

2020 Camden Summer Recreation Program Camp Information

Your child's health is very important to us.

Therefore we are taking every precaution we can to ensure our summer camps are safe and as germ free as possible.

Our staff are specifically trained to have fun with safety being their #1 priority. Every Camp Counselor is certified in First Aid, CPR & AED with several being Red Cross Certified Lifeguards. Our staff have also been trained in bullying prevention.

Before and After Care are available for campers at the Camden Snow Bowl for an additional fee (\$30/each/week) paid to the YMCA. Before Care runs from 7-8:30 a.m.. After Care runs from 4- 5:30 p.m.

AGES 7-10 **Snow Bowl Camp** (formerly Summer Rec and Camp-A-Homa)

Get ready for some guaranteed fun this summer at Snow Bowl Camp presented by the Penobscot Bay YMCA! Located at the Snow Bowl, campers will experience traditional camp excitement with a cool new twist each week! Every day, campers will explore the outdoors through a variety of activities, including hiking, boating and swimming, among others. There are also crafts, games and cool projects campers can choose from each day.

WHAT IT'S ALL ABOUT

- Snow Bowl Camp is Monday-Friday for kids ages 7-10 years old (must be 7 years old at the start of their first camp week.)
- Camden residents can sign up for six weeks at a subsidized rate; July 6-Aug. 14. Additional weeks are available through the YMCA at full rate.
- Home Base is located at the Camden Snow Bowl.
- Camp begins at 8:30 a.m. Parents who do not participate in Before Care may drop their campers off between 8:30 and 8:45 a.m.. All campers must be checked in by YMCA Camp Staff.
- Campers may be picked up at the Snow Bowl between 3:45 and 4 p.m. Campers in need of After Care will stay at the Snow Bowl.
- Each week consists of swimming, field games, arts & crafts, nature hikes, STEM projects, canoeing and more!
- On Mondays, campers will spend part of their morning taking swim tests in Hosmer Pond. The rest of Monday will be spent at the Snow Bowl.

Adventure Camp AGES 11-13

Adventure Camp is for pre-teens and teens who love spending time with their friends and are looking for some adventure this summer. This camp will give campers a new and exciting experience beyond our traditional camp programs. Every day, campers will explore the outdoors through hiking, boating, swimming, fishing, climbing and group challenges. These older youth will have all of fun of a summer camp in a more mature environment.

WHAT IT'S ALL ABOUT

- Adventure Camp is a Monday - Friday, outdoor day camp for kids ages 11-13 years old.
- Adventure Camp runs from 9 a.m. to 4* p.m. (*NEW)
- Camden residents can sign up for six weeks at a subsidized rate; July 6-Aug. 14. Additional weeks are available through the YMCA at full rate.
- Home Base is located at the Camden Snow Bowl. Campers can be dropped off at the Snow Bowl between 9-9:15 a.m. All campers must be checked in by YMCA Camp Staff.
- Campers may be picked up at the Snow Bowl between 4 and 4:15 p.m. Campers in need of After Care will stay at the Snow Bowl.
- On Mondays, campers will spend part of their morning taking swim tests in Hosmer Pond. The rest of Monday will be spent at the Snow Bowl.

Details subject to change as the state updates guidelines for keeping campers and counselors safe in camp and day care settings during the pandemic, camp numbers change and the YMCA adjusts plans accordingly.

What Camp Looks Like During a Pandemic

- ◆ All field trips have been cancelled
- ◆ Drop offs: Parents will remain in their vehicle; screening questions will be conducted on camper before the child is cleared to exit and join camp.
- ◆ Pick-ups: Parents will remain in vehicle; Director will radio "Pod" for camper to be signed out.
- ◆ Campers will be divided into small groups; (Pods) of less than 10 campers.
- ◆ Campers will be with the same group and counselors for the entire week and no mixing with other "Pods"; including lunch time.
- ◆ Staff will wear masks while in close proximity of a camper or Pod. Campers are not required to wear masks.
- ◆ Each Pod will have extra sanitization and cleaning products.
- ◆ Activities include and may differ from camp to camp and be location specific: Swimming, Hiking, Canoeing, Arts and Crafts, Movies, Various Pod field games with keeping 6' feet apart in mind.
- ◆ Pods will rotate station to station throughout the day. Cleaning all equipment and wash hands before rotating to next station.

Additional weeks (6/22-6/26, 6/29-7/3 and 8/17-8/21) for both camps available for purchase and registration through the YMCA.



207-236-3438 Phone

CAMDEN PARKS AND RECREATION | CAMDEN SNOW BOWL

20 Barnestown Road | P.O. Box 1207 | Camden, Maine | 04843

Fax 207-230-0490



Snow Bowl Camp

AGES 7* - 10

2020 Camden Summer Camp Camp Registration Form



Adventure Camp

AGES 11 - 13

*Campers must be 7 years old at the

Camper's Name: _____ Age: _____ Birthdate: _____ | _____ | _____

Street | P.O. Box: _____ Town | City: _____ Zip: _____

Home Phone: _____ Mobile Phone: _____

Swimming Ability: _____

Parent | Guardian Name #1: _____

Address: _____ Home Ph: _____

Place of Employment: _____ Work Ph: _____

Mobile Ph: _____ Email: _____

What is the best way to reach #1? _____

Send all email communication to #1? Yes No

Parent | Guardian Name #1: _____

Address: _____ Home Ph: _____

Place of Employment: _____ Work Ph: _____

Mobile Ph: _____ Email: _____

What is the best way to reach #1? _____

Send all email communication to #1? Yes No

If we should need to call during the time your child is in our care, which parent | guardian should we try to contact first? #1 #2

Emergency Contacts (In case a parent | guardian listed above cannot be reached)

Name: _____ Phone: _____ Relationship to child: _____

Name: _____ Phone: _____ Relationship to child: _____

Names of people who are permitted to remove the child from camp:

1. _____ 2. _____ 3. _____



116 Union St. | Rockport
207-236-3375



2020 Camden Summer Camp Release Form, Waiver of Liability and Indemnity Agreement

Camper's Name: _____ Birthdate: _____

Please read carefully before signing below:

On behalf of myself and my child, whose name is set forth below, I hereby release the Town of Camden, its employees, officials, municipal officers, their heirs, successors and assigns, of and from any claims, demands, rights, claims for personal injury or bodily injury and causes of action, of whatsoever kind or nature, including all liability for personal or bodily injury, or loss or damage to personal property, arising from or by reason of any activities in which I or my child engage which occur on or about any facilities operated or maintained by the Camden Parks & Recreation Department, or by the Town of Camden, including any activities specifically sponsored by the Camden Parks & Recreation Department.

Photographs: The Camden Parks & Recreation Department may take pictures or videos of participants at their programs. *Note: Please be aware that pictures may appear in promotional materials and media releases.*

I understand that I and my child are giving up any right to sue the Camden Parks & Recreation Department or the Town of Camden for any claim, demand, or right set forth above. By signing this release, I and my child agree that the Town of Camden and the Camden Parks & Recreation Department, under no circumstances, shall have any liability or responsibility for any injury or loss that I or my child suffer in connection with any of the activities which occur on or about the facilities operated and maintained by the Camden Parks & Recreation Department, or by the Town of Camden.

Indemnification: Furthermore, I agree that I shall indemnify and hold harmless the Town of Camden, its officials, municipal officers, employees, and agents, their heirs, successors and assigns, from any claim, demands, causes of action, judgments or liability whatsoever arising out of or in connection with any activities in which I or my child engage on any premises operated or maintained by the Camden Parks and Recreation Department of the Town of Camden. Such indemnification shall include any reasonable attorney's fees and costs incurred by the Camden Parks and Recreation Department or the Town of Camden in connection with such claims or causes of action.

I specifically agree that I shall indemnify and hold harmless the Town of Camden, its officials, municipal officers, employees, and agents, their heirs, successors and assigns, from any such claims, demands, causes of actions, judgments or liability by a third party, including claims by my child named below, which is not covered by the release set forth above

Authorization: I hereby give my consent to any medical procedures deemed advisable for my child by the Town of Camden, and/or its employees in the event that I cannot reasonably be contacted in sufficient time, given the circumstances of my child's injury and that my child has sustained an injury that reasonably requires treatment.

(SIGNATURE) Parent or Guardian Name (PRINT) Parent or Guardian Name Date

Tiered Pricing	<u>Tier 1:</u> Most accurately reflects the true cost of camp for each camper.	<u>Tier 2:</u> Reflects the basic cost for each camper at a partially subsidized rate.	<u>Tier 3:</u> Reflects the basic cost of camp for each camper at a subsidized rate.
For Camden Residents Only	All (6) six weeks: \$600 Weekly: \$140	\$540 \$132	\$450 \$125

Registering for: _____ ALL 6 Weeks Total Due: _____
 _____ Camden Week 1 / Y Week 3 (7/6-7/10) _____ Camden Week 2 / Y Week 4 (7/13-7/17)

_____ Camden Week 3 / Y Week 5 (7/20-7/24) _____ Camden Week 4 / Y Week 6 (7/27-7/31)
 _____ Camden Week 5 / Y Week 7 (8/3-8/7) _____ Camden Week 6 / Y Week 8 (8/10-8/14)

Days/Weeks NOT attending _____

FOR OFFICE USE:

Registration date: _____

Paid date: _____

_____ Cash _____ Check# _____ CC

Additional weeks (6/22-6/26, 6/29-7/3 and 8/17-8/21) for both camps available for purchase & registration through the YMCA

To pay by credit card, call Holly at 207-542-9149
 A 2.5% Convenience Fee assessed for credit card purchases



2020 Camden Summer Camp Health Information Form

Consent:

I hereby give my consent, in the event of a medical emergency when I cannot be contacted, for YMCA and Camden Parks and Recreation staff to obtain whatever treatment may be deemed necessary for:

Camper Name: _____ Birthdate: _____ | _____ | _____

Street | P.O. Box: _____

Town: _____ State: _____ Zip: _____

Mobile Phone: _____ Home Phone: _____

This authorization includes my consent for the above-named child to receive treatment by a physician in any hospital emergency department. I hereby give my authorization for emergency medical treatment as outlined above.

(PRINT) Parent or Guardian Name **(SIGNATURE)** Parent or Guardian

Name of Child's Physician: _____ Phone: _____

Street Address: _____

Town | State: _____ Zip: _____

Health Insurance Carrier: _____ ID#: _____ Group #: _____

Date of last tetanus shot: _____

Does your child self-administer any medications, such as an inhaler or Epi-Pen? Please list any medication your child will/could self-administer at camp. All medication must be given to the camp director and must come in original bottle with child's name, medication, dosage and doctor.

No: ___ Yes (please list): _____

Please list any medication your child will need to take during camp. All medication must be given to the camp director and must come in original bottle with child's name, medication, dosage and doctor.

Camper Medical History (please check all that apply)

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Hypertension | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Heart Disease |
| <input type="checkbox"/> German Measles | <input type="checkbox"/> Whooping Cough | <input type="checkbox"/> Mononucleosis | <input type="checkbox"/> Convulsions |
| <input type="checkbox"/> Measles | <input type="checkbox"/> Scarlet Fever | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Other _____ |

Allergies (please check all that apply)

- | | | | |
|-------------------------------------|--|---------------------------------------|---|
| <input type="checkbox"/> Animals | <input type="checkbox"/> Serious Ivy, Oak, Sumac | <input type="checkbox"/> Insect Bites | <input type="checkbox"/> Bee/Wasp/Hornet Stings |
| <input type="checkbox"/> Penicillin | <input type="checkbox"/> Foods _____ | <input type="checkbox"/> Medications | <input type="checkbox"/> Other _____ |

CONTINUED ON NEXT PAGE/BACK —>



2020 Camden Summer Camp Health Information Form continued...

Does your child have any medical conditions we should be aware of? Also include anything about your child's health that will help YMCA and Snow Bowl staff to better understand and work with your child, such as hearing/vision programs, physical needs or behavioral issues. (Please attach letter if necessary)

Disabilities or Physical Restrictions: Please describe any disabilities or physical restrictions of which you want us to be aware and any reasonable adaptations or accommodations that are requested.

To ensure we can best serve your child, please answer the following questions:

Does your child have an IEP? No Yes If yes, please explain:

Is your child attending therapy? No Yes If yes, please explain:

Is there anything we should know about your child to ensure their success in our program?

CONSENT AND AUTHORIZATION

I approve of my child using his/her own:

Bug Spray: No Yes Sun Screen No Yes

Parent / Guardian Initials: _____

The registration form, health forms and payment must be completed before camper can be registered. One full set of forms per child. Please drop off or fax all immunization records to the Snow Bowl at 207-230-0490.

