



Dear Parent or Guardian,

We are so happy you have chosen the YMCA for your camper this summer! Enclosed in this packet is the essential information for a successful camp experience for you and your camper. To complete your registration, please return the following documents once completed:

_____ Code of Conduct (Last page of the parent handbook)

_____ Registration Form

_____ DHS Compliance Form

_____ Immunization Records

_____ Sunscreen Waiver

_____ Aquatic Procedure Acknowledgement

_____ Medication Permission Form (if applicable)

For our counselors and leadership staff to prepare properly for camp and for your child to have the best experience possible, we need all these forms returned one week prior to your camp session.

Thank you for your help making this the best summer for your child!

YMCA MISSION

To put Christian principles into practice through programs that build healthy spirit, mind, and body for all.

CAMP PROGRAM CREED

"I pledge my commitment to the four core values of Caring, Honesty, Respect, and Responsibility, and to reflect them in my thoughts, words, and actions to be the person I was intended to be."



AFTER REGISTRATION:

Upon completing the online registration you will receive a confirmation by email within 24 hours.

DHS licensing standards require that registration paperwork be updated annually. We thank you for your cooperation in helping us maintaining these standards.



CHANGES AND CANCELLATIONS

Changes and cancellations must be made in writing by Monday one week prior to your camper attending camp. The cancellation must be given to the Camp Director.

Please note that the camp does not offer refunds for injury, illness, or weather.

We occasionally make exceptions for medical issues with a note from a doctor.



BILLING SCHEDULE

CAMP WEEK	PAYMENT DUE	CAMP BEGINS
WEEK 1	MAY 15	MAY 22
WEEK 2	MAY 22	MAY 29
WEEK 3	MAY 29	JUNE 5
WEEK 4	JUNE 5	JUNE 12
WEEK 5	JUNE 12	JUNE 19
WEEK 6	JUNE 19	JUNE 26
WEEK 7	JUNE 26	JULY 3
WEEK 8	JULY 3	JULY 10
WEEK 9	JULY 10	JULY 17
WEEK 10	JULY 17	JULY 24
WEEK 11	JULY 24	JULY 31
WEEK 12	JULY 31	AUGUST 7

Payment can be made by phone, online, or in any YMCA branch.

Financial assistance is available.

Applications for financial assistance must be turned in prior to registration, as applications may take up to a week to be reviewed.

For more information, please contact your local branch.

FOUR CORE VALUES

Caring: Keep your hands, feet and other objects to yourself. Keep rocks and other objects on the ground. Take care of equipment, property, and the environment.

Honesty: Be trustworthy and genuine.

Respect: Use appropriate language. Respect the counselors and fellow campers. Treat others like you would want to be treated.

Responsibilities: Stay with your group at all times. Keep up with your belongings.

ALLERGIES & SPECIAL NEEDS

All allergies, emotional, or physical needs must to be listed on the campers registration paperwork as well as brought to the attention of the Camp Director.

MEDICATIONS

The medical release form must be submitted to the Camp Director for the medication you are sending, prescription or non-prescription, with your camper.

NO MEDICATIONS WILL BE ALLOWED IN YOUR CAMPER'S LUNCHBOX OR BACKPACK.

All prescription medications must be in the original container that identifies the prescribing physician, the name of the medication, the dosage, and frequency of administration.

SWIMMING



Your camper will have pool time every day! Please make sure that your camper has a towel and a one-piece bathing suit. Due to the active nature of everyday activity at camp, one-piece suits help protect each camper's privacy and makes changing faster and easier.

Swim tests will be conducted at the beginning of each week, before they are permitted to swim or participate in any water activities. Campers that pass the swim test will be given a plastic swim band. Please keep the band on the child all week. If a child does not wear their band or does not pass the swim test they will be required to wear a life jacket.

The head lifeguard will announce general swimming rules before each swimming period. Our counselors are required to watch and/or swim with campers.

PARENT PRO TIP #1

HYDRATION IS KEY FOR A FUN DAY AT CAMP!

We encourage you to participate with us in sharing the importance of drinking water all day at camp.

DROP OFF

Safety of your child is our number one priority; therefore, campers must be signed in and out everyday, including time of day.

Drop off begins at 7:00am. At this time you will sign your camper into camp with the appropriate staff member at the check in desk.

PICK UP

All campers must be picked up by 6:00pm. If you are running late, there is a \$1 per minute, per child fee.

In order to pick up a camper your name must be on the registration form along with having the proper identification. Changes to the pickup list must be made in writing. All individuals on the pick up list must be 18 years or older.

PARENT PRO TIP #2

If you are picking up early we encourage you to call ahead so we can arrange to have your campers ready and waiting for you.

OUR CAMP COMMUNITY

YMCA programs are about learning skills, developing character and making new friends. But few environments are as special as camp, where kids become a community as they learn both how to be more independent and how to contribute to a group as they engage in camp activities.

DIVERSITY AND INCLUSION

The Y is made up of people of all ages and from every walk of life working side-by-side to strengthen communities. Together, we work to ensure that everyone, regardless of ability, age, cultural background, ethnicity, faith, gender, gender identity, ideology, income, national origin, race, or sexual orientation has the opportunity to reach their full potential with dignity. Our core values are caring, honesty, respect and responsibility—they guide everything we do.

DISCIPLINE

The philosophy of our program is based on the character development principles of Respect, Responsibility, Honesty and Caring. It is expected that our staff give respect and courtesies to each participant, as we expect the same in return. Camp rules are designed to enhance the happiness and safety of all campers. Children who do not demonstrate appropriate behavior in the judgment of the directors will be sent home from camp.

Early dismissal will not warrant a refund.

WEEKLY CAMP THEMES

Week 1– YMCA 4 Core Values

Week 2– Reduce, Reuse, Recycle

Week 3– Under the Sea

Week 4– Color Wars

Week 5– Super Heros

Week 6– Ahoy Matey

Week 7– Baby, You're a Firework

Week 8– Jurassic Park

Week 9– Disney

Week 10– Aloha

Week 11– To Infinity & Beyond

Week 12– Camp's Got Talent

AM I ABLE TO VOLUNTEER AT DAY CAMP?

Of course!! We have parent engagement opportunities each week and would love for your help! Talk with our office staff for more details.

WILL THE CAMPERS BE OUTSIDE ALL DAY?

The campers will be outdoors for most of the day. However, the campers will be able to take breaks from the heat in the facilities. The campers will also take frequent water breaks, have down time and will be indoors every three hours. This will provide for a safe and fun environment for your child.

WHAT IS THE DIFFERENCE BETWEEN DAY CAMP AND DAY CARE?

Day care focuses on providing a safe environment that is similar to the structure kids experience in a school setting. Day camp focuses on the kids having new experiences and trying new things in a fun, non-threatening, safe environment that can only be done in a natural, outdoor setting.



HOW ARE YOUR STAFF TRAINED?

Each staff member goes through an extensive hiring process, including criminal history background checks and a national sex offender check, reference checks and an interview. Camp staff receive more than 40 hours of training in camp program areas, relating to children, health, and safety skills, and are First Aid and CPR certified. Camp staff are committed to being positive role models for campers.



CAMPER ESSENTIALS

☐ BACKPACK

Backpack to carry all of your child's belongings in. Make sure to write their name on it!

☐ REFILLABLE WATER BOTTLE

☐ LUNCH BOX

Parents are responsible for ensuring campers have a packed lunch every day.

☐ SWIMSUIT AND TOWEL

A plastic bag for wet one piece swimsuit & towel along with goggles, if your child needs them.

☐ SUNSCREEN

The YMCA is not responsible for providing bug spray or sunscreen.



PLEASE ADD YOUR CHILD'S NAME TO EVERYTHING THEY BRING TO CAMP.

DRESS YOUR CHILD FOR A DAY OF OUTDOOR FUN!

PLEASE DO NOT SEND YOUR CHILD'S BEST CLOTHING/SHOES.

FOR SAFETY REASONS, NO FLIP FLOPS OR SANDALS WILL BE ALLOWED AT CAMP.

TO HELP YOUR CHILD TAKE FULL ADVANTAGE OF ALL THAT WE HAVE TO OFFER

PLEASE LEAVE THESE ITEMS AT HOME:

- Toys
- Trading Cards
- Cell phones
- Gaming devices
- E-Cigarettes
- Weapons



YMCA OF GREATER TULSA CODE OF CONDUCT



Positive discipline and guidance are necessary developmental aspects of a child's life and the application of both is an ongoing process. The YMCA staff strives to create an environment for children and staff to have pleasant experiences; because of that, our discipline system at the YMCA uses positive reinforcement.

The **YMCA** of Greater Tulsa has developed the following policy in regard to child behavior and discipline:

The YMCA may immediately suspend a child for engaging in any verbal or physical bullying or confrontations during the program. We reserve the right to suspend or expel any child without prior notice to parents if we feel the child is putting himself/herself or another child or staff in danger. The YMCA may also immediately suspend a child for bringing any type of weapon to the program (pocket knives, guns-toy or real, etc.). Prior notice to parents will not be required.

The **YMCA** of Greater Tulsa may suspend (upon written notification) a child from the program when the child does not engage in one or more of the following by showing:

- Respect for authority, self, and others
- Fairness, by treating others with courtesy
- Responsibility, by following directions and being prepared for the program
- Caring, by keeping his or her hands, feet, and objects to themselves
- Citizenship, by avoiding disruptive behavior at the **YMCA**
- Honesty, by telling the truth

At the time of the first offense (other than those listed in the manual as requiring immediate suspension), there will be a written warning and notification will be made to the child's guardian. The second offense will result in suspension from at least one scheduled day of the program. The third offense will result in a conference with the director, the parents/guardians, and the child, evaluating the child's placement in our program. Verbal or physical bullying is not allowed, nor tolerated; if a child bullies other children, he or she may be immediately removed from the program. Parents will be responsible for any and all financial damages.

By signing below, I agree that I have received a copy and/or have read the YMCA of Greater Tulsa Camp Handbook.

Child's Name:

Guardian's Name:

Guardian's Signature:

Date:

REGISTRATION FORM

Please PRINT LEGIBLY and complete one form per camper.

Camper's Last Name _____

First Name _____

Home Address _____

City _____ State _____ ZIP _____

Home Phone (____) _____ YMCA Member? Yes No

Male Female DOB ____/____/____ Age at Camp _____

Fall Grade _____ School Attending _____

If possible, same group as (max 2; within 1 year age difference):

1. _____ Age _____

2. _____ Age _____

How did you hear about us?

☐ Repeat ☐ Participant ☐ Friend ☐ Flier ☐ Brochure ☐ Internet
☐ Other _____

Previously Attended: ☐ Yes ☐ No

Camper Lives With: ☐ Parents ☐ Mother ☐ Father ☐ Guardian

Primary Contact: ☐ Either ☐ Mother ☐ Father ☐ Guardian

☐ Other _____

Parent/Guardian #1 _____

Day Phone (____) _____ Cell Phone (____) _____

DOB ____/____/____ Place of Employment _____

Email _____

Parent/Guardian #2 _____

Day Phone (____) _____ Cell Phone (____) _____

DOB ____/____/____ Place of Employment _____

Email _____

CHILD RELEASE AUTHORIZATION / EMERGENCY CONTACT OTHER THAN PARENTS / GUARDIANS (MUST PRESENT VALID I.D.)

Persons authorized to pick up child and contact in case of emergency:

Name _____

Relationship _____ DOB ____/____/____

Day Phone (____) _____ Cell Phone (____) _____

Name _____

Relationship _____ DOB ____/____/____

Day Phone (____) _____ Cell Phone (____) _____

Please list any special considerations relevant to your child, such as medications, allergies, recent illnesses or injuries, activity restrictions, developmental age, chronic health concerns, etc.

I hereby request that my child be accepted to attend YMCA Day Camp. I understand and am aware that my child will be participating in many physical activities and the potential for accidents does exist. In consideration of acceptance to YMCA Day Camp.

I understand that the YMCA of Greater Tulsa will not be responsible for any lost or stolen items while members and/or program participants are using YMCA facilities, on YMCA premises or on off-site YMCA program locations. I, the undersigned, for myself and my heirs, do hereby indemnify and hold harmless the YMCA of Greater Tulsa and its employees and agents from any and all claims for injury, illness, loss, or damage I, or my child, may suffer as a result of employees, agents, volunteers, or the negligence of anyone else. I grant permission for YMCA Day Camp to provide and obtain medical attention in the event of sickness or injury, and I understand accident insurance is not included in the camp cost. Should a camper require special medical treatment, prescription or hospital care during the camp session, parents/guardian shall bear the expenses. This includes permission for YMCA staff to apply sunscreen, and for my child to be transported by approved YMCA drivers.

I give my permission to the YMCA of Greater Tulsa to use, for no compensation, photographs promoting or interpreting YMCA programs. The YMCA of Greater Tulsa is founded on Christian principles and prohibits inappropriate behavior and conduct. This includes, but is not limited to, profanity or abusive language, inappropriate attire, smoking, use of alcohol or drugs, the removal of YMCA property, classified as a registered sex offender, or criminal conduct of any type. Such inappropriate behavior or conduct is unacceptable and will not be tolerated. When the safety of others is threatened, a member or anyone on YMCA property may be immediately removed and expelled from all YMCA of Greater Tulsa facilities.

We (parent/guardian and camper) have fully and completely read this Registration Form and the Parent Handbook, and agree to follow the responsibilities described throughout.

Parent/Guardian Signature _____

Date ____/____/____

PAYMENT METHOD

☐ Check or Money Order Enclosed (Make payable to YMCA)
Check or Money Order # _____

☐ Credit Card: ☐ VISA ☐ MasterCard ☐ American Express
Credit Card # _____
Name on Card _____

☐ Yes, charge balance to credit card 14 days prior to session. (Tak only)

Camper Session Fee(s)	\$
Total	\$
Less Enclosed Payment	\$
BALANCE DUE	\$

K8

Program name K8 Date

Child Information

Child's name Gender Date of birth

Home street address City State

Mailing address City State

Finding directions ZIP County

Parent or guardian name, adult **whom child lives with** Phone Alternate phone

Place of employment Business phone Email

Parent or guardian name, adult **whom child lives with** Phone Alternate phone

Place of employment Business phone Email



Emergency Contact

List individuals to notify, in case of emergency, when the parent or guardian cannot be reached. List in order of preference:

Name	Phone

Immunization Record

Attach a copy of the child's immunization record. An immunization record or exemption is obtained prior to the first day of attendance and is to be updated when the child receives additional vaccines. **Parent/guardian must provide a copy of the current updated immunization record to the child care program.** Refer to Appendix II, Immunizations, in Requirements for Child Care Programs for immunization and exemption procedures.

Health Record

Child's physician or clinic			Phone
		Oklahoma	
Street address	City	State	ZIP

☐ I understand that a signed parent/guardian permission is obtained prior to administration of any medication to any child.

Does your child have any specific needs involving routine care, behavior modification, communication, eating, or sleeping activities? When yes, describe:

Does your child have any known allergies? ☐ Yes ☐ No

When yes, list:

Does the known allergy require special precautions, actions, or medications? ☐ Yes ☐ No

When yes, describe:

Describe any special precautions for diet, medication, or activity, when applicable:

Are there any other special considerations that would assist this program in providing care to your child? When yes, describe:

Will your child receive any specialized services from professionals outside of this program's personnel? ☐ Yes ☐ No

☐ When yes, I understand that a signed and dated parent permission is required.

I give permission for program personnel to consult with specialized personnel regarding the needs of my child? ☐ Yes ☐ No

Transportation

- ☐ I **do not** give permission to transport my child.
- ☐ I give permission for my child to be transported by this program under the following circumstances:

Select all that apply:

- ☐ When an emergency occurs and I cannot be reached
- ☐ Field trips
- ☐ To and from home

Drop-off time: _____ Pick-up time: _____

Specific plan for transfer and supervision:

- ☐ To and from home

Drop-off time: _____ Pick-up time: _____

Specific plan for transfer and supervision:

- ☐ Other, specify:

Pick Up Permission

Individuals who have permission to pick up my child:

Name	Phone

Signature

I understand this form is supplied by the Oklahoma Human Services (OKDHS) for the convenience of the child care program and me to assist with care of my child. Supplying this form in no way imposes any responsibility or obligation upon OKDHS.

Program policies are provided to parents upon enrollment and when revisions are made.

Selecting Quality Child Care - A Parent Guide, DHS publication 87-91, Licensing Requirements for Child Care Programs, DHS publication 14-05, and the program compliance file are all made accessible to parents in a prominent location.

Parent/guardian signature

Date

Child Care Program Use

Date child entered program: _____

Date child withdrawn: _____



OK.LAHOMA Human Services

Compliance File Notification: Child Care Programs and Family Child Care Homes

Program Information

Program name			KB
			License number
Street address	City	State	ZIP code
Mailing address			
Phone		Owner	

Child Information

Please list the name(s) and birth date(s) for any child(ren) you are enrolling in this program:

Name	Date of birth

Agreement and Signature

- I understand and am aware:

☒ this program is required to maintain a copy of the compliance file on-site and the information contained in the file is available for inspection.

☒ of the Compliance File location and its contents.

☐ this form is to be completed:

☒ upon child enrollment; and

☒ every 12 months thereafter.

☒ a copy of the program specific **Notice to Parents** is to be provided to parent(s) or legal guardian(s) upon enrollment.

For program specific information contained in the Notice to Parents, select one:

☒ DHS Publication No. 14-01, Notice to Parents for Child Care Program

☒ Form 07LC084E, Notice to Parents for Family Child Care Home

Parent or legal guardian name	Parent or legal guardian signature	Date
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Parental Consent Form for Sunscreen Application

Date: _____/_____/_____

Name of Child: _____

I give permission for the staff at the YMCA of Greater Tulsa to apply Rocky Mountain Children's Water-Resistant Sunscreen SPF 50 to my child as specified below, when he or she will be playing outside, during the months of May through August and below and between the times of 9:00am and 4:00pm. Staff members may assist my child with his/her application of sunscreen to exposed skin, including but not limited to the face, tops of ears, neck, shoulders, arms, legs and feet.

I understand that the application of sunscreen will take place 15-30 minutes before going outside. Sunscreen will not be applied to any broken or irritated skin. I will be notified if my child develops a skin reaction. It is my responsibility to provide sunscreen with a SPF of 15 or higher. It is my responsibility to check the ingredients of this product to ensure my child is not allergic to the provided sunscreen.

Additional Instructions: (check the option that applies to your child)

- ☐ I give permission for the YMCA of Greater Tulsa Staff to apply Rocky Mountain Children's Water-Resistant Sunscreen SPF 50 to my child as described.
- ☐ I give permission for YMCA of Greater Tulsa Staff **to apply sunscreen that I have provided** to my child as described. **Sunscreen bottle must be labeled with child's first and last name in permanent ink.*
- ☐ NO, FOR MEDICAL REASONS, DO NOT APPLY SUNSCREEN TO MY CHILD UNDER ANY CIRCUMSTANCE.

Parent/Guardian's Full Name (Please Print):

Parent/Guardian Signature:



YMCA of Greater Tulsa
Summer Camp Aquatic Procedure Acknowledgement

I, _____, grant permission for my child, _____, to participate in swimming programs at the YMCA of Greater Tulsa. I understand that there will be a lifeguard on deck and the staff will be present.

Please check the box that best fits your child's swimming abilities:

- ☐ Non-swimmer
- ☐ Beginner
- ☐ Moderate
- ☐ Advanced

I do not grant my child, _____, permission to participate in swimming programs at the YMCA of Greater Tulsa.

YMCA of Greater Tulsa's Swim Test Protocol

All swimmers under 16 years old will need to be swim tested before they can enter the pool. Any swimmer who doesn't pass the swim test must wear a personal floatation device. No exceptions will be made. To pass the test, swimmers must be able to swim the length designated by the Aquatics Director of the branch my child is attending summer camp without stopping, grabbing a rope/wall for assistance, or touching the bottom of the pool. Children that do not pass the test will be required to wear a personal floatation device at all times while in the pool area. No exceptions will be made.

By signing below, I acknowledge that I have read the above guidelines regarding the YMCA of Greater Tulsa's Swim Test Protocol.

Parent/Guardian Signature

Date

Please Print Name



OKLAHOMA DEPARTMENT OF HUMAN SERVICES



Medication Permission

I hereby authorize _____ to administer to
Name of facility

_____ the medication listed below, which has
Name of child

been supplied by me and which is clearly labeled:

Medication: _____

Instructions: _____

Reason for medication: _____

Refrigerate: Yes No ☐ ☐

I understand this form is supplied by the Oklahoma Department of Human Services (OKDHS) for the convenience of the child care facility and me and that supplying the form in no way imposes any responsibility or obligation upon OKDHS.

Signature of parent or guardian

Date

Date	Time dispensed	Amount dispensed	Initials

[illegible]