

Enrollment date: _____

EMERGENCY CARD

	Age &		Gender: (Please	
Child's Name:	Birth Date: ci	ircle)		
			М	F
Address:	Home Phone:			
Parent/Guardian Name:	Parent/Guardian Name:	-		
Employer:	Employer:			
Address:	Address:			
Cell &/or	Cell &/or			
Work Phone:	Work Phone:			
Pager	Pager			
&/or Fax	&/or Fax			
Number:	Number:			
Email address:	Email address:			

Describe any health problems, current medications, allergies, food allergies, or medical conditions to be aware of:

INDIVIDUALS OTHER THAN PARENT/GUARDIAN AUTHORIZTION

ONLY these individuals have my authorization to care for my child in the event of an emergency and/or for drop-off and pick-up.

Parent / Guardians Initial:

* Please advise these individuals that they are authorized and will need to present identification to staff.

Name / Relation:	Phone Number:	
Name / Relation:	Phone Number:	
Name / Relation:	Phone Number:	



Day Camp Authorization, Release, and Waiver for Minor Participant

In consideration for my child being granted permission to participate in a City of Fort Collins Recreation program, I, the undersigned, hereby agree for myself and for my child, and our respective personal representatives, heirs and next of kin:

Child's name_____

Please initial next to each section you give your approval to:

WAIVER FOR PARTICIPANT

_____ I approve and give my permission for said child to participate in any class or program offered by the City of Fort Collins Recreation Dept. which is deemed age appropriate. By registering for youth programs through the City of Fort Collins Recreation Dept., registrant acknowledges that the activities carried on in the program carry on certain risks for the participant. Registrant has independently reviewed and evaluated the risks and determined to engage in the program with full knowledge and acceptance of the risk. The registrants agrees to and hereby releases and forever discharge the City of Fort Collins, their officers, employees, agents and volunteers from any and all liability for damages, loss or personal injury arising out of or related to registrant's participation in youth recreational programs.

I understand that photographs may be taken by the City of Fort Collins during this program. I grant the City of Fort Collins permission to use my child's likeness in phonograph(s) in any and all publications and in any and all other media now and in the future. I will make no monetary or other claim against the City concerning such photograph(s).

AUTHORIZATION TO PARTICIPATE IN ACTIVITIES

_____ I hereby give permission for my child to go on field trips away from the ______whether on foot, school bus, or by City of Fort Collins Recreation Dept. vehicles. I give permission for my child to participate in all Class/Camp activities with the following exceptions:

Outdoor/playground play, swimming, hiking, pony riding, cooking, field trips. Please indicate the activity if not listed above. Please note that alternative care will not be provided, and no discount given.



AUTHORIZATION FOR EMERGENCY MEDICAL CARE

_____ I hereby give my permission to City of Fort Collins Recreation staff to call a doctor or emergency medical service and for the doctor, hospital or medical service to provide emergency medical or surgical care for my child should an emergency arise. It is understood that the City of Fort Collins Recreation day camp staff will make a conscientious effort to locate the parent/guardian or the emergency contact listed on the registration document before any action will be taken. If it is not possible to locate the emergency contact listed, I will accept the expense of emergency medical or surgical treatment.

MOSQUITO REPELLANT PERMISSION FORM

Children will apply repellant to themselves under the direct supervision of a day camp staff member before outdoor activities. Repellant will not be applied to any broken skin or if a skin reaction has been observed. Any skin reaction observed by staff will be reported promptly to parent/guardian. Day camp will be using repellant with DEET. If there is a specific amount of DEET parents wish their child to use, or they prefer their child uses botanicals it is the parent's responsibility to provide it. Every repellant should have your child's first and last name clearly labeled on the bottle. It is recommended that you use DEET to protect against West Nile Virus.

SUNSCREEN PERMISSION FORM

Children will apply sunscreen to themselves under the direct supervision of a day camp staff member 15-30 minutes before outdoor activities. Sunscreen will not be applied to any broken skin or if a skin reaction has been observed. Any skin reaction observed by staff will be reported promptly to parent/guardian. Camp/Class will provide Makers Mark Sport SPF 50 Continuous Spray Sunscreen. It is the parent's responsibility to provide an <u>alternative sunscreen if this does not meet your need.</u> Please have your child's first and last name clearly labeled on the bottle. Sunscreen and the SPF #______



BEHAVIOR EXPECTATIONS

Recreation Staff and Administration provides children with guidelines for appropriate behavior and rules to follow while at camp. We encourage positive actions through positive reinforcement and close supervision. Our main goal is to keep the children safely involved in activities so the inappropriate behavior is limited. The following steps are followed if inappropriate behavior occurs. *Note: Special modifications can be made to adapt to a child with needs.*

- 1. The child is spoken to privately in a firm but gentle manner regarding the unacceptable behavior.
- 2. If the said behavior continues, the child is removed from the activity for a cool down/timeout until both the counselor and the child feel the child is ready to return
- 3. If the said behavior still continues, the child's parent will be called or spoken with before departing for the day.
- 4. A Behavior Report will be filed any time a child receives a cool down/timeout
- 5. Three behavior reports during your child's time at camp may result in termination of service from the camp.
- 6. An Incident Report will be filed when there is evidence of property destruction, injury to an individual, physically touching an individual, accrual of multiple behavior reports and other inappropriate behaviors is grounds for dismissal from camp.

Grounds for Immediate Dismissal (but not limited to)

- a. A child threatens or injures another individual
- b. A child displays violent, uncontrollable behavior that will put others in the program at risk
- c. A child purposely damages property; personal or public

** A child terminated from a session will not be able to participate in camp for the remainder of the year.

**Behavior incidents will never be dealt with in a demoralizing, humiliating, or abusive manner. No child shall be subject to abuses of neglect, cruel, unusual severe, or corporal punishment including: punishment with subject of a child to verbal abuse, ridicule, humiliation, denial of food, use of bathroom facilities, punishment for soiling, wetting, or not using the toilet.

** Staff members shall not be subject to verbal or physical abuse by a child enrolled in camp, or by their parent, including but not limited to, cruelty, humiliation, foul language, and ridicule. Refunds will not be granted if a participant is dismissed from a City of Fort Collins Recreation Program.

Print Child(ren)'s Name(s)	
PrintParent/Guardian'sName	
Signature	Date

Acknowledgement of Camp Policies and Procedures

I acknowledge that I have received the camp policies and procedures as outlined in the parent camp manual; and by signing the below agree to follow, accept the conditions of and give authorization and approval for the activities described.