

County Commissioners of Kent County, MD Department of Parks & Recreation 2021 Summer Camp Registration Information Kiddie Camp, Day Camp & Youth In Action Camp



May 10, 2021

Dear Summer Camp Parent/Guardian,

In an effort to make the summer camp registration process easier, this letter will provide you with a list of items that <u>MUST</u> be completed on the registration form <u>BEFORE</u> your child/children can be enrolled in a summer camp program with Kent County Parks and Recreation. If one or more items are incomplete or missing, the registration forms will be returned to you. This may cause your child/children to have a delayed enrollment into program and to possibly be added to a waiting list. A checklist has been provided below.

No registration forms will be accepted via facsimile **No registration forms will be accepted via email**

 Parent/Guardian Signature on all lines that require a parent/guardian signature
_Participant Signature on the Code of Conduct Agreement
 _Children ages 6 and older must print or sign own name. Parent must not sign for child.
 _Immunization Information (Must indicate if child is exempt)
 Family Physician's Name and Phone Number
Medical Insurance Carrier and Group/Policy Number
 Child's T-Shirt Size (Please indicate whether Child or Adult size)
Sessions your child will attend (All: 1-8 or Individual: 2,3,6,7, etc.)
Child Pick-Up Authorization (Kent County Parks and Recreation will not release a child to anyone
not listed. It is the parent/guardian's responsibility to update the list)
_Medication Authorization Form (Must be signed by the prescriber/physician for a child who currently
takes medication and will need dosage(s) administered during camp hours)
_*Documents needed to support a Scholarship Application
First page of previous year's federal taxes AND (2) consecutive pay stubs for each adult

- First page of previous year's federal taxes <u>AND</u> (2) consecutive pay stubs <u>for each adult parent</u> in household <u>OR</u>
- ➤ Verification (original letter on official letterhead) from agency that verifies you receive assistance *A Priority Partners Insurance Card is not acceptable verification*.

*If previously approved for a scholarship for the current year (September-August) a new scholarship application is not required.

\$85 (Resident) / \$102 (Non-Resident) Non-refundable deposit to secure child's spot and will be applied to child's first session.

➤ If applying for a scholarship, the deposit is required. The deposit may be made in (2) installments, with a minimum of \$42.50 (Resident) / \$51(Non-Resident) due at time of registration and the remaining deposit balance due by June 11.

Thank you for your attention and care in ensuring a smooth enrollment process. Should you have any questions or concerns about summer camp program enrollment or in general, please feel free to call us at 410-778-2083 or email info@KentParksAndRec.org.

Sincerely,

Kent County Parks and Recreation

2021 Summer Camp Program Dates:

Session 1: June 28 – July 2

Session 2: July 5 – July 9 Session 3: July 12 – July 16

Session 5. July 12 – July 16

Session 4: July 19 – July 23 Session 5: July 26 – July 30

Session 6: August 2 – August 6

Session 7: August 9 - August 13

Session 8: August 16 – August 20

Enrollment Confirmation and Scholarship Award Notification:

Sent within (2) weeks of receipt of registration (pending all documentation is in order).

~Kent County Parks & Recreation 2021 Summer Camps~

~Registration Accepted Beginning May 12 ~ * ~Register Online, In Person or Mail In~

Kiddie Camp, Day Camp and Youth In Action - Additional Information

*NEW Online Registration - Automatic recurring weekly payments are required to complete online registration for the Kiddie Camp, Day Camp or Youth In Action Weekly Session Registration option. All online payments (credit card and electronic check) are subject to a nominal processing fee. If applying for a scholarship and registering online, all required support documents must be received no less than (10) days before the upcoming week of attendance, otherwise you will be required to make the payment due for the upcoming week each Sunday before each session of camp. If approved, the scholarship will begin the following week. Failure to submit all required scholarship application support documents will delay the review/approval process. KCPR is not responsible for automatic online payments that process if the required support documents are not received at least (10) days before the Sunday of the upcoming week and the scholarship is approved. Automatic recurring payments will not be processed for approved scholarship recipients if all required support documents are received (10) or more days before the applicable Sunday before the second session of camp for which the child is registered to attend.

To register online visit https://apm.activecommunities.com/kentparksandrec/Home. You will be required to create an account if you do not already have one (if you have never registered online for a KCPR program before; please do not create a new account! If you need assistance with resetting your password, please contact the KCPR office). From there, follow the easy steps to register for a program.

Which Program to Enroll in Online (Entire Summer Registration or Weekly Session Registration)? - If you pay the entire summer fee in advance to receive a one week discount and you are registering online, please enroll in the program name listed that includes "Entire Summer Registration" behind the program name and NOT THE PROGRAM NAME "Weekly Session Registration" behind the name of the program.

*(Kiddie Camp, Day Camp or Youth In Action) Entire Summer Registration option - Pay for 7 weeks and receive 1 week FREE). Entire Summer Registration = \$85 (Resident)/\$102 (Non-Resident) savings based on weekly payment option.

*To receive the (Weekly) Sibling Discount option, you must enroll in the Kiddie Camp, Day Camp or Youth In Action Weekly Session Registration option for each child: First child full weekly price; Each additional child in the same household will receive a 25% discount off the weekly price.

*Sibling Discounts and *(Kiddie Camp, Day Camp or Youth In Action) Entire Summer Registration cannot be combined.

Kiddie Camp - This activity-oriented summer program is designed specifically for children ages 3 ½ - 5, allowing for growth, learning and fun in a structured setting. Individual and group play as well as creativity are emphasized. Indoor and outdoor games, arts and crafts, swimming, storytelling, movies, songs, special events and events are included. Two snacks and drinks are provided each day. Lunch is provided Monday - Thursday. Campers must bring a non-refrigerated lunch each Friday. This program is limited to 12 children. Children *must be toilet trained*. The camp is an eight-week full day program. Fees are based on full day, weekly attendance.

Day Camp - This traditional day camp introduces children ages 6 - 10 to a healthy and fit lifestyle, socialization skills, nature appreciation, cultural diversity, and challenging individual and group activities. There will be weekly special activities, swimming, arts and crafts, movies, special events and much more. Campers must bring two snacks and a refillable drink container each day. Lunch is provided Monday - Thursday. Campers must bring a non-refrigerated lunch each Friday. This program is limited to 40 children. The camp is an eight-week full day program. Fees are based on full day, weekly attendance.

Youth In Action - Youth entering grades 5 - 6 will participate in a highly structured program that promotes strong values, character building, healthy lifestyle choices, nature appreciation, educational activities, special events and fun! Youth will earn service-learning hours through participation in various volunteer activities. The program is limited to 10 youth. Campers must bring two snacks and a refillable drink container each day. Lunch is provided Monday - Thursday. Campers must bring a non-refrigerated lunch each Friday. The camp is an eight-week full day program. Fees are based on full day, weekly attendance.

Financial Assistance / Scholarship Information - If applying for a scholarship (if your child/household has not already been awarded a scholarship for the current award year: September 1 - August 31), all required support documents must be submitted to the Parks & Recreation office immediately (within three days if registering online). If the required support documents are not submitted in time to stop any applicable *automatic scheduled payment (a minimum of 10 days before the scheduled payment date is required) beginning the Sunday before the second weekly session your child is registered to attend, the automatic payment will be withdrawn. Scholarships are awarded for fees that have not already been paid and are not retroactive to apply prior to the award's approval. Automatic payments not stopped by the required 10 day in advance requirement will not be refunded.



County Commissioners of Kent County MD Department of Parks & Recreation 2021 Registration Information



** Important Notice to Summer Camp Program Parents ** Kiddie Camp, Day Camp, Youth In Action * Leaders Club

As a new year of Kent County Parks and Recreation Summer Camp fun quickly approaches, we want to ensure you are aware of our camp policies and procedures for **summer camp registration.** We hope you will find our policies and procedures information helpful. Should you have questions before registration opens on May 12, 2021, please call 410-778-2083 or email info@KentParksAndRec.org.

PLEASE BE FULLY PREPARED TO REGISTER

- ✓ Updated forms (with a revised 2021 date) will be available beginning May 12 at the Community Center in Worton or you may print forms from our website at http://www.KentParksAndRec.org/publications.php).
- ✓ Complete your child's registration forms in advance of arriving to register for a summer camp program.
- ✓ Incomplete forms will not be accepted and will delay your child's enrollment. In this case, you will be asked to exit the line (if on registration opening day) and complete forms in their entirety. You will then be required to rejoin the end of the line to await your turn.
- ✓ REGISTRATION IS NOT ACCEPTED ONLINE or BY FAX.
- ✓ Registration is only accepted:
 - ❖ In person at the Kent County Community Center located at 11041 Worton, Rd., Worton, MD 21678
 - ❖ By mail to Kent County Parks & Recreation, P.O. Box 67, Worton, MD 21678
 - Online at https://apm.activecommunities.com/kentparksandrec/Home

KIDDIE CAMP, DAY CAMP & YOUTH IN ACTION CAMP PROGRAM HOURS

- > The program will operate from 8 am-5:30 pm, Monday-*Friday
 - Youth In Action Camp's last program day (August 20)
- **Extended Care** before 8 am or after 5:30 pm **is not available**.

REGISTRATION DEPOSIT REQUIREMENT

- A non-refundable deposit of \$85(Resident)/\$102(Non-Resident) is required of *all participants to secure your child's spot in a camp. The deposit may be paid in two installments but must be paid in full by June 11.
 - o A minimum of \$42.50(Resident)/\$51(Non-Resident) of the deposit is required at the time of registration.
 - o The remaining deposit balance (if not paid in full at registration) is due by June 11.
 - *Sibling discount is not applicable to the deposit and begins with the second session.
 - *Scholarship applicants are required to pay the deposit. If granted, the award begins the second session the child attends.

> THERE ARE NO EXCEPTIONS TO THE NON-REFUNDABLE DEPOSIT POLICY

FEE STRUCTURE: WEEKLY / ENTIRE SUMMER PRE-PAY

- The weekly registration fee is \$85 (Resident)/\$102(Non-Resident) per child and includes all activities for the week.
- The entire summer fee pre-payment option <u>offers a discount of \$8 5(Resident)/\$102 (Non-Resident) (one week off)</u> for campers attending all sessions of camp when the balance is <u>paid in full no later than Friday</u>, <u>June 11</u>. **The discount is void if the balance is not paid June 11**.
 - o \$595 (Resident)/ \$714 (Non-Resident) per child for the entire (8) week program (Kiddie Camp/Day Camp/Youth In Action)
 - The non-refundable deposit will be applied to the entire summer fee if not paid in full at the time of registration.
 - Refunds are not issued for any sessions not attended.
- The entire summer pre-pay discount cannot be combined with a scholarship award.

LEADERS CLUB PROGRAM / DEPOSIT

- ➤ The program is an (8) week program and will operate 8:30 am *5 pm, Monday Thursday at Worton Park
- > A 500-word essay, written by the child and explaining why the child would like to participate in the program,

MUST BE SUBMITTED WITH THE COMPLETED REGISTRATION PACKET

After receipt of initial registration forms and <u>if accepted into the program</u>, additional information and forms will be mailed. The completed additional forms are due by the date indicated in the accompanying letter.

REGISTRATION FEE/ DEPOSIT REQUIREMENT

- > The registration fee for the (8) week program is \$250 (Resident)/\$300 (Non-Resident). The program is extended two additional weeks.
- A non-refundable deposit of \$85 is required of <u>all</u> participants to secure your child's spot in a camp. The deposit may be paid in two installments but must be paid in full by June 11.
 - o Should a scholarship be awarded, the scholarship is applied toward the balance.
 - o The remaining balance of the registration fee (if not paid in full at registration or the second installment deadline June 11).
- ➤ THERE ARE NO EXCEPTIONS TO THE NON-REFUNDABLE DEPOSIT POLICY

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County Commissioners of Kent County, MD * Department of Parks & Recreation

11041 Worton Rd., P.O. Box 67, Worton, MD 21678 * info@KentParksAndRec.org Kent Parks And Rec. org *Facebook.com/Kent County Community Center

*Kiddie Camp, Day Camp & Youth In Action Camp Registration

Please note that this may be the initial registration form, and depending on the program, additional forms may be required. Your spot will be held pending the completion of the additional forms (if applicable).

Registration Policies: Please complete one (1) registration form for each participant and mail with payment, or for a nominal fee, register online at https://apm.activecommunities.com/kentparksandrec/Home# or register in person at the Community Center (no form required). Registration must be completed in its entirety to be accepted. FOR OFFICE USE ONLY Registration is accepted on a first come first served basis. Date Received: Refunds for all programs are subject to a \$5 processing fee and may take up to two (2) weeks to process. Time Received: We reserve the right to cancel or alter programs that do not meet registration requirements. Staff Initials: -If mailing registration, please mail form with payment to Kent County Parks and Recreation, 11041 Worton Rd, P.O. Box 67, Worton, MD 21678 Participant First & Last Name / Nick Name (if any): Date of Birth: M/F: Email: Age: (Very important to be able to contact you with updates - please print clearly) Parent/Guardian Full Name (if applicable): Parent/Guardian Full Name (if applicable): Physical and Mailing Address: Yes / No Kent County Resident: City, State: Zip Code: ******(Must be Answered; Will be Verified) ***** Work Phone: Cell Phone: Home Phone: Emergency Contact/ Relationship: Phone Number: Medical/Health Information Does the participant have any allergies? (If yes, please list) Does the participant take any medications? (If yes, please list) Does the participant have any behaviors that staff should be made aware (ADHD, ADD, ODD, etc.)? \boldsymbol{E} Does the participant have any medical conditions staff should be made aware (Diabetes, Epilepsy, Asthma, Heart Conditions, Frequent Ear Infections, Fevers, etc.)? \boldsymbol{R} Medical Insurance Carrier: Group/Policy #:_ R Fee: \$ Make Check or Money Order payable to County Commissioners of Kent County, MD Y Registration fee must accompany registration form to secure spot. If applying for a scholarship, fully completed application and all required supporting documents must accompany registration form. Emergency Contacts * Must be provided to reach during program hours if needed. Please list two (2) persons, other than the parent/guardian. Emergency Contact #1 Name: Relationship to Child Phone Numbers Name Emergency Contact #2 Name: Relationship to Child Name Phone Numbers claims, costs, liabilities, expense or judgment, including attorney's fees and court costs (herein, collectively "claims") arising out of my participating in the aforesaid course/activity or any illness, injury, or death resulting there from and hereby agree to indemnify and hold harmless the County Commissioners of Kent County from and against all such Claims except Claims proximately caused by the gross negligence or willful misconduct of County Commissioners of Kent County its officers, directors, employees, and agents. I give permission for Kent County Parks and Recreation to take photographs of my (or my child's) participation for the purpose of archives and advertising.

I recognize the risks of illness and injury in any exercise/physical fitness or educational program and I am participating in the Parks and Recreation program upon the express agreement and understanding that I am hereby waiving and releasing County Commissioners of Kent County, its officers, directors, employees, and agents from any and all

		//			/	/
Participant Signature		Date	Parent/Guardian Signature (if under 18)			:
		FOR OFFICE U	SE ONLY			
Amount Paid: \$	Date:	Cash/Check #:	_ Staff Initials:	Conf Date:		
Scholarship:		Date Entered in ActiveNet:		Initials of Staff:		
Date Withdrawal Form F	Received:	_ Refund Date (if applicable):	Office Manager Initials:			
Amount Refunded:		Date Refund Submitted to Finance Department:				

If any part of the Registration Fee is retained by the Department, please explain: _

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County Commissioners of Kent County, MD Kent County Parks & Recreation Summer Camp Additional Information Request Form

This form is required. Please type or print clearly REGISTRATION WILL BE DELAYED IF INFORMATION IS INCOMPLETE.

Participant's Name:		Nick Name (if any):				
Please check program your child will at	ttend:					
Kiddie Camp (ages 3 ½-5)	Day Camp (ages 6-10)	*Youth In Action (Chec	k Grade Entering5 or6)			
If Applicable: Sibling Name: Sibling Name: Sibling Name:	Check Camp Si	Check Camp Sibling Attending:KiddieDayYIA				
T-Shirt Size:Child orAdult Ch	eck One:XSS_ML_	_XLXXL				
Fees: \$85/session 1st child; \$63.75/s Entire Summer Prepay: \$595	(no additional child discount)	o com skild mill offer de			
*REQUIRED - Che Sessions		will attend under the program				
Please refer to cover letter for dates	Kiddie Camp Ages 3 ½ - 5	Day Camp Ages 6 - 10	Youth In Action Entering Grade 5 or 6			
Session 1	Ages 3 72 - 5	Ages 0 - 10	Entering Grade 5 or 6			
Session 2						
Session 3						
Session 4						
Session 5						
Session 6						
Session 7						
Session 8						
	1					
	Child Pick Up	Authorization				
Name	Relations	hip to Child	Phone			
Name	Relations	hip to Child	Phone			
Name	Relations	Relationship to Child Phone				
Name	Relations	hip to Child	Phone			
		eation <u>will not</u> release my child <u>sibility to update this list</u> as no				
I hereby give permission for my child to attend at department accepting my child in this program, I participation in this program. I agree to indemnif is understood and agreed that Kent County, its en including, but not limited to, allergies. The Recregive my permission for my child to be photograph	agree to release and discharge Kent C fy and hold harmless Kent County, its aployees and agents, cannot be respon- eation Department will be notified of a	county, its employees and agents, from a employees and agents, against any liabi sible for any aggravation or injury caus any such defects or sensitivities in writing	any injuries sustained by my child as a result of ility incurred as a result of such injury or loss. It ed as a result of a pre-existing physical defect; ng prior to enrolling in these programs. I also			
Parent/Guardian Signature Date						
5/10/2021						

County Commissioners of Kent County, MD Department of Parks & Recreation Health History Form *This form is required. Please type or print clearly*

This form is required. Please type or print clearly
REGISTRATION WILL BE DELAYED IF INFORMATION IS INCOMPLETE.

		Par	ticipant's Name:					
This Ouestion A	pplie	s to	Kiddie, Day, Youth Iı	n Actio	on &	Leaders Club Can	nps Only	
IMMUNIZATION INFORMA For campers who reside within 1. State/territory in which 2. Is this child exempt for	ATION In the United the child from any	nited S reside	States, a United States territory				npo Omij	
For campers who reside outsid 1. Country in which chil 2. Attach Department for	ld resid	es	States, a United States territor 96 (record of vaccination or in	-		t of Columbia:		
Child's Physician:Nar	ne					Phone		
Has participant experienced	any of	the fo	llowing?					
Type	Yes	No	Type	Yes	No	Type	Yes	No
Eating Disorder			Menstruation Problems			Frequent Earaches		1
Sleeping Disorder			Bowel/Bladder Disorder			Asthma		
Posture Problems			Eye Problems			Diabetes		
Dental Problems			Wear Glasses or Contacts			Anemia		
Skin Problems			Hearing Difficulties			Speech Problems		
Allergies			If yes, explain:	ı	!		<u> </u>	
Illness/Disability			If yes, explain:					-
Behavioral Problems			If yes, explain:					
Currently taking Medicine			If yes, explain:					
Additional medical informatio	n or spe	ecial co	onditions staff should know:					
Medical Insurance Carrier: Group/Policy #:								
Parent/Guardian Name:			Home #			Work #:		
Emergency Contact #1 Name:		ame	Re	elationsh	ip to C	hild Phone	Numbers	
Emergency Contact #2 Name:		ame	Re	elationsh	ip to C	hild Phone	Numbers	
If applicable, Emergency Con	tacts m	ust als					to pick up you	r child
The above health history is correct as noted. Authorization for treatm necessary transportation for my cland administer treatment, including	nent: I h	ereby g the eve	ive permission to certified/license nt that I cannot be reached in an e	ed medica	l persor	nnel to order x-rays, routine	tests, treatment,	and
Parent/Guardian Signature						// Date		

*IF YOU CAN NOT SIGN THIS FORM FOR RELIGIOUS REASONS YOU MUST PROVIDE A SIGNED LEGAL WAIVER WITH THIS FORM.

County Commissioners of Kent County, MD Character Counts at Department of Parks and Recreation Conduct Code Agreement

As a participant in any Kent County Parks & Recreation program your child is expected to exhibit appropriate behavior at all times while participating, spectating, or attending any program or activity sponsored by the department. *Character Counts at Kent County Parks & Recreation! We promote the six pillars of good character*. The following participant expectations are designed to provide safe and enjoyable activities for ALL participants.

PARTICIPANTS SHALL:

- 1. Show **respect**, **fairness** and a sense of **caring** to all participants, program staff, supervisors and or guests.
- 2. Take direction from program staff/supervisors.
- 3. Refrain from using abusive or foul language
- 4. Not cause bodily harm to self, other participants, or program staff/supervisors. (Threats and or physical violence of any type WILL NOT BE TOLERATED and is grounds for immediate dismissal).
- 5. Refrain from damaging or vandalizing equipment or property.
- 6. Remain with his/her group and supervisor at all times. Be **responsible** and **trustworthy**.
- 7. Abide by the program site policies and regulations. And, display good **citizenship** at all times.

CONDUCT REPORTS WILL BE ISSUED WHEN VERY AGGRESSIVE, DANGEROUS, PERSISTENT OR UNCONTROLLABLE POOR BEHAVIOR IS EXHIBITED. APPROVED DISCIPLINE MEASURES ARE:

- 1. Time Outs: Participant will be asked to sit out, from an activity, for a short period of time.
- 2. Loss of privileges: Participant will lose privileges such as choice of game or activity.
- 3. After three written conduct reports suspension from the program for one week.
- 4. Upon a fourth conduct report, or a single severe behavior problem, dismissal from the program indefinitely.

Please sign below as an indication that you have read, understood and encourage your child to abide by the Code of Conduct. By signing below, you understand the discipline procedures for misbehavior by your child.

PARTICIPANT SIGNATURE:	
(Children ages 6 and older must print or sign own na	me. Parent must not complete for child.
	/
Parent/Guardian Signature	Date