

daycampemergencyform

VISTA RECREATION . COM

Child's Name _____ Male Female

Birth Date (MM/DD/YYYY) _____ Age _____

Address _____

City _____ Zip _____

Primary phone _____

Email Address: _____

*If you do not wish to receive email updates, please **DO NOT** give your email address.*

Emails are only for Recreation programs within the City of Vista and camp updates.

School _____ Grade Level (Fall 2017) _____

~ IDENTIFICATION WILL BE REQUIRED TO PICK-UP CHILDREN AT ALL TIMES ~

Parent/Guardian (1st contact) _____

Primary phone _____

Parent/Guardian (2nd contact) _____

Primary phone _____

ACCOUNT PASSWORD For over-the-phone authorizations, password: _____

In case you forget your password, provide a hint: _____

RELEASE AUTHORIZATION (persons other than parents)

Name (3rd contact) _____ Phone _____

Name (4th contact) _____ Phone _____

Name (5th contact) _____ Phone _____

Name (6th contact) _____ Phone _____

HEALTH & SAFETY INFORMATION

Medical Conditions/Accommodation: _____

Takes Medication: Home only at Camp* List medications: _____

*Medication Release Form is required to administer medicine. Children may not medicate themselves.

Allergies: Please see reverse for food allergies in regards to lunch. _____

Staff may apply sunscreen to my child as the need arises.

*Sunscreen is no longer supplied by the program, please send your child with SPF 30 or higher and label it with their name

Custody Agreement (If yes, a copy of the agreement must be kept on file with the Day Camp Program Office.)

REFUND POLICY

Prior to the start of the final day of camp, participants may request a refund or credit. The amount of the refund/credit will be the camp fee paid less the daily rate, based on the number of days elapsed, regardless of attendance, and the processing fee for refunds. Day Camp refunds/credits are based on a daily rate and are not prorated. All refunds are assessed a processing fee of 25% of the camp registration fee. All credits expire on July 1st immediately after the issue date of credit. All refunds are non-cash and will be processed within four weeks after request. If a request for refund/credit is for a one time event, the refund/credit request must be made prior to the start of the event. If you are unable to attend a class/activity after you have registered, you may request a refund or credit by contacting 760-643-5272. Transfers are allowed as long as there is room in the program the child wants to be transferred into and at least 3 days notice is given to the program supervisor.

Print Name _____

Parent/Guardian Signature _____

Date _____

★ Please Note ★

Please see reverse for more information on camp procedures and policies. There is a separate page which is an updated recreation activity waiver required by the City Attorney. This must be filled out, initialed and signed in order for the child to participate in a camp program. When filling out paperwork, be sure you have filled out the following:

- 1st page: Child's name and personal information including allergies (print, sign and date)
- 2nd page: Camp policy and procedures, please read all of them (print, sign and date)
- 3rd page: Recreation Waiver & Release of liability (read, initial, sign and date)
- **For Adventure Camp Only!** Adventure Camp Participant Agreement



2017/2018

2017/2018 policies

These policies shall be considered in their entirety and may not be modified, altered, or changed in any form without the express written consent of the City of Vista. Attendance and participation in the Day Camp Program is contingent upon agreement to all of the conditions set forthwith.

Camp Philosophy

The City of Vista Day Camp Program is committed to a simple yet comprehensive philosophy focused on your camper's wellbeing: be safe, build positive relationships and make it fun. This philosophy is the basis in which our camp operates, counselors are trained and activities are developed.

Dress Code

Campers should wear comfortable clothes that will allow them free range of motion to participate in recreational and athletic activities. Clothes may get soiled with dirt, grass, paint, glue, etc. **Unacceptable Attire: sandals, flip-flops, open-toed shoes, revealing clothing, apparel that displays/promotes drugs, alcohol, tobacco, or gang references and excessively loose or baggy pants.**

No Personal Items/Electronic Devices

Campers are **NOT** permitted to bring any personal items from home. This often increases the likelihood of them getting lost, stolen or damaged. In addition, campers shall not borrow, lend or trade items while at camp. **Cell phones are NOT permitted at camp.** The camp staff reserves the right to confiscate any and all personal items as issues arise. Confiscated items will be returned to the parent at the end of the day.

Lost Items

The City of Vista is **NOT** responsible for any personal items that may have been lost, stolen or gone missing during the program.

Summer Lunch Program

During the summer the City of Vista Day Camp Program is offering the convenience of **FREE** lunch to campers. Enjoy a healthy lunch without the hassle. Please inform the Day Camp Staff of any food allergies that your child might have. **A release statement must be signed by the child's doctor for the program to offer alternative meal accommodations.** If you do not take advantage of this program, please bring a sack lunch and drink daily that does not require refrigeration/heating.

Field Trips/Transportation

Field trips provide a fun, interesting change of pace for campers and are not optional, as they are a part of the structured activities of camp. As a result, no alternate activities are planned. Parents that do not wish their children to participate must make personal arrangements for care that day, no adjustment in program fees will be made. Transportation for trips may include public transit, chartered bus, city or county owned vehicles, walking or any combination therein. Due to transportation schedules, all times are approximate. I consent to all field trips offsite as defined by the City of Vista Day Camp Program.

Extra Money

The City of Vista is committed to providing an all-inclusive program for one low price. Therefore no additional fees will be collected for field trips or activities. We ask that campers leave any extra money at home. **Extra money is not permitted on field trips.**

Photography Waiver

I permit the City of Vista to use and publish photographs and/or videotapes of me, my child or my ward for purposes of promoting recreation activities to the community through any media channels. ***If there is an issue with this, please see the office and provide written exclusions regarding the use of the photos/videos.***

Late Pick-up

Participants that are picked up from camp after closing are subject to late fees. Fees are as follows: 1-5 minutes, \$5; 6+ minutes, \$1 per minute. Late fees shall be collected at the time of pick up and are per child. Child protective services may be notified if campers remain more than an hour without contact from the parent. Habitual tardiness could result in dismissal from the program.

Consent to Treat Minor

In the event of sudden illness, accident or injury which may occur while said minor is engaged in an activity supervised by City of Vista employees, when neither of the parents or guardians can be contacted, I hereby give my consent for emergency medical treatment as shall be necessary under the circumstances by any physician licensed under the laws of the State of California. I further understand that I shall be solely responsible for all costs associated with the emergency medical treatment provided.

Transfer Requests

The City of Vista Day Camp will honor transfer requests provided the camp requested is available, is an appropriate age group, and not done on field trip days. Any difference in fees must be paid at the time of transfer. Campers are **NOT** permitted to switch back once a transfer is made. All transfers require program supervisor authorization.

Refund Policy

Prior to the start of the final day of camp, participants may request a refund or credit. The amount of the refund/credit will be the camp fee paid less the daily rate, based on the number of days elapsed, regardless of attendance, and the processing fee for refunds. Day Camp refunds/credits are based on a daily rate and are not prorated. All refunds are assessed a processing fee of 25% of the camp registration fee. All credits expire on July 1st immediately after the issue date of credit. All refunds are non-cash and will be processed within four weeks after request. If a request for refund/credit is for a one time event, the refund/credit request must be made prior to the start of the event. If you are unable to attend a class/activity after you have registered, you may request a refund or credit by contacting 760-643-5272.

Camp Policies

I agree to comply with all the rules and regulations of the City of Vista, Recreation & Community Services Department regarding all program fees, enrollment guidelines, schedule of events, and other policies specified in the Parent's Handbook issued by the Day Camp Program. I understand and agree that the City of Vista, a chartered municipal corporation will not assume responsibility for a child who has not been properly signed in when he/she arrives for the day or signed out when he/she leaves for the day.

Day Camp Parent Handbook

The City of Vista Day Camp Program makes available the Parent Handbook that includes camp information, policies and procedures. Please contact the Day Camp Program Office to request a copy. If you would like clarification on anything herein, contact the office at 760-643-5275.

Communication

Campers are not permitted to use cell phones at camp. Thus all communication is coordinated through the camp office. If you need to contact your camper or a staff member please call 760-643-5272.

Camper's Name _____ (please print)

Parent/Guardian Name _____ (please print)

Parent/Guardian Signature _____ Date _____



OFFICE USE ONLY

- | | | |
|--|---|---|
| <input type="checkbox"/> Camper Shirt (size _____)
If enrolled: | <input type="checkbox"/> Excel Registration (staff _____) | <input type="checkbox"/> Additional Waiver (MUST HAVE!) |
| | <input type="checkbox"/> Adventure Camp Agreement | <input type="checkbox"/> CIT Contract |

CITY OF VISTA
RECREATIONAL PARTICIPANT EXPRESS ASSUMPTION OF THE RISK,
RELEASE, WAIVER AND INDEMNITY AGREEMENT

PROGRAM: City of Vista Summer Day Camp Program

No PARTICIPANT may participate with the Program unless and until this form is initialed & signed by the PARTICIPANT (or the PARTICIPANT's parent/legal guardian if applicable)

EXPRESS ASSUMPTION OF THE RISK

Recreational sports and activities **INVOLVE INHERENT RISKS OF INJURY, DEATH OR PROPERTY DAMAGE** that no amount of care, caution, instruction, or expertise can eliminate. Participation in recreational sports and activities **ALSO EXPOSES ONE TO ADDITIONAL RISKS**, whether inherent or not, caused by things such as conditions of property, equipment provided or conduct of others, including other participants, spectators, or employees/agents/independent contractors of the City of Vista. These risks can be encountered whether or not actually participating in the recreational sport or activity. **PARTICIPANT FREELY ASSUMES ALL RISKS WHETHER OR NOT SPECIFICALLY DELINEATED.** _____(Initial)

RELEASE AD WAIVER OF LIABILITY

In consideration for permission to participate in the program, the undersigned agrees to **FOREVER RELEASE, DISCHARGE, AND WAIVE ANY AND ALL LIABILITY CLAIMS OR DEMANDS AGAINST THE CITY OF VISTA** or their employees/agents/independent contractors/volunteers ("Releasees") that the **UNDERSIGNED, HIS OR HER PERSONAL REPRESENTATIVE(S), SUCCESSOR(S) IN INTEREST, ASSIGN(S), HEIR(S), OR DEPENDENT(S)** has or might have against Releasees, whether or not caused by the negligence of Releaseas or any other person or entity, arising out of participation in the program. _____(Initial)

INDEMNITY

In consideration for permission to participate in the program, the **UNDERSIGNED, HIS OR HER PERSONAL REPRESENTATIVE(S), SUCCESSOR(S) IN INTEREST, ASSIGN(S), HEIR(S), or DEPENDANT(S) AGREE TO INDEMNIFY, HOLD HARMLESS AND DEFEND** Releasees from any legal obligation or liability, whether or not caused by the negligence of Releasees or any other person or entity, arising out of participation in the program. The duty to defend exists independently of any duty to indemnify. _____(Initial)

ACKNOWLEDGEMENT

By signing the **THIS EXPRESS ASSUMPTION OF THE RISK, RELEASE, WAIVER, AND INDEMNITY AGREEMENT ("AGREEMENT")**, the undersigned acknowledge(s) that: (1) participation in recreational sports and activities is voluntary and does not involve public interests; (2) that the **AGREEMENT** has been read and understood; and (3) that the **AGREEMENT is a contract that EXTINGUISHES CERTAIN LEGAL RIGHTS AND IMPOSES OTHER LEGAL OBLIGATIONS**. Failure to initial where indicated above does not invalidate the **AGREEMENT**. Additionally, if the Participant is a minor his or her custodial parent or legal guardian must read and execute this **AGREEMENT** and by signing agrees to be bound by the **AGREEMENT** and agrees to bind the minor to the **AGREEMENT**.

Please complete all sections below in order for the waiver to be considered complete. Thank you.

Participant's Name (Print): _____ Date of Birth: _____

Parent/Legal Guardian Name (Print): _____

Relation _____

Signature of Parent/Legal Guardian: _____ Date: _____

(Please Print Clearly)