

Camp Attending: _____

Student Information: Date of Birth: _____ Sex: _____ Date of Enrollment: _____

Full Name: _____

Child's Physical Address: _____

Family Email: _____

Child's School Information: _____

School Name

Grade Entering

CCPS Student ID **School campsites required.* _____

Family Information: Child Lives With: _____

Please note: we must have a **minimum of 3 emergency contact phone numbers*

Guardian DOB (required for system records): _____

Mother's Name: _____ Father's Name: _____

Address: _____ Address: _____

Home/Cell Phone: _____ Home/Cell Phone: _____

Employer: _____ Employer: _____

Work Phone: _____ Work Phone: _____

Custody: Mother _____ Father _____ Both _____ Other _____

Medical Information:

I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care warranted.

Doctor: _____ Address: _____ Phone: _____

Please list allergies, special medical or dietary needs, or other areas of concern:

Discipline Policy

Our discipline policy is based on recognizing and providing positive reinforcement for appropriate behaviors and natural or logical consequences as a response to less desirable ones. We believe that children truly want to learn how to behave in an appropriate manner. Our job is to help them learn this by serving as role models and guides. Our discipline policy is designed to be effective in a variety of situations and is based on the following components: Consistency, Emphasis on the positive, Logical consequences, Response. *We will never use any type of physical punishment. Nor will we shame, scold, or humiliate children. *The YMCA reserves the right to dismiss a child from the ASPIRE/YREADS program if repeated efforts at modifying misbehavior have failed and/or if parents are not cooperating with our policies. *** Please note: Any child who runs away from his/her group, will be terminated from the program immediately.

Liability Release:

I give permission for my child to participate in Youth Development at the YMCA. I understand that even when reasonable precaution is taken, accidents can sometimes happen. I hereby acknowledge that I am releasing the YMCA as well as its staff members and volunteers from all liability due to injury, loss, or damage, which may occur on the YMCA property while my child participates in the activities of this program. By registering I acknowledge that I have read and understand, and voluntarily agree to this authorization and release.

Emergency Contacts:

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident, or emergency, if for some reason, the custodial parent or legal guardian cannot be reached.

Name	Relationship to child	Work #	Home #
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Name	Relationship to child	Work #	Home#
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Name	Relationship to child	Work #	Home #
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Tuition Payments

Tuition is due before the scheduled attendance days. Due to limited spaces, no child's spot is automatically reserved each week. **Spots are on a first come, first served basis.** If participating in a drop-in day (and space is available), payment must be made in advance. Payment must be paid in advance for all payment options.

All registrations and program fees are non-refundable, regardless of attendance, termination, or any circumstances resulting in cancellation of programs or components within.

Hours of operation:

Camp operates Monday thru Friday. Hours will vary depending on specific camp location (please see parent handbook). There is a late fee charge of \$1 per minute, per child for anyone picked up after camp closing hours. Multiple (more than three) late pick-ups will result in termination from the program.

Field Trips:

Please see each camp sites field trip and activities calendar for all scheduled trips. All campers MUST wear a camp shirt on the day of their trip and must be at their site by the designated time. If a child misses the bus for a field trip, they will not be permitted to stay behind at the camp (even with another group as we have limited spaces in every group). Refunds or system credits will NOT be given for missed field trips.

Signature: _____ **Date:** _____

Program Permissions: (please circle yes or no)

My child may go swimming in the YMCA pool: **yes** **no**

Sunscreen and bug repellent may be used on my child at staff discretion: **yes** **no**

I authorize any photos taken of my child to be used for program advertising purposes: **yes** **no**

Does your child receive free or reduced lunch through CCPS? **yes** **no**

I authorize the CCPS school my child attends to release information to the YMCA School Age Program/YREADS! Program, including but not limited to grades, test scores, behavioral records, IEP information student ID number, etc.: **yes** **no**

By signing below, I also acknowledge that I have read, received, and agree to abide by all the policies within the Parent Handbook set forth by YMCA of Collier County. Additionally, I understand that some of the day camp locations for YMCA of Collier County integrate academic and healthy living components into their programs. I authorize the YMCA to collect data, results, and outcomes as a result of those components and to use for any reporting purposes needed.

Signature	Print Name	Date
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Minor Participant Waiver, Release, Indemnification of All Claims & Covenant Not to Sue

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in entirety. By signing this agreement, you give up your right and the named minor's right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of the named minor's participation in YMCA Programs, now or any time in the future.

Acknowledgment of Risk

I, in my legal capacity as the parent/guardian of the minor named below, do hereby acknowledge, and agree that participation in YMCA activities comes with inherent risks. I have full knowledge and understanding of the inherent risks associated with YMCA participation, including but in no way limited to: (1) slips, trips, and falls, (2) aquatic injuries, (3) athletic injuries, and (4) illness, including exposure to and infection with viruses or bacteria. I further acknowledge that the preceding list is not inclusive of all possible risks associated with YMCA participation and that said list in no way limits the operation of this Agreement.

Coronavirus / COVID-19 Warning & Disclaimer

Coronavirus, COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a mean to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in YMCA programs or accessing YMCA facilities could increase the risk of contracting COVID-19. The YMCA in no way warrants that COVID 19 infection will not occur through participation in YMCA programs of accessing YMCA facilities. Waiver, Release, Indemnification & Covenant Not to Sue

In consideration of _____'s participation in YMCA, I, _____, the parent/guardian of the minor named above, agree to release and on behalf of myself and the minor named above, my heirs, representatives, executors, administrators, and assigns, HEREBY DO RELEASE the YMCA of South Collier, its officers, directors, employees, volunteers, agents, representatives and insurers ("Releasees") from any causes of action, claims, or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I, the named minor, my heirs, representatives, executors, administrators and assigns may have, now or in the future, against the YMCA on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the use of YMCA facilities/equipment or participation in YMCA programs whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releasees.

In consideration of the named minor's participation in the YMCA, I, the undersigned parent/guardian of the named minor, agree to INDEMNIFY AND HOLD HARMLESS Releasees from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to the named minor's YMCA participation.

I hereby certify on behalf of myself and the named minor that I have full knowledge of the nature and extent of the risks inherent in YMCA participation and that I, on behalf of myself and the named minor, am voluntarily assuming said risks. I understand that I and the named minor will be solely responsible for any loss or damage, including personal injury, property damage, or death, the named minor sustains while participating in the YMCA and that by signing this agreement I, on behalf of myself and the named minor, HEREBY RELEASE Releasees of all liability for such loss, damage, or death. I further certify that the named minor is in good health and has no conditions or impairments which would preclude his/her safe participation in the YMCA.

I further certify that my date of birth is _____ (MM/DD/YYYY), that my present age is _____, that I am therefore of lawful age (18 years or older) and otherwise legally competent to sign this agreement, and that I have legal capacity to act as the parent/guardian of the named minor. I further understand that the terms of this agreement are legally binding and certify that I am signing this agreement, after having carefully read it, of my own free will.

Participant Name (Print Clearly)

Date

Parent/Guardian Signature

Parent/Guardian Name (Print Clearly)