

## 2025 DAY CAMP EMERGENCY FORM

Child's Name	M / F	DOB:	
Child's Name	M / F	DOB:	
Child's Name	M / F	DOB:	
Address:			
Parent Name	Work #	Cell	
Parent Name	Work #	Cell	
If my child is ill or has an emergency and I cannot	t be reached, ple	ease contact:	
Name	Phone		
Name	Phone		
Person, other than parent/guardian who can pick	up the child(ren)	) from Day Camp:	
Name	e Relationship		
Please mark any of the following that apply to you	ır child:		
Epilepsy: Heart Condition: Nose   Allergies: Bee stings: Peanuts			
Physical limitations:			
Name of Insurance:	I	D#	
Physician:	Phon	e#	
Dentist:	Phon	e#	



# 2025 DAY CAMP GUIDELINES

## Hours:

The camp runs 12pm to 5pm Monday to Friday June 16, 2025 to August 8, 2025 **Registration**:

Members only filled on a first come, first served basis. Registration Link

## Seasonal Campers

Campers may register for the season beginning April 1, 2025. \$1000 for the season and season campers receive one week free. Payment required at the time of registration. No Refunds issued for season campers. Season Camp registration ends June 6, 2025.

## Weekly Campers:

Campers may register for weekly sessions beginning April 1, 2025. Payment is required at the time of registration. \$150 per week. Weekly Registration closes the Friday prior to the session start date.

## Daily Campers:

Campers may register for daily sessions 14 days prior to the start of each weekly session. Payment is required at the time of registration. \$40 per day. The daily registration ends on Friday prior to the session start date.

#### Drop-ins:

Drop-ins are available for each weekly session and can be scheduled beginning Saturday prior to each weekly session. Drop-ins are subject to availability. \$50 per day. Payment required at the time of registration.

## Payment Policies:

Payment is required at the time of registration and must be made online using the <u>Registration Link</u> provided. No spots will be held without payment. Drop-in rates apply for all campers not registered by Friday prior to the start of each weekly session.

## Cancellation and Refunds:

Refunds will be granted if the club is notified of the cancelation 7 days prior to the start of the session. No refunds will be granted for season passes or drop-ins. Fees may not be transferred to another week. We will consider late notification refunds for medical reasons only.

## Behavior:

Children must follow directions given by the Day Camp Director and staff, lifeguards, and Glen Oaks Management. The parents will be called to pick up their children early if they are not acting appropriately. Repeated inappropriate behavior could result in dismissal from the day or entire week without a refund of fees.



#### Attire:

Children should wear comfortable clothing.

-If allergic to bee stings, please have your children always wear shoes, except when swimming.

-A swimsuit and towel are needed each day.

-Please provide sunscreen for your child (This will be applied several times during the day).

-Please label all belongings

#### Attendance:

Parents must sign their children in and out each day. The sign-in sheet will be located at the snack bar or at the day camp pop-up.

-Summer camp hours are from Noon-5pm

-Please note: IF CHILDREN ARE NOT PICKED UP BY 5 PM, THERE WILL BE A LATE FEE CHARGED OF \$25 PER HALF-HOUR FOR EACH OCCURANCE.

## Lunch and Snacks:

Children need to eat lunch prior to coming to day camp or bring their lunch with them.

-Glen Oaks will provide water and a healthy snack each afternoon.

## **Daily Schedule:**

Each week has a theme. There will be group activities, arts and crafts, swimming, and a variety of other fun-filled activities. Below is a tentative schedule. This is subject to change based on attendance and other factors.

12-12:30: Lunch (Activities out for kids who are done eating)

12:30-1:30: Open Swim (Extra activities at the tables)

1:30-3:30: Main Activity, Art Activity & Snack (free play in the grove if time)

3:30-5:00 Open Swim (Extra activities at the tables)

## Personal Health Screening

All participants are required to complete their own personal health assessments. By attending the program, participants are confirming they can answer "no" to the following questions. If you answer "yes" to any of these questions, you are not allowed to attend until cleared by a medical professional. In the last 24 hours, the participant has experienced:

- 1. A fever of 100.4 or greater in the last 24 hours with or without fever-reducing medication?
- 2. Cough, congestion, runny nose, sore throat, shortness of breath, or difficulty breathing?
- 3. Fatigue, muscle or body aches, headache, or chills?
- 4. Nausea, vomiting, or diarrhea? New loss of sense of smell or taste?

Participants and staff displaying symptoms of illness during Day Camp will be removed from the group and an approved adult will be required to pick them up immediately. Participants will be supervised by staff while removed from the group. If staff members feel the participant needs to be sent home, it is not up for debate. The participant must be sent home without question.



## 2025 DAY CAMP AGREEMENT WAIVER AND RELEASE

June 16, 2025, to August 8, 2025

In consideration for being permitted by Glen Oaks Swim and Tennis Club to participate in the above activity(s), I hereby waive, release, and discharge all claims for damages for personal injury, death, or property damage which I may have, or hereafter accrue to me because of participation in said activity(s). This release is intended to discharge, in advance, Glen Oaks Swim and Tennis Club (its officers, officials, employees, and agents) from all liability arising out of or connected in any way with my participation in said activity(s), even though liability may arise out of negligence or carelessness on the part of persons or entities mentioned above. It is understood that this activity(s) involves an element of risk and danger of accidents and in knowing those risks, I hereby assume those risks. It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above person or entities free and harmless from loss, liability, damage, cost, or expense, which they may incur resulting from death, injury, or property damage.

PARENTAL CONSENT: (To be completed and signed by <u>parent/guardian</u> if participant is under 18 years of age)

I hereby consent that my son(s) and/or daughter(s), \_

may participate in the above activity(s), and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity(s). I hereby agree to indemnify and hold harmless the person and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur resulting in death, injury, or property damage that said minor may sustain while participating in said activity(s).

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND IT'S CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND GLEN OAKS SWIM AND TENNIS CLUB AND I SIGN OF MY OWN FREE WILL.

Signature	Date	
Name (Printed)	Parent/Guardian (simila and)	
Name (Primeu)	Parent/Guardian (circle one)	