



YMCA of the Sandhills
Day Camp 2022
Registration Form

**Fayetteville
YMCA**
2717 Fort Bragg Rd.
Fayetteville, NC 28303
(910) 426-9622 op.1

Join the Movement
www.ymcaofthesandhills.org



YMCA Mission: "To put Christian principles into practice through programs that build healthy spirit, mind, and body for all."

Camper's Name (Last) _____	(First) _____	Camper's Age _____
Camper's Shirt Size (\$10) (Circle One) Adult Youth (Circle One) XS Small Medium Large X-Large		
March 2022: (\$5 Discount & NO Registration Fee)		
Day Camp \$145		
April 2022 – August 2022: (\$49 Registration Fee for Non-Members Only)		
Day Camp \$150		
*****OFFICE USE ONLY*****		
Registration Fee Paid (Put N/A if waived) \$ _____	Weekly Draft Fee \$ _____	
Registration Date _____		
Staff Name _____	Date _____	

CAMPER'S INFORMATION

Child's Name (First/Middle/Last): _____

Nickname: _____ DOB: _____ Gender: M F

Physical Address: _____

City: _____ Zip Code: _____

MEDICAL CONDITIONS: Select all that apply:

Allergies: _____ ADD ADHD Takes Medication

Other: _____

FAMILY INFORMATION

Guardian 1: _____ Employer: _____

Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone 1: _____ Phone 2: _____

Email: _____

Guardian 2: _____ Employer: _____

Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone 1: _____ Phone 2: _____

Email: _____

Which parent/guardian should the Y contact regarding payment problems? _____

EMERGENCY INFORMATION

In the case of an emergency, please contact this guardian first: 1 2

Child's Physician: _____ Phone: _____

Hospital Preference: _____

Medical Insurance Carrier: _____ Policy #: _____

Alternate Contacts: If guardians cannot be reached, I authorize the Y to call: (First Preference)

Name: _____ Relationship to Child: _____

Phone 1: _____ Phone 2: _____

(Second Preference)

Name: _____ Relationship to Child: _____

Phone 1: _____ Phone 2: _____

Guardian Signature _____

Date _____

AUTHORIZED FRIENDS AND FAMILY FOR PICKUP



The Y Staff IDs!

(Please include names of guardians on this list)

I hereby authorize the YMCA to allow the following individuals to release my child from YMCA care at the end of the day:

Name: _____ Relationship to Child: _____
Name: _____ Relationship to Child: _____
Name: _____ Relationship to Child: _____
Name: _____ Relationship to Child: _____
Name: _____ Relationship to Child: _____

NOT AUTHORIZED FOR VISIT OR PICKUP

Please complete this section if necessary. If a legal guardian or parent is listed, the Y must keep a court order on file to enforce this request.

Name: _____ Relationship to Child: _____
Name: _____ Relationship to Child: _____

ENROLLMENT DATES

Please check and initial the dates you would like your child to attend Day Camp

- | DAY CAMP | | Themes: |
|--------------------------------|--------------------------------|-----------------------------|
| <input type="checkbox"/> _____ | Week 1: May 31 - June 3 | “Under The Big Top” |
| <input type="checkbox"/> _____ | Week 2: June 6 - June 10 | “Mad Science” |
| <input type="checkbox"/> _____ | Week 3: June 13 - June 17 | “Summer Safari” |
| <input type="checkbox"/> _____ | Week 4: June 20 - June 24 | “The Great Outdoors” |
| <input type="checkbox"/> _____ | Week 5: July 27 - July 1 | “Double Dare” |
| <input type="checkbox"/> _____ | Week 6: July 5 – July 8 | “America The Beautiful” |
| <input type="checkbox"/> _____ | Week 7: July 11 - July 15 | “Campers vs. Counselors” |
| <input type="checkbox"/> _____ | Week 8: July 18 - July 22 | “Artful Antics” |
| <input type="checkbox"/> _____ | Week 9: July 25 - July 29 | “Wonderful World of Disney” |
| <input type="checkbox"/> _____ | Week 10: August 1 - August 5 | “Wild Wild West” |
| <input type="checkbox"/> _____ | Week 11: August 8 - August 12 | “Camp Olympics” |
| <input type="checkbox"/> _____ | Week 12: August 15 - August 19 | “Greatest Show Finale” |

Guardian Signature _____

Date _____

2022 DAY CAMP PROGRAM POLICIES

Please review the following policies and sign at the bottom of the page to indicate your understanding and agreement of these policies.

WAIVERS/PERMISSION

I permit my child to participate in activities the YMCA conducts during the program and understand all items listed below.

Field Trips: I permit my child to leave the YMCA on authorized trips under the supervision of YMCA staff. I may request to review a written schedule of activities to be conducted outside of YMCA facilities that require transportation.

Photography: I permit the YMCA to use images of my child as a YMCA program participant in internal and external promotional material. This includes printed material, broadcast and print advertising, promotional videos, and the YMCA website which are produced and published by the YMCA. I also permit the YMCA and/or the media to use images of my child in broadcast and print media news coverage of the YMCA. I understand that my child's name is not published in any promotional material.

Transportation: I permit the YMCA to transport my child to and from their drop-off site to the Fayetteville Branch YMCA (2717 Ft. Bragg Rd.) and Rae O' Hope YMCA Pool (2400 Hope Mills Rd.). Campers will also be transported to field trip sites, city parks, and athletic field for activities. I understand I may only choose one drop off/pick-up site per weekly session.

PAYMENT POLICIES

I understand and agree to all policies concerning payment, cancellations and refunds that are listed below. I know I may not register my child for any new YMCA programs until outstanding balances are paid.

Auto-Pay: All weekly payments will be automatically billed the Friday before the week begins. If payment is declined, a \$25 late fee will be assessed.

If payment is not made before the start of camp on Monday, my child will be unable to participate. The full balance for that week will still be owed.

I understand it is my responsibility to provide the YMCA with payment information throughout the term of my child's enrollment in the program.

Cancellations: All cancellations must occur with at least 15 days written notice prior to the start of the camp week to be eligible for refunds. Otherwise, you will NOT be eligible for a refund.

Non-attendance, illness, or vacation does not relieve the guardian of responsibility for payment. If the child is removed from camp by YMCA staff, payment owed for future weeks will be cleared.

Refunds: Weekly deposits and registration fees that are paid at the time of registration are **non-refundable and non-transferable.**

PAYMENT POLICIES CONT'D.

If the camper has enrolled in auto-pay, the eligible weekly dues will be cleared after a written cancellation request and refund request form has been completed. If payment was made in full for camp at the time of registration, eligible fees will be returned less a \$35 service charge.

MEDICAL TREATMENT POLICIES

I understand and agree to all policies concerning medical treatment and care that are listed below.

Medical Insurance: Program participants are responsible for their own accident coverage and medical expenses. The YMCA is not liable for accidents that occur on YMCA property or off-site the YMCA during scheduled activities.

Medication: The YMCA will only administer medication, including OTC meds, when directed in writing by the child's guardian (see orders for medication form).

Emergency Care: In the event of an emergency EMS and the YMCA will take appropriate action in the best interest of the child. Guardians will be contacted immediately in an emergency situation to provide guidance.

Immunization Records: The YMCA will verify all participants' immunization status by requesting current public school report cards or immunization records. These records will be maintained by the YMCA.

Blood Borne Pathogen Exposure: If a participant or staff member is exposed to bodily fluid on broken skin or mucous membrane (e.g. mouth or eye), from another participant, the YMCA will contact the guardians of all parties. During this contact the YMCA will explain the situation and provide the name and contact number of the source child's attending physician to verify risk of exposure.

PROGRAM POLICIES

I understand and agree to all program policies listed below.

Babysitting Policy: YMCA staff are unable to have contact with program participants outside of scheduled hours and activities during the camp season. The YMCA does not endorse or recommend program staff for babysitting at the end of the program.

Pick-Up Policy: The YMCA will follow the registration form to determine who is authorized to pick-up the participant.

Inclement Weather: The YMCA will not host outside activities in the event of severe inclement weather. Guardians will be contacted if early pick-up is necessary

Lost Items: The YMCA is not responsible for personal items that are lost or stolen during the program

Guardian Signature _____

Date _____

BEHAVIOR EXPECTATIONS & DISCIPLINE POLICY

The YMCA's four core values are caring, honesty, respect, and responsibility. Our goal is to maintain a safe and fun environment for all program participants. To accomplish this, it is important that program staff uphold good order and discipline. The YMCA makes every effort to help children understand our expectations.

The YMCA does not promote or tolerate:

- Corporal punishment
- Verbal abuse: Bullying, threatening, or using an inappropriate loud voice.
- Leaving children unsupervised
- Using profanity
- Withholding food, water, and restroom privileges

Discipline Policy:

1. Verbal warning, guardian is notified upon pick-up.
2. Written warning, guardian is notified. A conference between program staff and guardian is recommended to resolve behavior problem.
3. After three written warnings, the participant is suspended from the program for one calendar year.

Behavior Expectations for Child:

- Always use appropriate language
- Cooperate with staff and follow directions
- Uphold YMCA core values and be courteous to other children, staff, equipment, and facilities.
- Keep a positive attitude.
- Never leave the program area without a staff member present

The following behaviors will lead to immediate dismissal from the program:

- Giving a direct threat to the physical or emotional safety of a child or staff member
- Fighting, biting.
- Vandalism or destruction of property
- Possession of a weapon
- Sexual misconduct
- Running away

Special Circumstances:

Guardians are required to inform the YMCA in writing, prior to a child's enrollment into a YMCA's program, of any special circumstances which may affect the child's ability to fully participate in program activities within the guidelines of acceptable behavior, including but not limited to serious behavioral problems and psychological, medical, or physical conditions.

I have read, understand, and agree to the above policies. I will discuss the expected behavior with the camper prior to the start of camp.

Guardian Signature _____

Date _____

ORDERS FOR MEDICATION

Child's Name (First/Middle/Last): _____

Nickname: _____ DOB: _____ Gender: **M** **F**

REFUSE MEDICATION ADMINISTRATION: *Please sign if you acknowledge this form and do not wish for the YMCA to administer routine OTC medication or prescription medication to your child during camp hours, unless directed by emergency medical personnel:*

GUARDIAN SIGNATURE

DATE

Medication's Authorized (Including bug spray, Tylenol, prescription medications, etc.):

#1 Medication (Full name): _____

Dosage: _____ Day/Time: _____

Medical Condition: _____

Side Effects/Special Instructions:

Prescribing Physician: _____ Contact: _____

#2 Medication (Full name): _____

Dosage: _____ Day/Time: _____

Medical Condition: _____

Side Effects/Special Instructions:

Prescribing Physician: _____ Contact: _____

#3 Medication (Full name): _____

Dosage: _____ Day/Time: _____

Medical Condition: _____

Side Effects/Special Instructions:

Prescribing Physician: _____ Contact: _____

#4 Medication (Full name): _____

Dosage: _____ Day/Time: _____

Medical Condition: _____

Side Effects/Special Instructions:

Prescribing Physician: _____ Contact: _____

Please sign if you wish for the YMCA to administer the medications disclosed above to your child during camp hours. Medication must be present at drop-off in its original container with prescription or label

Guardian Signature _____

Date _____

Additional Information/FAQ

Below is additional information about some of our most asked about guidelines. Our policies/guidelines include but are not limited to:

Drop off/Pick up times: Campers must be dropped off by 8:00 AM. After 8:00 am, they can be dropped off until 8:30 am, but there will be a \$1 a minute charge until 8:30 am. After 8:30 am, NO CAMPERS WILL BE ACCEPTED. Campers must be picked up by 6:00 pm. After 6:00 pm, there will be a \$1 charge per minute until 6:30 pm. At 6:30 pm, CPS will be contacted if the camper has not been picked up.

Communication: Camp staff regularly check-in with parents during drop-off and pick-up times. Drop-off and pick-up times are not good times for more in-depth conversations about any concerns you may have. If you wish to meet with the camp director at another time let us know and we can arrange it. There are also newsletters (please be sure to add Bartholomew.randolph@ymcaoffthesandhills.org in your email to prevent it going to spam), verbal reminders and announcements.

Payments: Payments are auto drafted on the Friday prior(the only exception is the first camp week will draft Saturday). **If payment is not made before the start of camp on Monday, your child will NOT BE ACCEPTED AT DROP OFF ON MONDAY. The full balance for that week will still be owed. Non-attendance, illness, or vacation does not relieve the guardian of responsibility for payment. If the child is removed from camp by YMCA staff, payment owed for future weeks will be cleared.**

Cancellations: All cancellations must occur with at least 15 days **written notice** prior to the start of the camp week to be eligible for refunds. Otherwise, you will NOT be eligible for a refund.

Lunch/Snacks: No lunch or snacks will be provided. Please **DO NOT** send hot lunches. We cannot heat them up.

Clothing: Please make sure your child is dressed in appropriate clothing/shoes daily. No dresses without shorts under them. We ask that you send your child with a change of clothes daily. On swim days, please send your child's bathing suit, and towel.

NO ELECTRONICS ARE PERMITTED. They will be confiscated, and the parent can pick them up at the end of the day when the camper is picked up.

Weekly field trips are included with camp price. For eligible field trips you may send money with your child to purchase food/items. Please do not send money for normal camp days.

Parent attitudes with our staff MUST BE civil under ALL circumstances.

**Additional policies may apply.*

Guardian Signature _____

Date _____

Guardian Signature _____

Date _____