



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

**LEARN
PLAY
THRIVE**

SUMMER CAMP

How to Attend

The drop-off and pick-up site for this program is the small gym in the old Y building unless otherwise stated. You must drop off and pick up your summer camp children at the designated drop-off and pick-up site even if you have other children attending separate programs at the Y.

You may drop off your children at the designated site no earlier than 7:00 am and pick them up no later than 6:00 pm. You must be physically present to sign your children in and out; you may not drop them off or pick them up without signing them in or out.

We will not allow anyone to pick up your children except you, any other parents or legal guardians, and anyone you authorize on the enrollment form. Please note that we legally cannot withhold children from either parent unless we have a copy of a court-issued restraining order. You may not authorize anyone younger than 18-years-old to pick up your children. You and anyone you authorize must always be prepared to present photo ID at any time to any YMCA staff member who requests it.

Things to Know

There are many things to do here at the Y. We split up into groups to play in the the small gym, visit the classroom for crafts, play basketball in the big gym, go swimming, or even go to a park. When you come to pick up your children, while they may not be immediately visible at the pick-up site, rest assured that they are always in the attentive care of one of our DFS-qualified staff.

Some days we may watch movies here at the Y. We will only show movies with a rating of PG or below.

We may take photographs or videos of your children for promotional purposes and use them on social media or TV.

You or any other parent or guardian may visit the program at any time. Any other visitors must make arrangements with the program director prior to visiting.

We will make accommodations for children with special needs so that they may enjoy our programs. When making decisions related to the enrollment, placement, or dismissal of children with disabilities or chronic conditions we will comply with the Americans with Disabilities Act.

The YMCA will follow the guidelines set by the State of Wyoming when providing bus transportation for field trips and school pick-up and drop-off: a certified bus driver when using a bus, van drivers who will follow all state and YMCA insurance mandates, role checks upon entering and exiting the bus, first aid kits in the vehicles, and release forms for all children being transported. The children will only be transported to and from authorized locations. Each passenger shall be properly restrained in accordance with state statute at all times. Children will never be left without adult supervision in any vehicle.

What We Need

Your children should wear clothing and shoes suitable for very active forms of play. Please send them wearing socks and closed-toe shoes. Please do not send them with money or other valuables. We are not responsible for any lost, broken, or stolen items. Staff may confiscate any items as deemed necessary by our discretion. They will be returned to whomever picks up your children. We have a lost and found box near our Welcome Center that you may check for lost items. Please note that any unclaimed items will be washed and donated within 30 days.

If your child requires prescription or non-prescription medication during program hours, it must be delivered to the program director with a doctor's note. You may not leave the medication in your child's possession. It must be in its original container with your child's name, the medication's name, and dosage instructions. If your child suffers from severe allergies, diabetes, asthma, or another debilitating condition, you must note this on your enrollment packet and speak with the program director directly about what to do in an emergency.

We cannot register your children until we receive copies of each child's immunization records. All shots must be up to date. If you choose not to immunize your children, you must provide a signed letter of explanation.

We cannot register your children until we receive copies of any applicable restraining orders or custody restrictions. Please discuss any special family circumstances with the program director.

Suspected Abuse or Neglect

We will report all cases of suspected abuse or neglect to the proper authorities. We are not required to discuss the situation with you before making a report. Please note that being 30 or more minutes late to pick up your children counts as a case of suspected neglect. If this happens, we will turn your children over to the police, who will transport them to the Casper Police Department and contact you to pick them up.

Discipline and Discharge Policy

At the Y, we are committed to strengthening our community through youth development, healthy living, and social responsibility. We are dedicated to building healthy, confident, connected, and secure children, adults, families, and communities, targeting four core values: caring, honesty, respect, and responsibility. We expect all of our staff members to follow these core values, and we strongly encourage our members, guests, and children to follow them as guidelines to help enrich their lives and strengthen their communities.

In our programs, staff and children are expected to act responsibly and appropriately towards themselves and others. When disputes arise, we will always take time to listen to each party involved and teach patience, cooperation, and reconciliation. We will not tolerate any types of harmful or threatening behavior. This may include violence with the intent to harm physically, mentally, or emotionally, action deemed to be inappropriate or dangerous, aggressive intimidation, theft, destruction of property, carrying objects which could be deemed a weapon, or possession of tobacco, alcohol, or illegal substances. If your child exhibits behavior that threatens or causes harm to himself/herself or to another person, we will impose any of the following actions at our discretion:

- a break (The maximum amount of time per incident will be one minute per year of the child's age.)
- a phone call to the the child's parent (This may mean we want to discuss the child's behavior and implement a correctional plan, or it may mean we are sending the child home early.)
- temporary suspension from the program (This will be one day for a first offense, and one week for a second offense.)
- expulsion from the program (This will be the last and final correctional step. Please note that a program usually lasts one season, after which you may be able to sign up your child for the new season's program. You are welcome to discuss this with us.)
- We reserve the right to use our discretion regarding any of the above disciplinary actions.

We strive to meet the needs of each child enrolled in our programs. We commit to communicate and work with you regarding your needs and the needs of your children in order to make a positive impact. Even so, there are situations in which we are unable to meet these needs.

We reserve the right to discharge a child from any program at our discretion.

We do not offer refunds in the event of suspension or discharge.

In the Event of...

Accident or Injury

All of our staff are first aid/CPR certified. For minor injuries, we will administer first aid and fill out a report for you to review when you pick up your child. For major injuries, we will administer first aid/CPR, seek emergency medical attention, and notify you as soon as possible. Medical expenses incurred will be your responsibility.

Vehicle Failure or Traffic Accident

Our vehicles are equipped with first aid and trauma supplies. In the event of an accident, we will administer first aid/CPR, seek emergency medical attention, contact the authorities, and notify you as soon as possible.

Illness

Your children will be sent home if they have any of these symptoms:

- a temperature higher than 101.3°F
- intestinal disturbance accompanied by vomiting or diarrhea more than three times
- any undiagnosed rash
- sore or discharging eyes or ears
- profuse yellow or green nasal discharge
- diagnosed contagious disease such as strep throat or chicken pox
- any sign of lice

Your children must be symptom free for 24 hours before returning to the program, even if they are allowed to attend school. If your children were sent home due to a contagious disease, you must bring a doctor's note permitting them to return.

Fire

We will evacuate the old building and meet in the new building, or if both buildings are uninhabitable, we will go to the corner of 15th and Durbin Streets (Armory Park). Once we arrive at the evacuation site, we will await instructions from the fire department. You will be notified as soon as possible.

Severe Weather

For thunderstorms, we will remain indoors. For tornado warnings, we will remain in an on-site tornado shelter. For extremely unsafe driving conditions, we will cancel at our discretion, and notify you as soon as possible. We do not offer refunds in the event of unscheduled cancellations.

Please separate this Parent Handbook from the enrollment packet on the next page. Keep the Handbook for reference, and submit only the enrollment packet to the Welcome Center.

CASPER FAMILY YMCA SUMMER CAMP

CHILD INFORMATION

Legal First Name:	Legal Last Name:	Date of Birth:
Street:		<input type="checkbox"/> Male <input type="checkbox"/> Female
City:	State:	ZIP Code:

PARENT/GUARDIAN INFORMATION

Legal First Name:	Legal Last Name:	Date of Birth:
Street:		Relation to Child:
City:	State:	ZIP Code:
Primary Phone:	Secondary Phone:	Email:
Employer:	Employer Phone:	

PARENT/GUARDIAN INFORMATION

Legal First Name:	Legal Last Name:	Date of Birth:
Street:		Relation to Child:
City:	State:	ZIP Code:
Primary Phone:	Secondary Phone:	Email:
Employer:	Employer Phone:	

EMERGENCY CONTACT & AUTHORIZED PICK UP PERSON (MUST BE 18 OR OLDER)

Full Legal Name:	
Relation to Child:	Phone:

EMERGENCY CONTACT & AUTHORIZED PICK UP PERSON (MUST BE 18 OR OLDER)

Full Legal Name:	
Relation to Child:	Phone:

EMERGENCY CONTACT & AUTHORIZED PICK UP PERSON (MUST BE 18 OR OLDER)

Full Legal Name:	
Relation to Child:	Phone:

RESTRICTED PERSONS

Please provide copies of any applicable restraining orders or custody restrictions.

Full Legal Name:	Full Legal Name:
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CASPER FAMILY YMCA SUMMER CAMP

SCHOOL INFORMATION

School this fall:	Grade this fall:	Does your child qualify for free or reduced lunch? <input type="checkbox"/> Yes <input type="checkbox"/> No
Math Teacher this fall:		
Science Teacher this fall:		
Language Arts/Reading Teacher this fall:		

MEDICAL INFORMATION

Primary Care Provider:	Phone:
Dentist:	Phone:
Insurance Carrier:	Policy #:

HEALTH & BEHAVIOR INFORMATION

Please provide copies of your child's current immunization records.

Allergies, Reactions, Health Concerns:

Medications, Dose, Frequency, Adverse Reactions:

Chronic Medical Issues:

Disabilities, Classifications, or Special Conditions:

Behavior Concerns or "Need to Knows":

Is there any activity you do NOT want your child to participate in?

CASPER FAMILY YMCA SUMMER CAMP

RATE SCHEDULE

Please indicate your child's group. If your child is between grade categories, please see the program director.

Grades Pre-K-K

Grades 1-4

\$1199.99

\$1199.99

CCLC #10 (See program director.)

CCLC #10 (See program director.)

PERMISSIONS & AGREEMENTS

Initials ____ I give permission for the YMCA to transport my child in YMCA vehicles by authorized YMCA drivers.

Initials ____ I give permission for NCSD #1 to transport my child in school buses.

Initials ____ I give permission for my child to participate in field trips, swimming, and activities planned by YMCA staff.

Initials ____ I agree to let the YMCA use my child's photograph or video on YMCA websites, social media and printed promotional materials.

Initials ____ I give permission for YMCA staff to access school transcripts and communicate with school teachers regarding academic achievement.

Initials ____ I give permission for my child to receive first aid and CPR by qualified YMCA staff as necessary until emergency personnel arrive. I give consent for my child to be taken to the hospital to be treated by a physician. I agree to assume financial responsibility for such treatment.

Initials ____ I give permission for my child to be transported by emergency vehicles.

Initials ____ I have read, understand, and will adhere to all policies, procedures, and obligations set forth in the Parent Handbook.

Initials ____ I understand that payment must be made in full on or before the first day of summer camp.

Initials ____ I understand that no reduction in cost will be made for missed attendance, late arrivals, or early departures.

Initials ____ I understand that no refunds will be issued for any reason.

Signature: _____ Date: _____