



# Adams Traditional Summer Camp



**Open to Preschool through 8th grade**

**Parent Handbook  
&  
Statement of Services**

602-938-5517

A Choice Services, LLC. School

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To register please remove pages 8-13 and return to the school with all necessary paperwork.

**ALL items on the checklist and the \$50 registration fee must be received**  
to complete your child's enrollment.

Choice Academies, Inc. Reserves the right to make changes to this statement of services at any time.

## **Mission Statement**

The Summer Camp program offers a safe and nurturing environment to enrich the lives of children from grade level Preschool (age 3 and older and fully potty trained) through 8th grade. The Summer Camp program will provide families the security and confidence that their child is in the care of competent and skilled staff creating a sense of community among all grade levels.

## **Program Goals**

The goal of our summer camp program is to provide a secure environment for self-discovery, team-building and creative expression. Each day will offer something new, indoor and outdoor fun, individual activities and group play, recreational and flexible learning experiences. Campers will be supported in developing self-confidence through social interactions and skill building projects.

## **Our Staff**

Members of our staff are CPR and First Aid certified, hold valid fingerprint clearance cards, have passed background checks, and are well-trained in the care of children of all ages.

### **Hours of Operation**

Monday through Friday

**May 29 — July 26\***

**6:30 a.m. to 6:00 p.m.**

\*The program begins on Wednesday due to Memorial Day and staff training.

-No Camp July 4th

Camp releases one week before the start of school to allow for classroom preparation

### **Payment of Fees**

Payment is due in **advance** each Friday for your child's participation for the next week.

Fees not paid by your child's first day of attendance each week will be assessed a \$10 late fee, which must be paid prior to your child returning to camp.

### **Contact Information**

Mrs. Gold, 1<sup>st</sup>-8<sup>th</sup> Grade Camp Coordinator

Phone: 602-938-5517 ext. 137

E-mail: [cgold@atachoice.org](mailto:cgold@atachoice.org)

Mrs. DeAngelis, PK/Kinder Camp Coordinator

Phone: 602-938-5517 ext. 300

E-mail: [ldangelis@atbchoice.org](mailto:ldangelis@atbchoice.org)

Miss Vargas, PK/Kinder Receptionist

Phone: 602-938-5517 ext. 327

Email: [kvargas@atbchoice.org](mailto:kvargas@atbchoice.org)

Mrs. Preston, Account Manager

Phone: 602-938-5517 ext. 106

E-mail: [cpreston@choiceacademies.org](mailto:cpreston@choiceacademies.org)

### **Program Fees**

Registered and non-registered students of the school are welcome to join. We are accepting children going into preschool (age 3 and completely potty trained) through 8th grade. Students who have not yet completed kindergarten will attend the preschool summer camp program.

\$42.00 camp fee per child per day.

\$185.00 per week for students who attend the full week.

\*Short weeks will be billed at \$42 per day

All fees must be paid one week in advance.

10% Multi-child discount. Oldest child pays full price. The 10% discounted rate is then applied to each additional child.

### **Registration Fee**

A non-refundable registration fee of \$50.00 per child is due at the time of program enrollment with a completed packet.

### **Late Pick-Up Fee:**

The program closes at 6:00 p.m. Students who are picked up after the program closes will be assessed a late pick-up fee of \$10.00 in addition to \$1.00 per minute that he/she is in the program after 6:00 p.m.

### **Children Not Registered**

Children not registered will be charged a drop-in rate of \$50.00 per day. Payment is due at time of service. Required documents and forms must still be provided as listed on the enrollment checklist

### **How and Where to Pay**

Payment may be paid at the school by cash, check, or money order. Checks and money orders should be made payable to Adams Traditional Beginnings or ATB. Payment can be made to either the front desk or in one of the payment drop boxes located in the multi-purpose room and the front office. Please do not put cash in the drop boxes. Credit card payments may be made online via our website [www.choiceacademiespayonline.org](http://www.choiceacademiespayonline.org). Field trip payments should be made separately from camp fees. Please see page 5 for more information.

### **Toileting**

Adams Traditional Beginnings holds a state license for three year olds who are fully potty-trained. A child who is potty-trained is capable of using child size and adult size toilets, recognizes the need to use the restroom without reminders and can independently manage cleaning themselves and redressing. An occasional belt, zipper, or button may require an adult's assistance. Toileting accidents will be handled discretely and in a caring manner. If a child is experiencing three or more accidents in a week, we reserve the right to place your child on a re-training plan that will include time away from school.

### **Late Pick-Up**

The program closes at precisely 6:00 p.m. Students who are picked up after the program closes will be assessed a late pick-up fee of \$10.00 in addition to \$1.00 per minute that he/she is in the program after 6:00 p.m. Any student left one hour after the normal operating hours will be considered abandoned, and the proper authorities will be notified.

### **Non-Payment**

Payment is due in **advance** no later than Friday each week for your child's participation for the next week. Fees not paid by your child's first day of attendance each week will be assessed a \$10 late fee, which must be paid prior to your child returning to camp. A credit will be applied to your child's account for any unused days that have been paid for in excess of weekly fees. A balance owed carries forward and prevents your child, and his or her siblings, from participating in after-school programs.

### **Discounts**

**10% multi-child discount.** The oldest child pays full price. The discount is then applied to each child after the oldest child. No discount applies to the registration fee.

### **Enrollment/Disenrollment**

Children who enroll in the Summer Camp program must complete a registration packet before the child(ren) can attend Summer Camp. Should a child be withdrawn prior to the end of Summer Camp, charges will be based on the days of attendance in the program. No advance notice is required to withdraw your child(ren) from the program.

### **Daily Sign-In and Sign-Out**

Only individuals listed on the emergency blue cards will be allowed to pick-up students from Summer Camp. Authorized individuals listed on the child's emergency blue card will be required to sign-in the child at drop-off and sign-out the child at pick-up, in accordance with state requirements. In the event your child will be picked up by someone not listed on your emergency blue card, you must call the school and provide phone authorization. This phone authorized person will be required to show photo identification before the release of a child.

### **Electronic Clock-In/Clock-Out Procedures**

1. Go to one of the computers in the multi-purpose room
2. Click on the "Child" icon
3. Type in YOUR personal four digit pin number
4. Verify your child's name appears
5. Press Enter

Once you have completed the electronic clock-in/clock-out, please proceed to the sign-in/sign-out sheets.

The sign-in sheets are audited by the state and are required to be filled in properly. If for any reason an error is present on your child's sign-in sheet, a staff member is REQUIRED to ask for you to correct the line item. Please assist us in keeping these records clear and precise by following these guidelines:

- \* Make certain you are signing your full name on YOUR child's line.
- \* Please use the appropriate time at drop-off and pick-up. Do not PRE-SIGN any line for any reason.
- \* Due to the nature of our state audits, please note the exact time to the minute.
- \* Please make sure your signature is clear and legible.
- \* Please instruct anyone picking up for you that this process is extremely important and to have identification ready.

### Meals/Snacks

Breakfast and lunch will not be served. Please bring a sack lunch from home for your child(ren) each day. Students should also bring nutritious snacks to eat throughout the day. Free and reduced meals are not available during Summer Camp.

### Transportation

Transportation will be provided for any scheduled field trips. Otherwise, there will be no transportation provided to and from the Summer Camp program. There will be no off-campus field trips for preschool/kindergarten aged children.

### Child Records/Updates

It is extremely important the Summer Camp program receive prompt updates regarding any address or phone number changes as well as any illness, allergy or family circumstances that may need to be on record. Never hesitate to inform the Summer Camp program of anything that may be affecting your child personally. Our staff is obligated to keep information you share confidential, and it may assist in handling situations arising during their day.

### Pick-up/Drop-off Location

1<sup>st</sup>-8<sup>th</sup> Grade Summer Camp program is located at:  
Adams Traditional Academy (South side of Bldg. A)  
2323 W. Parkside Ln.  
Phoenix, AZ 85027  
602-938-5517 ext. 318

Preschool/Kindergarten Summer Camp is located at:  
Adams Traditional Beginnings (Bldg. B)  
2333 W Parkside Ln.  
Phoenix, AZ 85027  
602-938-5517 Ext. 327

1<sup>st</sup>-8<sup>th</sup> grade pick-up and drop-off will occur in the multi-purpose room at ATA (Bldg. A). Please use the South entrance. Preschool/Kindergarten Summer Camp pick-up and drop-off will occur through the preschool lobby in Building B.

For children participating in the Summer Camp program, a parent or authorized adult will need to take the child directly to the Summer Camp program. **Do not drop your child off in the parking lot and leave. A parent or authorized adult will be responsible for the sign-in and sign-out of the student.** It is the responsibility of the parent or authorized adult to sign-out the child everyday. If a child is not signed out, the time will automatically default to the maximum charge for the day. Depending on the schedule of Summer Camp, your child may be on the playground when you come to pick-up your child. Please inform a staff member you are here to take your child home. Once you have your child, sign him/her out upon leaving Summer Camp. The child must be in your possession upon sign-out.

### Discipline Guidelines

The staff members and administration of the Summer Camp program will use every opportunity to reinforce proper behavior and redirect improper behavior. If a child exhibits behavior that is harmful to himself, others or property, or acts disrespectfully or defiantly, consequences will be imposed. Forms of discipline used in accordance with the age and circumstances of the infraction include, time-out, losing recess or other privileges, phone call to the parents, removal from the program for the day, and suspension from the program. If a child's behavior continues to disrupt or interfere with the objectives of the Summer Camp program or if the child's behavior has shown malice toward another student more than three times, the students enrollment will be terminated with no refund granted. Snacks and meals will not be withheld for discipline purposes.

### **Parking Lot and Campus Safety**

Please follow all directional arrows in the parking lot and drive at slow, safe speeds to ensure the safety of our families and staff. All children are required to be brought into the facility by an adult. Children will be in the presence of a qualified staff member at all times while on campus.

### **Fire Drill and Evacuation**

Fire drills may be conducted during the normal operating hours of Summer Camp. The children will practice proper procedure for lining up, where to evacuate away from the building, the importance of following instructions, remaining quiet and calm, and to remain with the group. It is helpful if parents have a discussion with their young children regarding these safety practices.

### **Field Trip Information (1st-8th grade)**

1<sup>st</sup>-8<sup>th</sup> grade campers have the opportunity to attend field trips as part of the Summer Camp program. Field trips are held Tuesdays and Thursdays. A schedule of field trip times, locations and fees will be given the first day of summer camp.

**Fees and permission forms must be returned no later the Friday of the week before the field trip.** Due to payment processing requirements, late registrations will not be accepted. Students not attending the field trip will enjoy supervised activities on campus. **Field trip fees are non-refundable.** If you'd like your child to have extra money to purchase items not included in the field trip fee, please send it with your child on the day of the field trip. Extra money sent will be your child's responsibility. Please refer to page 2 (How and Where to Pay) for payment options.

### **Field Trip Information (Preschool-Kindergarten)**

Preschool and Kindergarten campers will enjoy special guests and activities planned as on-site field trips at least once each week. Payments may be made at the front desk or see page 2 for more payment options. Please pay field trip fee separately from camp fees.

### **Tablet/iPad Policy**

Summer Camp will have many engaging activities for campers to participate in. The 1<sup>st</sup>-8<sup>th</sup> grade Summer Camp staff has decided that tablets and iPads will be allowed at camp. 1<sup>st</sup> through 8<sup>th</sup> grade Summer Campers will be allowed up to one hour per day to use their devices during snack, free time, or lunch.

The preschool/kinder camp does not allow tablets and iPads to be brought with a student.

In order for your child to bring their tablet or iPad, a contract need to be signed by the summer camp participant, parent, and Summer Camp director. Contracts will be handed out on the first day of camp.

If you choose to bring a personal device to campus, you do so at your own risk. All personal items should be clearly marked with your child's full name. Summer Camp will not be held responsible for lost or damaged items. Misuse of these devices is subject to disciplinary action and confiscation of the device, and the device will be returned to the parent.

### **Online Payment Information**

Choice Academies accepts payments made through Edutrak, an online payment system. Payments for lunch, Kindergarten Enrichment, Eagles' Nest, Summer Camp, and after-school sports and enrichment activities are accepted. You may even make your tax credit donation online.

Credit card and debit card transactions have a \$2.00 per use fee. You are under no obligation to use this system. Cash and checks are still accepted at the front office for all payments for all programs. We do not accept credit cards on campus.

It is easy to get started. Our online payment site is [www.choiceacademiespayonline.org](http://www.choiceacademiespayonline.org). Family Key information is not required to make payments for Summer Camp. Once you are logged into the website, go to the school of your choice (ATA or ATB) and select the summer camp icon for the payment you are making. Follow instructions to complete your payment. If you need assistance completing an online payment, contact the business department at 602-938-5517.

### **Emergency and Medication Policy**

Proper authorization forms will be required to have a staff member administer any prescription medication. Only prescribed medication in its original container with doctors instructions posted will be administered at camp. All medications are kept under lock and key. In case of illness, a parent will be contacted for the child's retrieval within a reasonable time frame. When a parent cannot be reached, the secondary contact person from the enrollment information will be contacted. In case of fire, accident, evacuation or other school emergency, the Summer Camp staff will follow procedures appropriate for the circumstances and authorities will be called upon for assistance

### **Health Policy**

We care greatly for the well being of our families and staff. For that reason we want to keep the spread of illness and infection to a minimum. If your child has experienced any of the following in the past 24 hours, please keep him or her at home.

- |                                       |   |
|---------------------------------------|---|
| 1. Fever of 100 or more*              | 6. Conjunctivitis                         |
| 2. Vomiting                           | 7. Unexplained rash                       |
| 3. Persistent diarrhea                | 8. Head lice                              |
| 4. Flu symptoms                       | 9. Rapid or labored breathing             |
| 5. Severe cold symptoms (green mucus) | 10. Other contagious illness or infection |

\* Your child may return to camp once the aid of medication for fever is no longer needed.

**Campers are welcome to return once symptom-free for 24 hours without the aid of medication.** A slight cough and slight runny nose, as long as it is clear, are not reason enough to keep a child home. If your child becomes mildly ill while at camp, we will keep him/her comfortable and isolated from the rest of the campers. You will be notified immediately to pick up your child. If you are not reachable, the emergency contacts listed on the **blue** card will be called and asked to pick-up your child in a timely manner. We ask that you inform the school of any contagious illnesses so we can post an alert on the Parent Information Board.

**Injury:** If your child is injured and needs anything beyond simple first aid treatment, a staff member will determine whether there is time to consult a parent by phone or pursue emergency services first. An incident report will be filled out and any first aid given by the school will be noted within 24 hours. When a child needs to be transported, parents will be notified to meet at the hospital and a staff member will accompany the child to the hospital. All emergency phone numbers are kept in a centrally located binder.

**Allergies:** Parents should notify staff if the student has any allergies.

**Hazardous Materials:** All toxic and hazardous items will be kept out of the reach of children.

**Cleaning:** Tables and counters will be sanitized routinely throughout the day. Restroom cleanliness will be monitored frequently. Professional cleaning services will be utilized daily.

**Infection Control:** Children will be instructed to keep hands clean especially after toileting and in preparation for snacks and meals.

### **Licensing**

The Summer Camp program is regulated by the Arizona Department of Health Services, Bureau of Child Care Licensing located at 150 N. 18th Ave., Suite 400, Phoenix, AZ 85007. Arizona Department of Health Services can be reached via phone at, 602-364-2539, toll-free 800-615-8555, fax 602-364-4768.

Inspection reports from the Arizona Department of Health Services are available on site.

### **Insurance**

Liability insurance for Adams Traditional Beginnings is carried by Choice Services, LLC. through Hanover Insurance Company. Documentation of the liability insurance coverage is available for review on site.

### **Pest & Weed Control**

Adams Traditional Academy and Adams Traditional Beginnings routinely has the premises sprayed with pesticide. A notice will be posted in the Building A lobby a minimum of 48 hours before the pesticide is applied to the facility's premises and remain posted for 48 hours after application. Records will be maintained and may be accessed on site.

**Insect Control** is done monthly by Griffin Pest Control.

1. Posting of pest control will be 48 hours in advance of application.
2. Posting will include name of chemical/s, concentration, and location of application.
3. MSDS of each applied pesticide is located within the pest control binder.
4. The pest control binder includes license, insurance, MSDS, and a record of applications for a 24 month period.

**Weed Control** is done quarterly by Arizona Weed Guard.

1. Posting of weed control will be 48 hours in advance of application.
2. Posting will include name of chemical(s), concentration, and location of application.
3. MSDS of each weed spray application is located within the pest control binder.
4. The pest control binder includes license, insurance, MSDS, and a record of applications for a 24 month period.





Adams Traditional Camp  
2323 W. Parkside Lane  
Phoenix, Arizona 85027  
Phone: 602-938-5517  
www.atachoice.org  
www.atbchoice.org

## Registration and Enrollment Checklist

Child Name \_\_\_\_\_

Child Name \_\_\_\_\_

Child Name \_\_\_\_\_

Child Name \_\_\_\_\_

Fill out registration packet and return to the front office.  
Incomplete forms will not be accepted.

### **Items needed to complete registration process:**

- \_\_\_\_\_ 1. Completion of registration and payment policy form with parent signature
- \_\_\_\_\_ 2. Completion of the emergency blue card for each child
- \_\_\_\_\_ 3. Copy of immunization records for each child
- \_\_\_\_\_ 4. Copy of reliable proof of the child's identity and age
- \_\_\_\_\_ 5. Media release form
- \_\_\_\_\_ 6. Sunscreen application form
- \_\_\_\_\_ 7. First aid authorization form
- \_\_\_\_\_ 8. Registration fee **and** payment for the first week of camp attendance for each child.

All supporting documentation must be submitted with the registration form.  
Incomplete packets will not be accepted.

For Office Use Only:

Completed Packet Received By: \_\_\_\_\_ Date: \_\_\_\_\_





### Registration

Child Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male / Female PreK-Kinder / 1-8

Child Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male / Female PreK-Kinder / 1-8

Child Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male / Female PreK-Kinder / 1-8

Child Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male / Female PreK-Kinder / 1-8

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

School student normally attends: \_\_\_\_\_

Child lives with? \_\_\_ Both parents \_\_\_ Mother \_\_\_ Father \_\_\_ Other (specify) \_\_\_\_\_

Please tell us any special needs or important information regarding your child(ren):

\_\_\_\_\_  
\_\_\_\_\_

### Parent Contact Information

Mother/Guardian: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_

Father/Guardian: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_

### Authorized Adults - Must be listed on emergency blue card

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_



## Payment Policy



### **Program Fees:**

\$50 registration fee per child. (No discounts apply).

Children Not Registered will be charged a drop-in rate of \$50 per day. Payment is due at time of service.

Camp Fees: \$42 camp fee per child per day. \$185.00 camp fee per week for students who attend the full week. All fees must be paid in advance.

Late Fee: The program closes at 6:00 p.m. Students who are picked up after the program closes at will be assessed a late pick-up fee of \$10.00 in addition to \$1.00 per minute that he/she is in the program after 6:00 p.m.

10% multi-child discount: Oldest child pays full price. The discount is then applied to each child after the first child.

Scheduling: Parents are asked to provide a schedule of days they intend to use the service. Calendars are due by Wednesday of the previous week. This will assist in staffing and activity preparation. Students will not be charged for days scheduled or absent.

Payment Schedule: Camp fees must be paid **in advance** each week. Fees not paid by your child's first day of attendance each week will be assessed a \$10 late fee, which must be paid prior to your child returning to camp. A credit will be applied to your child's account for any funds that have been paid for in excess of the weekly fees.

**\*Statements will be available every Monday for the previous week's services. Please indicate the email address to receive statements.**

**Email my statements to \_\_\_\_\_**

Payment may be paid at the school by cash, check, or money order. Fees should be made payable to Adams Traditional Beginnings or ATB. Payment can be made to either the front desk or in one of the payment drop boxes located in the multi-purpose room and the front office. Please do not put cash in any drop box. Credit Card payments may be made online via our website [www.choiceacademiespayonline.org](http://www.choiceacademiespayonline.org). Please see page 8 for more information.

### **Please initial each statement of understanding:**

\_\_\_\_\_ I understand that the registration fee is non-refundable and no discounts are given.

\_\_\_\_\_ I understand the fee schedule and when payment is due.

\_\_\_\_\_ I understand that the program closes at 6:00 p.m. My child will be assessed a late pick-up fee of \$10.00 in addition to \$1.00 per minute that he/she is in the program after 6:00 p.m.

\_\_\_\_\_ I understand that breakfast and lunch are not provided. Field trips and associated fees are in addition to attendance charges.

Signature of person responsible for payment \_\_\_\_\_ Date \_\_\_\_\_





## Media Release

I hereby agree and give my permission for Choice Academies, including Adams Traditional Academy and Adams Traditional beginnings, to record, film, photograph, audiotape or videotape my child's name, image, likeness, spoken words, student work, performance and movement, in any form (hereinafter collectively referred to as "Works"), and to display, publish, distribute or exhibit these Works or any part thereof for the purpose of and in connection with any material that may be created by Choice Academies, including, without limitation, for posting on any Choice Academies website and/or for distribution in print or broadcast media. I hereby further agree that Choice Academies is the sole owner of all rights, title and interest, including copyrights in such Works and any parts thereof for all purposes, as Choice Academies shall determine in their sole discretion without limitation, reservation or compensation to me or my child.

By entering into this informed consent and release and granting the permission as stated herein, I am expressly authorizing Choice Academies to use, in whole or in part, my child's name, likeness, image, spoken words, student work, performance and movement in connection with any materials for Choice Academies, including without limitation, in all manner and media, as Choice Academies determines in their sole discretion. I also understand that Choice Academies shall own all rights, title and interest, including the copyright(s), in and to the materials, to be used and disposed in perpetuity without limitation as Choice Academies shall determine at their sole discretion.

By entering into this informed consent and release and granting the permission as stated herein, I also am releasing Choice Academies and their respective officers, directors, agents and/or employees from and against any and all liability, loss, damage, costs, claims and/or causes of action arising out of or related to my son/daughter's participation in any media events, including, without limitation, television broadcasts, promotional materials or website projects.

### Choose one Option:

\_\_\_\_\_ I have read this Informed Consent and Release and understand its terms. I sign it voluntarily and with full knowledge and acceptance of its significance.

\_\_\_\_\_ I am declining permission for use of my child's work or image for any and all media.

\_\_\_\_\_ I agree to this media release with the exception of any or all websites.

Child Name (Please Print) \_\_\_\_\_

Child Name (Please Print) \_\_\_\_\_

Child Name (Please Print) \_\_\_\_\_

Parent/Guardian Name (Please Print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_







## First Aid Release

- Summer Camp staff will administer the following procedures as necessary. With this knowledge I hereby give consent for my child to receive the following first aid treatments (check all that apply).

\_\_\_\_\_ Bandages (non-latex)

\_\_\_\_\_ Ice Pack

- Bring the medication to your child's summer camp staff in the original packaging from the pharmacist. This includes Epi-pens and any other prescriptions. Epi-pens **MUST** be stored on campus in the original box it was presented in with all labeling visible and accurate to your child. The Epi-pen itself must also have a prescribed label on it.
- If you are providing any over-the-counter medication for allergies, coughs, etc. for a preschool or kindergarten student, it **MUST** specifically be stated for the use of children 3, 4 or 5. **MOST** over-the-counter medication for children states "if a child is 3 or younger, use with the advise of a physician". **IF** this is on the medication you are providing, **IT MUST BE ACCOMPANIED** with the doctor's orders for use. If you do not provide written doctor instructions, we can **NOT** keep it on campus.

Child's Name (Please Print) \_\_\_\_\_

Child's Name (Please Print) \_\_\_\_\_

Child's Name (Please Print) \_\_\_\_\_

Child's Name (Please Print) \_\_\_\_\_

Parent/Guardian Name (Please Print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_





## Parent/Guardian Permission to Apply Sunscreen to Child

Child Name: \_\_\_\_\_

Child Name: \_\_\_\_\_

Child Name: \_\_\_\_\_

Child Name: \_\_\_\_\_

As the parent or guardian of the above child, I give my permission for summer camp staff to reapply sunscreen product SPF-15 or higher to my child, as specified below when he or she will be playing in water. I understand that sunscreen may be applied to exposed skin, including but not limited to the face, tops of the ears, bare shoulders, arms and legs. I have checked all applicable information regarding the type and use of sunscreen for my child.

\_\_\_ I do not know of any allergies my child has to sunscreen.

\_\_\_ Staff may use the sunscreen provided by the parent following the directions and recommendations printed on the bottle. The child's name must be marked on the bottle.

\_\_\_ My child is allergic to the following sunscreens: \_\_\_\_\_

\_\_\_ Please do not apply sunscreen to my child

Parent/Guardian full name (print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Important information we need to know:

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