

Summer Fun Camp Registration

Please fill out the form in full. The information you provide here will be processed prior to your arrival at our facility. Please submit one form per child.

Child's name: _____

Child's gender: Male ___ Female ___

Age: _____

Birth Date: _____

Grade next Fall: _____

Parent's names: _____

Address: _____

City: _____

State: _____

Zip code: _____

Home phone: _____

Cell phone: _____

Work phone: _____

Email address: _____

How did you hear about camp? _____

People allowed to pick up your child:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Scheduling Dates (2017)

Scheduled Weeks	Requested Days
No School day care June 5-9	Entire week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 1) June 12-16	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 2) June 19-23	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 3) June 26-30	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 4) July 3-7 (no camp July 4 th)	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 5) July 10-14	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 6) July 17-21	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 7) July 24-28	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 8) July 31-Aug 4	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 9) Aug 7-11	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 10) Aug 14-18	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
(Week 11) Aug 21-25	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__
No School day care Aug 28- Sept 1st	Entire Week__ Monday__ Tuesday__ Wednesday__ Thursday__ Friday__

Is your child in good health and can he/she participate without any accommodations? Yes____ No____

If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf.

Emergency Contact 1 name : _____

Phone: _____

Emergency Contact 2 name: _____

Phone: _____

Physician Name _____

Address and Phone: _____

Health History

Please provide as much information in this section as possible. Please indicate the approximate date of occurrence to all that apply.

Ear Infections _____ Measles _____ Penicillin _____ Poison Ivy _____

Asthma _____ Rheumatic Fever _____ German Measles _____ Chicken Pox _____

Insect Stings _____ Hay Fever _____ Convulsions _____ Mumps _____

Allergies: _____

Operations or Serious Illness: _____

Chronic or Recurring Illness: _____

Please indicate the dates of basic immunizations and most recent booster dates. It is also required that you provide us with a copy of the child's immunization records before your child's first day at camp.

OPT Series _____ German measles _____ Measles (Live) _____ Tetanus Booster _____

Typhoid _____ Other _____ Mumps Vaccines _____ Small Pox _____

Polio (sabin) _____ Tuberculin test _____

Upon submission of this form, the parent or guardian is granting permission for the child to be transported by Fun Unleashed personal vehicles, or by its contracted providers to and from Fun Unleashed Summer Camp, Day trips, or extra -curricular activities. The health information indicated here is correct to the best of my knowledge. The child has permission to engage in all prescribed activities unless otherwise noted. In the event of an emergency, if the parent or guardian cannot be reached, permission is granted to the physician selected by the Fun Unleashed Summer Camp Director to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for this child. Further authorization is given to the Fun Unleashed Summer Camp Director or his designee to provide over-the-counter medication to this child as necessary. The parent or guardian also agrees that in the case of injury to his or her child that is due to natural cause or by accident which involved no neglect by any Summer Camp staff that Fun Unleashed Summer Camp or the staff will not be held liable. Fun Unleashed Summer Camp reserves the right to change a trip location without prior notice. Fun Unleashed Summer Camp has permission to transport my child to and from camp activities as needed.

Parent's Signature

Date

Fun Unleashed

339 Benner Pike

Office: (814) 238-8780

PHOTO CONSENT

I give permission for my child _____ to be photographed while

Child's Name

attending Fun Unleashed Summer Camp. I understand that the photographs and images (to include FIRST name only) to be used for:

- Display at Fun Unleashed Summer Camp
- Publications (flyers, newspapers, etc.)
- Publicity for Fun Unleashed Summer Camp (TV commercials, etc.)
- Fun Unleashed Summer Camp website
- Facebook

I understand that there are potential dangers associated with the posting of personally identifying on a website since global access to the internet does not allow us to control who may access such information. These dangers have always existed, however we, as schools, want to celebrate your child and his/her work. The law requires that we ask your permission to use information about your child. Pursuant to law, we will not release any personally identifiable information without permission from you as a parent or guardian. Personally identifiable information includes your child's first name or image (see below). If you, as the parent or guardian, wish to rescind this agreement, you may do so in writing at any time by sending a letter to Fun Unleashed Summer Camp and such recession will take effect upon receipt by Fun Unleashed Summer Camp. This consent releases from all liability all personnel of the Summer Camp, and any others who have received permission at the camp or at camp related activities.

___ I/we GRANT permission for this child's photo/image and first name ONLY to be published on the Fun Unleashed website, Fun Unleashed Facebook page, displayed at Fun Unleashed Summer Camp, in publications for Fun Unleashed Summer Camp, or publicity for Fun Unleashed Summer Camp.

___ I/we do NOT GRANT permission for this child's photo/image and first name ONLY to be published on the Fun Unleashed website, Fun Unleashed Facebook page, displayed at Fun Unleashed Summer Camp, in publications for Fun Unleashed Summer Camp, or publicity for Fun Unleashed Summer Camp.

Student's name (please print) _____ Grade _____

Print name of Parent or Guardian _____

Signature or Parent or Guardian _____

Relationship to child _____ Date _____

Fun Unleashed

339 Benner Pike

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OVER THE COUNTER MED ADMINISTRATION FORM

I give Fun Unleashed Summer Camp permission to administer over the counter medication as listed below when Fun Unleashed Summer Camp deems necessary or as outlined by you below.

Child's name: _____

My child is enrolled in the Summer Camp

_____ Acetaminophen Dosage/Frequency _____

_____ Ibuprofen Dosage/Frequency _____

_____ Antacid Dosage/Frequency _____

_____ Benadryl Dosage/Frequency _____

_____ Other (please specify) _____
_____ Dosage/Frequency _____

I give permission for Fun Unleashed Summer Camp to dispense the above medications to me child as noted above.

Comments _____

Parent's Signature: _____ Date: _____

Fun Unleashed

339 Benner Pike

Office: (814) 238-8780

PARENTAL PERMISSION SLIP

Please fill out parental permission slip below for all off-site trips your child is planning on attending.

My child _____ has permission to attend off-site field trips with Fun Unleashed Summer Camp. Possible trip locations include, but are not limited to the following destinations. The finalized trip schedule will be available prior to the beginning of Summer Camp.

Bowling, Local and State Parks, Spike's Stadium, Indian Caverns, Mini Golf, Park Forest and Welch, Delgrosso Park, fairs and festivals as well as other locations. Fun Unleashed reserves the right to adjust program scheduling as weather permits and facility availability.

Is your child a Non-swimmer Beginner Swimmer Parent Initials _____

Parent's Authorization: This health history is correct as far as I know, and the child herein described has the permission to engage in all activity, except as noted by me. In the event I cannot be reached in case of an emergency, I hereby give permission by the physician selected by Fun Unleashed Summer Camp Director to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child. I further authorize the Fun Unleashed Camp Director or his designee to provide over-the-counter medications to my child in case of necessity.

I understand that all trips are off-site and that my child will be transported by bus or other vehicle to each site location. I agree that in case of injury to my child that is due to natural causes or accident not related to neglect by Fun Unleashed Summer Camp staff that I will not hold Fun Unleashed Summer Camp or its staff responsible or liable for such occurrence. Fun Unleashed Summer Camp has the right to change a trip location without prior notice to the parent or guardian.

I UNDERSTAND THAT I SHOULD CALL BEFORE PICKING UP MY CHILD(REN) ON TRIP DAYS IN CASE OUR SCHEDULED RETURN TIME HAS CHANGED DUE TO UNFORESEEN CIRCUMSTANCES.

Parent's Signature _____ Date _____

Mail this form ASAP to: Emergency Notifications Number _____

Fun Unleashed Summer Camp

339 Benner Pike

State College, PA 16801

GENERAL POLICIES AND PROCEDURES

PERSONAL PROPERTY:

Cell phones, Game Boys, and other electronic equipment are **NOT ALLOWED** for any reason at the camp facility. All other personal property **MUST** have your child's name clearly written on each item. Fun Unleashed Summer Camp is NOT responsible for lost, stolen, damaged items including but not limited to those left overnight at the facility.

CLOTHES:

Children should wear or bring sneakers AND SOCKS everyday. Clothing should be weather appropriate and children should **bring a bathing suit** and a towel on scheduled water activity days.

SUN PROTECTION:

Please put sun protection on your child prior to coming to Fun Unleashed Summer Camp (SPF 30 or higher is recommended) . We ask that you also send labelled sun protection with your child to Camp on days when water activities are scheduled.

LOST AND FOUND:

Lost and found items are displayed near the front door every day. These items will be kept for a short period before they will be donated. PLEASE remember it is important to correctly and clearly label all your child's items with his/her name.

SCHEDULE:

Summer Camp will follow the same basic schedule every day except for field trip days.

- | | |
|---------------------------------|---------------------------------|
| A. Camp Hours – 8am to 530 pm | G. Activity 3 – 1pm to 215pm |
| B. Drop Off – 8 to 9am | H. Snack Break – 330pm to 345pm |
| C. Activity 1 – 915am to 1030am | I. Free Play – 345pm to 530pm |
| D. Lunch – 1215pm to 1pm | |

SIGN IN AND OUT:

All children must be signed in and out at the front main desk. Parents must also show ID when picking up their child. No child will be released without an ID. Remember to notify Fun Unleashed Summer Camp if someone other than yourself is to be picking up your child(ren).

DROP OFF:

Children must be walked INTO the building. Parent or authorized individuals should sign each child in. **At NO TIME should you drop off your child at the front door.** When picking up your child, you **MUST** come in and sign your child out at the front desk. This is for the safety of your children.

LUNCH:

Lunch is NOT included in weekly fee, but lunch will be available for purchase daily at a cost of \$2.50 per child. Menus will be provided weekly. An afternoon snack is included in your weekly fees.

SNACKS:

Additional snacks are available at our snack bar area. **WE RECOMMEND THAT PARENTS PAY FOR ANY ADDITIONAL SNACKS AT THE BEGINNING OF THE WEEK. PREPAID MONEY WILL BE KEPT IN A "BANK" AND A SNACK LOG WILL BE MAINTAINED FOR EACH CHILD.**

DINNER:

We can prepare large pizza at a cost of \$10 each for you to take home for dinner at your request.

DISCIPLINE POLICY:

The Summer Camp Director reserves the right to suspend or expel a child at any time due to misbehavior. A **ZERO TOLERANCE** policy rule is in effect for any child who demonstrates conduct that could cause harm to themselves, another child, or any staff member. **Vulgar language will NOT be tolerated.** Disrespect towards another child or staff member will not be tolerated. A staff member will call or personally speak to a parent of any child demonstrating misconduct. In-camp consequences include time outs or loss of participation in selected camp activities.

Financial Policies:

There is a non-refundable registration fee of 25 dollars per child. No credits or refunds will be given in the event of a child's absence. **Payment is expected for days registered that are not attended except in cases of SERIOUS illness. If you know your child cannot come to a day registered, one (1) week prior notice is required to avoid charges.**

Make checks payable to:

Fun Unleashed

Payment is due MONDAY of the week you are paying for.

SUMMER CAMP FEES

Daily Rate	\$30 Daily (minimum 2 days per week. Does not include field trip and swimming fees)
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Weekly Rate	\$120 per week or \$150 per week for stay and play until 530pm
Registration Fee	\$25
Sibling Discount	10% per sibling

TRIPS:

Please make sure your child has sunscreen applied before arriving at Fun Unleashed Summer Camp. Also, please provide all needed items for your child to have an enjoyable day! **DUE TO UNFORESEEN CIRCUMSTANCES, IT IS EXTREMELY IMPORTANT YOU CALL FUN UNLEASHED BEFORE PICKING UP YOUR CHILD(REN) ON TRIP DAYS TO BE SURE THAT WE ARE RETURNING AS SCHEDULED.**

Fun Unleashed reserve the right to change a trip location without prior notice to a parent or guardian. Changes will be made due to weather, availability, or safety concerns as needed. Fun Unleashed also reserves the right to change any daily activity Monday through Friday as it deems appropriate for the benefit of your child. This may include the transporting of your child to an off-site location for an unscheduled trip. It is imperative that your child arrive each day **by 9AM** except where indicated differently. Buses should return to site no later than 530pm.