agree to the terms and provisions contained in the **Release of Liability** paragraph above.

WARRANTIES: I certify that I have consulted my physician and/or my child(ren)'s pediatrician(s) regarding recreational participation in all Camp Adventures, L.L.C. activities, including, but not limited to fun jumps and activities, at Camp Adventures, L.L.C.'s premises. As a result of such medical consultation, I hereby certify that I am and/or my child(ren) are physically able to participate in all activities at the Location without aid or assistance. I further certify that I am willing to assume the risk of any medical or physical condition that I and/or my child(ren) may have. I acknowledge that I have reviewed the rules (the "Camp Adventures, L.L.C. Rules") governing, my and/or my minor child(ren)'s participation in any activities at the Location. I certify that I have explained the Camp Adventures, L.L.C. Rules to the minor child(ren) identified herein. I understand that the Camp Adventures, L.L.C. Rules have been implemented for the safety of all guests at the Location, including myself and/or my minor child(ren). I acknowledge that failure to follow the rules could result in the expulsion of myself and/or my minor child(ren) from the Location. I agree that, if any portion of this Agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect. In addition to the acknowledgments stated above, and purely to reiterate some, but not all, of the assumptions stated above, for emphasis, I acknowledge: (i) Camp Adventures, L.L.C. has warned me that the recreational opportunities and facilities offered by Camp Adventures, L.L.C. to myself and all minor children under my care and supervision are not offered for purposes beyond those explained in the Camp Adventures, L.L.C.'s rules presented to me, (ii) that I have assumed a duty of care to protect against injury to all persons under my care and supervision (such that Camp Adventures, L.L.C. owes no duty of care to protect against my personal injury or any personal injury to any minor child under my care or supervision), and (iii) that I, and not Camp Adventures, L.L.C., shall be legally responsible and liable for any injury to person or property caused by negligence of any Camp Adventures, L.L.C. invitee or any visible or non-visible any defect in the Camp Adventures, L.L.C. facilities.

☐ I Agree to, and confirm, the **WARRANTIES** paragraph above.

PHOTO RELEASE: I further grant Camp Adventures, L.L.C. the right, without reservation or limitation, to videotape, and/or record me and/or my child(ren) on closed circuit television. I further grant Camp Adventures, L.L.C. the right, without reservation or limitation, to photograph, videotape, and/or record me and/or my minor child(ren) and to use my or my minor child(ren)'s name, face, likeness, voice and/or appearance in connection with exhibitions, publicity, advertising and promotional materials. I further grant Camp Adventures, L.L.C. the right to send emails promotions and discounts to the email address provide below, and I further grant Camp Adventures, L.L.C. the right to send text messages to me with promotions and discounts. I acknowledge that I may unsubscribe from emails from Camp Adventures, L.L.C. at any time and that standard text message rates may apply from my cellular telephone service provider.

☐ I Agree to the terms and provisions contained in the **Photo Release** paragraph above.

By signing this document I acknowledge that if I and/or the minor child(ren) identified herein are hurt or if any property is damaged during or because of my and/or my minor child(ren) identified herein's participation in this activity, I have agreed to binding arbitration, and I have waived my right to maintain a lawsuit against Camp Adventures, L.L.C. for all claims described or referenced in this document to the fullest and broadest extent possible as per federal law.

I have had sufficient opportunity to read this entire document. I understand this Agreement and I voluntarily agree to be bound by its terms. I further certify that I am the parent, custodian, or legal guardian of the minor child(ren) listed above on this Agreement or that I have authority to sign this Agreement on behalf of the parent, custodian or legal guardian of the minor child(ren) listed above.

The words "my minor child(ren)" mean the minor child(ren) who the participant is in charge of and/or the participant's own minor child(ren).

Minor Child's Name: _____

Minor Child's Date of Birth: _____

Minor Child's Name: _____

Minor Child's Date of Birth: _____

Minor Child's Name: _____

Minor Child's Date of Birth: _____

Participant's Name: _____

Participant's Phone Number: _____

Participant's Date of Birth: _____

Email Address: _____

Participant's Signature
Participant, individually, and on behalf of
all minor child(ren) listed above

Date

Camp Adventures MASTER CARD

Child's Name _____ Date of Birth _____

	Mother	Father
Name		
Address		
Employer		
Home phone number		
Work phone number		
Cell phone number		
Child lives with:		

Child's Doctor _____ Doctor's phone number _____

Child's Dentist _____ Dentist's phone number _____

Individuals to contact in case of an emergency:

NAME	PHONE NUMBERS

Does your child have any food allergies? YES ☐ NO ☐

Does your child have any other allergies? YES ☐ NO ☐

Does your child have any dietary restrictions? YES ☐ NO ☐

Please explain any "Yes" answer here: _____

My child has permission to be released to the following individuals, child care facilities, or transportation service in addition to the emergency contact persons listed above. (Please notify these individuals that they may be asked to provide photo identification). I acknowledge that anyone that picks up my child MUST be age 18 or over.

NAME	PHONE	RELATIONSHIP

I authorize Camp Adventures to secure emergency medical treatment for my child.

Parent signature _____ Date _____

Date of Admission _____

Camp Adventures

Medical Record

Prescribed medication is the only medication that can be administered at Camp Adventures. All medication MUST have a prescription label on it, including Tylenol. _____

All medications must be signed in DAILY on the medication chart provided by the Director. _____

Child's Information:

Child's name: _____ Date of Birth: _____

Parent/ guardian's name: _____

Allergies: _____

Childhood diseases: _____

Does the child have any present or past mental/psychological/physical handicaps or limitations? _____

Does the child have any prescribed medications that the staff should be aware of? _____

Doctor's name: _____ Phone number: _____

Dentist's name: _____ Phone number: _____

Medication Permission:

I, _____ do hereby give permission to the assigned and qualified staff member to administer medication to my child. Each time my child is given a medication, I will sign the general medication chart stating the type of medication, time, date. I will also list possible side effects and dosage.

Parent/Guardian's signature

Date