## **AYC SUMMER CAMP REGISTRATION 2019**

## Day Camp Tracy & Summer Enrichment Program



#### **CAMPER REGISTRATION & EMERGENCY INFORMATION**

Last Name	st Name First Name			Middle	
Address		City		_ State	Zip
Date of Birth	Age as of 6/24/19	Gender	Grade Fall 2019		TShirt Size
Parent/Guardian Na	me	Phone		_ Phone	
Email		Work Phone		Alumni	of Camp Tracy
Parent/Guardian Na	me	Phone		_ Phone	
Email		Work Phone		Alumni	of Camp Tracy
With whom does the	e child live?	Pare	ent active in Military	//Nationa	l Guard
Emergency Contact	(other than parent/guardian)		Pl	none	
Emergency Contact	(other than parent/guardian)		PI	none	
CIT PICK-UP AUTHO	DRIZATION				
	MEATION	(parent/guardia)	n) aive permissior	n for the	following people
	d(ren)				
	np Tracy, and/or the Boys				
	y the program director in person(s) allowed to pick-				f situations
	Name				
Parent/Guardian	Name		Pho	ne	· · · · · · · · · · · · · · · · · · ·
Other			Pho	ne	
Other			Pho	ne	
Other					
Other			Pho	ne	
=	ou are using a taxi service verbal permission from the				

Please indicate if you are using a taxi service for transportation. We will not release a child to a taxi driver without written or verbal permission from the parent/guardian. The pick-up persons must be of legal age (18+). Special permission will be required for those under age 18 by written note only. No persons under the age of 14 will be allowed to sign out or take custody of a child. Photo ID is ALWAYS REQUIRED.

#### **CAMP SELECTION & REGISTRATION**

The AYC accepts payment from 3rd parties (State, etc.). The AYC also provides partial scholarship on camps. See the Welcome Center for details.

SUMMER ENRICHMENT PROGRAM - Waterville						
Dates	All Week	Mon	Tues	Wed	Thurs	Fri
Jun 24-28						
Jul 1-5 CLOSED						
Jul 8-12						
Jul 15-18						
Jul 22-26						
Jul 29-Aug 2						
Aug 5-9						
Aug 12-16						
Aug 19-23						

Jul 1-3 & 5 Closed Jul 4				
Jul 8-12				
Jul 15-18				
Jul 22-26				
Jul 29-Aug 2				
Aug 5-9				
Aug 12-16				
Please select Camp Tracy weeks needed, if you				

**DAY CAMP TRACY** - Oakland

Camp Ext.

Care

@AYC

**Tracy** 

Week

Pick-Up & **Drop-Off** Location

Alfond

Youth

Center

Camp

**Tracy** 

Please select either "All Week" or individual days for SEP.

Mon-Fri 7:00am-5:30pm | \$125.00 week | \$30.00 day

you will use. \$160.00 week | \$150.00 4wks+ | \$140.00 8wks+

**OFFICE USE ONLY** 

need extended care, and which pick-up location

- -A \$25.00 deposit per week is recommended to hold your child's spot.
- -Fees are non-refundable within 48 hours prior to the start of the session.
- -All Camp Tracy campers should meet at the AYC for the first day of the

**OFFICE USE ONLY** 

**OFFICE USE ONLY** 

switch camps. session.

-Fees are due in full prior to the child's attendance in the session.

-Children dismissed from the program will not receive a refund and cannot

**Dates** 

Jun 24-28

**OFFICE USE ONLY** 

WEEK	Payment	Receipt #	Payment	Receipt #	Payment	Receipt #
Jun 24-28						
<b>Jul 1-5</b> Closed July 4						
Jul 8-12						
Jul 15-18						
Jul 22-26						
Jul 29-Aug 2						
Aug 5-9						
Aug 12-16						
Aug 19-23						

CAMPER MEDICAL INFORMATION	
Has your child ever been hospitalized?	If yes, please explain:
Does your child take medication? I	f yes, please list medications and dosages:
Allergies? (hay fever, bee stings, food, asthmatical poctor's note required for food allergies with reconstructions.)	•
Is your child allergic or sensitive to any medic	cation?
Date of child's last tetanus shot:	
In case of emergency, my child may be treated	ed at:MaineGeneralNorthern Lights Inland
	, physical, or emotional concerns his or her counselor's should
physician's name, exact dosage, etc. Ask you	ministered to a child in the prescription bottle with the ir pharmacist to administer prescriptions in separate bottles, for re available from the Director, and must be completed before
	e in attendance at one of our camps, please state your
preference for the procedure we take.	
Please number the contacts in order in which	you would like us to proceed:
Contact parent/guardian	
	Phone
	Phone
•	Phone
Use discretion and seek medical attention child will be transported to hospital of my choic child will be transported to hospital of the my choic child will be transported to the my child will be transported to t	n if I cannot be contacted by phone. It is understood that my ice (above) in an emergency situation.
Please list any other instruction you wish	1:
consent to Day Camp Tracy or Summer Enrich	ardian can be contacted by telephone, I hereby give my iment Program staff to follow the above order or procedure. My ring the director in writing. I will be responsible for any/all costs t.
Signature of Parent/Guardian	 Date

### **CONFIDENTIAL INFORMATION**

The following information is necessary for our records and the funding our organization receives. The answers you provide are confidential. Your cooperation in providing this information is both appreciated and necessary.

Household Income:					
\$0-\$18,000\$18,001-\$24,000\$24,0001-\$50,000\$50,001-\$75,000\$75,001-\$100,000					
\$100,001+ Decline to answer					
Check all that apply:					
SSDIfood stamps (SNAP)General AssistanceTANFSchool Lunch Program					
Day Care VolunteerTeen ParentVeteran Compensation					
Family Setting:					
Foster CareSingle Parent FamilyGrandparent (s)Other					
Is your child a U.S. Citizen? Yes No					
Physical or mental limitation:					
Race-Nationality:					
African-AmericanArabNative AmericanAsianHispanic					
Caucasian (white)RussianMulti-Racial Other:					

#### **POLICIES & PERMISSIONS**

Policy with Description  Initials to the right of each policy signifies the parent/guardian having read and agreed to the policy as stated either in the AYC Summer Camp Registration Form or in the Parent Handbook.	Parent/ Guardian Initials		
<b>Photo Release -</b> I hereby irrevocably consent to and authorize the use and reproduction by the Alfond Youth Center, the Summer Enrichment Program and Camp Tracy (hereinafter AYC, SEP, and CT), of any and all photographs/videos which may be taken by or for AYC, SEP, and CT during the Recreation and/or Participation in all activities in which my child is participating related thereto, for advertisement or promotional purposes, without further compensation to me. All negatives, positives, and digital copies with the prints shall constitute property of AYC, SEP, and CT, solely and completely.			
<b>Discipline, Suspension &amp; Dismissal -</b> When children do not display responsible behavior, our goal is to correct the behavior. Our discipline policy is stated in the Parent Handbook. We file and record all incidents and refer back to them when considering suspension. I understand that the Summer Enrichment Program and Camp Tracy will take necessary disciplinary actions regarding all inappropriate behavior and will strictly follow the discipline policy as outlined in the Parent Handbook.			
Free Swim Release - I would like my child to participate in free swim every day. I understand my child is not required to go everyday it is offered and will have an alternate activity offered. Please list your child's ability in the water (circle one): Beginner Moderate Advanced			
<b>Lost &amp; Found -</b> I understand AYC, CT, and NESC is not responsible for my child's items which may be lost or stolen.			
<b>Climbing Wall/Tower &amp; Adventure Playland</b> (inflatable playground) - I give my permission for my child to participate in using the Adventure Playland and Climbing Wall. I understand that this area is not a part of the childcare center, but program staff will be supervising at all times. Children are required to wear socks in the Adventure Playland area.			

### **POLICIES & PERMISSIONS CONT.**

Policy with Description		Parent/	
Initials to the right of each policy signifies the parent/guardian having rea in the AYC Summer Camp Registration Form or in the Parent Handbook.	ad and agreed to the policy as stated either	Guardian Initials	
<b>Bullying</b> - It is the intent of the Alfond Youth Center to provide all youth with a safe, orderly, and respectful recreational environment. Administration and staff will provide clear expectations and consequences for all participants and be consistent with NO TOLERANCE for any bullying behavior.			
<b>Refund &amp; Dismissal -</b> Program fees paid are non-refundable of the session date. Children dismissed from the program will r dismissed from AYC camps they may not register for affiliated dismissed from Day Camp Tracy they may not attend the Sumversa.	not receive a refund. If children are camps. For example if a child is		
<b>Child Abuse &amp; Neglect -</b> We are licensed by the State of Ma Services, which means we are required to report any suspected Identity and information shared in this report are kept strictly of Youth Center, Summer Enrichment Program and Camp Tracy of and will not discuss the matters with the parents/guardians.	d cases of child abuse or neglect. confidential. I understand the Alfond		
<b>Health or Behavior Pick-Up</b> - Parents/guardians are require behavior problems, illness, lice or bathroom accidents. If the ill approval from the Director will be required upon return.	· · ·		
<b>Impairment -</b> If the program staff feel the adult picking up the drugs or alcohol, the staff will strongly recommend that another recommendation is not acted upon, the staff will notify the politic the impairment policy.	er person is called for pick-up. If the		
<b>Payment -</b> As stated in our Parent Packet, all payments are d payment is for the upcoming week of service. Any payment aft considered late and you will be charged a late fee of \$10.00.			
If fees are not received on the day of service, childcare service child is sent to the program from a bus without payment, then payment and/or to pick-up the child early.			
Payments must be cash, check, money order, or credit/debit casufficient funds (NSF) will incur an additional fee of \$25.00 and order within 5 business days. Personal checks will no longer be Payments can also be made over the phone with a credit/debit	d must be paid by cash or money e accepted after 2 NSF checks.		
We do not accept ASPIRE credit cards for payment. If you have for direct withdrawal. We will offer partial scholarships for cam to see if you are eligible.			
I agree that I am responsible for payments each week, and if I not receive services the following week. I also understand that gets dropped, I will be charged an additional fee of \$20.00. I v payment or pick up my child immediately.	if my fees are not paid and my child		
Parent/Guardian Signature	Date		

### **POLICIES & PERMISSIONS CONT.**

Policy with Description	Parent/		
Initials to the right of each policy signifies the parent/guardian having read and agreed to the policy as stated either in the AYC Summer Camp Registration Form or in the Parent Handbook.			
<b>Pick-Up -</b> understand the Programs closes PROMPTLY at 5:30pm. A late fee of \$5.00 per 15 minute intervals will be charged for any child who is picked up after this time. The fee will be paid at the Alfond Youth Center Welcome Center or Coatroom upon arrival. Your child may not return until this fee is paid. Multiple occurrences of non-payment and/or non-compliance of our pick-up schedule, could result in termination of services.			
Summer Enrichment Program - We do not escort children to and from lessons/classes throughout the building in the summer. You may speak to the Director if you wish for your child to sign themselves out and walk to their activity.			
<b>Technology Use</b> - As a member of the Summer Enrichment Program, your child will have access to the internet. In order to maximize the benefits of the internet use and minimize any possible dangers, we have created specific guidelines that are to be followed at all times. All parents must review guidelines with their child(ren) and provide consent for their child(ren) to view and/or use the network. I have reviewed the technology policy with my child(ren), located in the Parent Handbook and understand that if my child(ren) misuses the policy guidelines; he/she will lose their network privileges and may undergo disciplinary action.			
<b>Third Party Billing</b> - If your child receives funding from a third party, such as the State of Maine, our office requires this information prior to the child's attendance. We must have a document from the third party stating the child(s) name, which camp they are attending, the dates attending and the amount that the third party will be paying and if there is a parent fee. We do not provide scholarships to those receiving third party payments. See the Office Manager for details.			
<b>Survey Release -</b> In order for the After School Program to continue to offer low childcare rates, the organizations are required to apply for grants to fund the program. All data that is collected goes towards improving the childcare program.			
I understand that my child may need to fill out pre/post tests or surveys to fulfill our grant requirements.			
Parent/Guardian Signature			
Mentoring with Impact Release - I give permission for the AYC staff and volunteers to mentor my child. I understand that the program involves trained and screened mentors.			
Parent/Guardian Signature			
<b>Parent Handbook -</b> It is very important to us to make sure parents/guardians are well informed of all our policies and guidelines. All of the policies are written in detail in the Parent Handbook. These may be downloaded from our website at clubayc.org or found at the Welcome Center and are available with all paper copies of the registration forms. Parents/Guardians are required to read and understand all the information both in the registration forms and Parent Handbooks.			
Parent/Guardian Signature			

# ALFOND YOUTH CENTER, CAMP TRACY, SUMMER ENRICHMENT PARTICIPATION AGREEMENT AND ASSUMPTION OF RISK FORM 126 North St., Waterville, ME 04901

I, (Parent's Initials), acknowledge and giv	re permission for the Recreation and/or Participation in all activities pating, under the arrangements of Alfond Youth Center, Camp Tracy, and
I, (Parent's Initials), give the AYC, CT, and	d SE permission to transport my child to and from Camp Tracy and the to provide a note if other transportation is to be used or if other adults
activities. I also agree that such risks simply cannot be I am aware that during the Recreation and/or Participarrangements of AYC, CT, and SE, which includes but course, group challenges, canoeing, paddle boarding, outdoor experiences, that the inherent risks and dang slips while walking, hiking, or climbing on terrain that there are unanticipated risks and that both the inherent paralysis, death, or damage to my child, to property, or result of my child's physical condition and that these resituated on terrain that may include undulations, tree AYC, CT, and SE therefore strongly suggests that guest.	ere are certain risks and dangers present which are inherent in the be eliminated without jeopardizing the essential qualities of the activities. ation in all activities in which my child is participating under the is not limited to target sports, swimming, hiking, low and high ropes team sports and games, wilderness skills, camping out, and other ers include but are not limited to: hazards of falling debris, burns, falls or is not improved, drowning, and equipment failure. I also agree that not and unanticipated risks could result in physical or emotional injury, for to third parties. I also acknowledge that some risks are increased as a isks may not be known to AYC, CT, and SE. By its very nature camp is roots, rocks and other characteristics that make mobility more difficult. The stake extra care when walking across our campus. AYC, CT, and SE lure to follow these instructions will increase your risk of injury. AYC, CT, any guests who may be at camp with you.
participate in spite of the risks. In consideration of an Participation in all activities arranged for me and my c	cipation in all activities is purely voluntary, and I elect to have my child and as part payment for the right to participate in such Recreation and/or hild by AYC and CT, I have and do hereby assume all of the above tered on said Recreation and/or Participation in all activities including
of action, debts, claims and demands of every kind an connection with my child's participation in Recreation target sports, swimming, hiking, low and high ropes or games, wilderness skills, camping out, and other outd directors, agents, employees, and associates whether	y, discharge and hold harmless from any and all liability, actions, causes of nature whatsoever which I now have or which may arise from, or in and/or Participation in all activities, which includes but is not limited to ourse, group challenges, canoeing, paddle boarding, team sports and oor experiences related thereto conducted by AYC, CT, and SE, its paid or volunteer staff. I am doing so on behalf of myself, my spouse, representative and estate, and acknowledge that I am assuming the risks other activities.
Participation in any other activities shall be resolved en the then existing commercial rules of the American Art and SE, in its sole discretion, selects a different forum have exclusive authority to resolve any dispute relating formation of this contract, including but not limited to term and provision of this agreement shall be valid an	but of or referring to the subject matter of this Recreation and/or exclusively by binding arbitration in Maine, Kennebec County, according to bitration Association and the substantive laws of Maine unless AYC, CT, . The arbitrator and not any federal, state or local court or agency shall g to the interpretation, applicability, enforceability, conscionability, or any claim that all or any part of this contract is void or violable. Each d enforceable to the fullest extent permitted by law and any invalid, med replaced by a term or provision that is valid and enforceable and nvalid, illegal or unenforceable term or provision.
This is a legally binding document, which I have read	and understand.
	Printed name of Participant (CAMPER)
PARENT OR LEGAL GUARDIAN PERMISSION FO	R MINORS
such minor permission to participate in the Recreation	roved legal guardian of the minor who is named above. I hereby grant and/or Participation in all activities provided by AYC, CT, and SE, and in sof the CAMPER PARTICIPATION AGREEMENT AND ASSUMPTION OF
Signature of Parent/Guardian of Minor	 Date