

NAUGATUCK YMCA SCHOOL'S OUT SUMMER CAMP

9am-4pm (Extended Care 7am-9am & 4pm-6pm)



CREATING LIFELONG MEMORIES

LETTING KIDS BE KIDS

NO ADDITIONAL FEE FOR FIELD TRIPS

NAUGATUCK YMCA 284 Church Street Naugatuck, CT 06770 P 203 729 9622 W <u>Naugatuckymca.org</u> **NEW THEMES FOR 2021** Week 1- Get to Know You Week 2- Superheroes Week 3- Under the Sea Week 4- Hollywood Week 5- Jungle Week 6- Beach/ Hawaii Week 6- Beach/ Hawaii Week 7- Green Thumb Week 8- Music Week 9- Spies and Detectives Week 10- Around the World Week 11- Goodbye Summer



NAUGATUCK YMCA SCHOOL'S OUT SUMMER CAMP REGISTRATION

Registration Check List-Did you include the following?

- □ 100% Completed registration form
- Membership form
- Covid Waiver
- □ \$50 Non-refundable deposit for each week of camp
- State of Connecticut Department of Education Health Assessment Record (All 3 pages complete and signed and dated)
- Medication Administration if needed
- □ Asthma Action Plan if needed
- Emergency Action Plan if needed
- Individual Care Plan for any medical conditions
- □ Medication in the original box with prescription label
- □ Financial Assistance for Membership (Membership for All)
- Financial Assistance for Tuition(FA)
 Must have a current Care 4 Kids certificate.
 If not, must apply to Care 4 Kids before FA can be processed.
 Must complete a Financial Assistance application, with backup.
 FA will not be processed without required documents.
- Care 4 Kids Packet Included
 Current Care 4 Kids families will need to complete a SUMMER 2021 Parent
 Provider Agreement. (PPA). Families without a current certificate must
 complete a Care 4 Kids Application and aParent Provider Agreement. 3
 current paystubs must be attached to the Care 4 Kids application or it will not
 be submitted.



FOR YMCA USE ONLY

_/___/ Received by (initial)_ Date:___ Forms Received:

Current Health record & immunization

_Care 4 Kids Application & PPA

_ Deposit made \$_____

2021 Summer Camp Registration

PLEASE INCLUDE A COPY OF AN UPDATED PHYSICAL AND IMMUNIZATION RECORD CHILD CAN NOT START THE PROGRAM WITHOUT CONFIRMATION CALL FROM DIRECTOR

Campers, Counselor In Training or Junior Counselor:

Child's Name:		Gender M F Grade	Date of Birth	//
Address:		City:	Zip Code:	
Home Phone:		_ Child lives with: Mother	Father Grandparents	Foster Family
	White Asian/Pacific Islar HispanicOther	nder American Native/ A	laskan Native Black, not o	of Hispanic origin
Income:	Below 20,00020,000-30),00030,000-40,000	_40,000-50,000 over 50,00	00

Family Information:

Parent 1			Parent 2		
Address:			Address		
City	State	Zip Code	City	State	Zip Code
Home Phone			Home Phone		
Cell Phone:			Cell Phone		
Email			Email		
Employer			Employer		
Employer Address			Employer Address		
Work Phone			Work Phone		

Permission to Release and Emergency Contacts (Other than parents). Persons picking up must be at least 18 and provide a photo ID when picking up. Copies of ID's will be taken:

Name:	Relationship:
Home:	Cell:
Name:	Relationship:
Home:	Cell:
	Relationship:
	Cell:
Name:	Relationship:
Home:	Cell:

Please list any person(s) who are not allowed to pick up your child. Any person who is not allowed to pick up said child must provide a copy of the restraining order or court order.__



Siblings:

Name	Ages	Birthdate

Medical Information:

Doctor:		
Address:	Phone Number:	
Dentist:		
Address:	Phone Number:	

I understand that by signing this contract with the YMCA, I am responsible for following the policies set by Naugatuck YMCA, including paying my child's and tuition, registration fee and late fees that may occur. I understand that rates are subject to change with a 30 day notice.

Parent Signature	Date
Directors Signature	Date
	Handbook Sign Off
I	, parent of
	ugatuck YMCA can end at any time on either the family or

understand that the contract between the Naugatuck YMCA can end at any time on either the family or provider's behalf. I/we have read, received and understand all information in the Naugatuck YMCA's handbook. I/we feel comfortable with all the information that I/we have learned and understand that I/we may ask questions at anytime.

Signature

Date



_____ Date ____/___/____

Date / /

Date / /

_____ Date ____ /____/

Permission Authorizations

In the following statements of permission, the phrase "my child" refers to the child listed on the application.

I, the undersigned, give permission for my child to participate in normal program activities in and away from the YMCA facility. I voluntarily agree to hold the YMCA harmless for injuries or accidents resulting in bodily injury or property damage during my child's participation in the YMCA Program. I further waive, release, absolve and indemnify the Naugatuck YMCA, its directors, volunteers, officers or employees for injuries or accidents occurring while participating in the programs of the YMCA.

Parent/Guardian's Signature ____

I, the undersigned, give the YMCA permission to take/use photographs, slides, or video of the person named on this application for YMCA purposes. I understand that a photo of my child may be kept in my child's file for identification purposes. Parent/Guardian's Signature Date / /

I, the undersigned, certify that the information given to the YMCA is accurate. I realize that I am responsible for updating the YMCA staff of any changes to my child's file. I understand that I must have an updated medical form for my child on file at the Naugatuck YMCA before my child starts the program. I have read and understand the Parent Handbook and have reviewed the Behavior Management Technique and discussed any concerns with staff. Also, I know that I am responsible to uphold the policies and procedures as stated.

Parent/Guardian's Signature _____

In the event of a serious illness or injury to my child, he/she will be taken by ambulance to the nearest medical facility, as decided by emergency personnel. I, the undersigned, give the YMCA staff permission to give immediate first aid and/or secure emergency medical services to my child as necessary. Physician Name Address Phone Number.

Parent/Guardian's Signature ____

I, the undersigned, give permission to have my child transported by school bus for field trips. This permission includes any walking field trip for the program. In the unforeseen event of an emergency which would require immediate evacuation of any YMCA program, permission is granted for transportation to a safe location.

Parent/Guardian's Signature _____

Special Information

Any child with special information in either section needs to have an Individual Care Plan form filled out by the parent/guardian. These forms are available at the Naugatuck YMCA and **MUST** be completed before the child starts the program. Is there any special information concerning your child? I understand if medication is needed I must supply the medication administration form and the emergency action plan filled out by the physician and signed by parent (Example: medication, allergies, behavior, pick-up)

Please use this space to provide detailed information regarding behavioral or parental custody issues that would enable us to provide appropriate services to your child. If relevant, please list any behavioral modification methods used at home or at school.

Parent/Guardian's Signature ______ Date _____/____/



MEMBERSHIP WAIVER

Use of the YMCA facilities and participation in sports or other physically demanding activities inherently exposes the participant to a certain degree of risk of personal injury, illness, and other adverse medical consequences. The YMCA in not an insurer of a member's life or personal safety. No member will engage in activities which require a level of physical fitness exceeding the member's physical condition or abilities, as determined by the member. Every member assumes the risk of personal injury , illness, or other conditions arising out of or related to the member's activities on YMCA premises and releases the YMCA, it's Directors Officers, Agents, and Employees from all claims, actions, or liability on account of such causes.

I am an adult over 18 years old of age and wish to participate in Naugatuck YMCA membership/program activities. IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA for any purpose, including , but not limited to observation or use of facilities or equipment ,or participation in any off-site program affiliated with the YMCA, the undersigned ,for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating inspected and carefully considered such premises and facilities or the affiliated program. In addition, I give my children permission to participate in Naugatuck YMCA activities. I understand that even when every reasonable precaution is taken, accidents can sometimes happen. Therefore, in exchange for allowing me to participate in YMCA activities , I understand and expressly acknowledge that I, for myself ,or anyone entitled to act on my behalf, waive and release the YMCA, sponsors, representatives ,and successors from all claims or liabilities of any kind arising out of my participation in activities at or sponsored by the YMCA. I further agree to indemnify and save harmless the YMCA, its staff director's members and guests. I have read, understand, and am voluntarily signing this authorization and release.

I understand that the Naugatuck YMCA is not responsible for personal property lost, damaged or stolen while members and /or program participants are using YMCA facilities, on YMCA premises, or involved in YMCA programs. I give my permission to the Naugatuck YMCA to use limitation and obligation, photographs, film footage, or tape recordings which may include my image or voice for the purpose of promotion or interpreting YMCA programs.

By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law.

The YMCA conducts regular sex offender screening on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access.

Member Signature

Print Name Here

Date



Tuition Agreement for Summer Camp:

Membership Fee: \$15 per month

Security Deposit: \$50 non-refundable deposit for each week of summer camp

Before Care: 7:00 a.m. – 9:00 a.m. _____ 5 Days \$30 _____ Part Time M, W, F \$45

After Care: 4:00 p.m. – 6:00 p.m. _____ 5 Days \$30 _____ Part Time M, W, F \$45

Camp: 9:00 a.m.- 4:00 p.m. (Check Weeks Attending)

Week	Theme	5 Day Member	5 Day Community Member	Part Time Member M, W, F	Part Time Community Member M, W, F
June 14	Getting to Know You	\$175	\$246	\$115	\$165
June 21	Superheroes	\$175	\$246	\$115	\$165
June 28	Under the Sea	\$175	\$246	\$115	\$165
July 5	Hollywood	\$175	\$246	\$115	\$165
July 12	Jungle	\$175	\$246	\$115	\$165
July 19	Beach/Hawaii	\$175	\$246	\$115	\$165
July 26	Green Thumb	\$175	\$246	\$115	\$165
Aug 2	Music	\$175	\$246	\$115	\$165
Aug 9	Spies and Detectives	\$175	\$246	\$115	\$165
Aug 16	Around the World	\$175	\$246	\$115	\$165
Aug 23	Goodbye Summer	\$175	\$246	\$115	\$165

I understand I am responsible for payments on the above checked dates.

Payment Policy

If changes need to be made to my child's schedule to decrease or increase my child's attendance at the Naugatuck YMCA I will give a minimum of 2 weeks notice. I understand I will also be responsible for completing a new tuition agreement form.

Parent Initials



P 203 729 9622 W Naugatuckymca.org

Care 4 Kids

We encourage families to apply for Care 4 Kids to help subsidize the tuition. Parents can go online to ctcare4kids.com. Print the application and parent provider agreement. Follow the directions on the application. Bring in the parent provider agreement for the director to sign. Parents are responsible for picking up the signed agreement and sending the information to Care 4 Kids.

Once you receive approval or denial you can apply for program financial assistance at the YMCA.

PAYMENTS

_____ I would like the following account charged on each Friday, according to the payment schedule.

Electronic Funds Transfer (EFT) Agreement

I/we hereby authorize the Naugatuck YMCA to charge the account provided on a weekly basis (according to the pay schedule), in the amount named, to pay for the Naugatuck YMCA Summer Camp program for the child(ren) listed below.

Child's Name		Child's Name		
BANK DRAFT EFT	Checking	Savings		
BANK NAI	ME			
ROUTING	NUMBER			
	NUMBER			
	-	MasterCard	Visa	
CC #		Exp. Date		
Date of First Trans	fer:	Payment Amount:		
My signature below states my un account for all fees owed for the returned payment fees that are a	summer camp program.	I understand that I wil	l be responsible	for any and all
SIGNATURE:		C	DATE:	
Fees are due weekly on a prepair The YMCA does participate in the certificate is issued from Care4Ki bill or payment reminder unle	Care4Kids program. Par ds and a parent share fe	ents are responsible to e has been determined	make all weekl	y payments until a
I have read the policies and proce tuition, late fees, absenteeism, a				
Parent/Guardian's Signature			Date/	//
My signature below states my un account for all fees owed for the returned payment fees that are a	summer camp program.	I understand that I wil	l be responsible	for any and all
SIGNATURE:		I	DATE:	
NAUGATUCK YMCA 284 Church Street Naugatuck. CT 06	770			



COVID POLICIES

During these uncertain times it is imperative to provide our community with a safe, educational and fun filled summer for the children in our community.

Working from the CDC guidelines and in collaboration with our local health and the office of early childhood advisors, we have strengthened our health screening processes. We will implement CDC, local and state criteria to help ensure that participants joining our community are healthy.

The following amendments are subject to change as CDC, state and local guidelines are changed. Please read and complete the last page. This includes a new tuition agreement during the Covid-19 restricted times.

Refund Policy:

2020 Naugatuck YMCA Cancellation policy May 1, 2020

Due to the financial strain the COVID-19 crisis has placed on our camp families, our normal cancellation policy and payment schedule has been waived this year.

2020/2021 policy:

- 1. If the YMCA cancels the a week (due to recommendations by the CDC and local health authorities):
 - a. Families can choose to donate all or a portion of their fees to the YMCA. Donations help with the ongoing property care as well as preparation work for the program which has already occurred (suggested donation: \$100 per child), OR
 - b. Families can choose to roll their payments over to the following weeks, OR
 - c. Families feeling the financial strain are eligible for a full refund, OR
 - d. Some combination of donation/rollover/refund.
- 2. If a family wishes to cancel:
 - a. Full refunds will be offered up to two weeks before the start of a new week. Please make the request in writing by emailing <u>sbeck@naugatuckymca.org</u>. Families are asked to consider donating a portion of their fees to the Naugatuck YMCA to help with the ongoing property care and ongoing community services.

We are grateful for all of our families and their trust and loyalty over many years. If you have to cancel and request a refund due to your family's circumstances, we understand and hope you will consider joining us again in the future!

SOCIAL DISTANCING:

Drop off and pick up will be staggered and held outside at the field. When weather does not allow for outdoor drop off parents will have a health screening and will walk their child to their assigned rooms. Parents will not enter the childcare rooms.

Drop off times:

Before care: 7:00am to 7:15am 7:45am to 8:00am (Children will not be allowed to be dropped off after 8am for before care) Regular camp: 9:00 to 9:05

Pick up times:

 Regular Camp:
 3:55pm to 4:00pm

 After care:
 5:00pm-5:05pm

 5:55pm-6:00pm



- Group size will be limited to 16 children per group. Unless otherwise changed by the Connecticut Office of Early Childhood.
- Groups will be assigned to one room. •
- Groups will not be allowed to be combined for large group activities.
- Staff will be assigned to one group and remain with that same group only.
- Staff and children will be required to wear face covering as required by state and local authorities.

DAILY HEALTH SCREENINGS:

- Staff will review health screening daily with the parents upon arrival.
- All staff and children will be checked for the following upon arrival:
 - 1. Signs of cough or respiratory distress
 - 2. Temperature below 100 degrees
- Parents will be required to maintain 6 foot social distancing and wear face coverings during screening and will watch their child until other students have been screened and/or staff is ready to bring the child to their assigned group.
- Staff will recheck children's temperatures at lunch time and snack time daily.

TRAVEL POLICY:

- For the protection of others, and to contain the spread of the virus, the State of Connecticut has recommended that persons traveling from an impacted state into Connecticut self-quarantine for 14 days. If you do not wish to self-quarantine, please see the link to the governor's memo below for testing alternatives. If you come in contact with a child enrolled in the Naugatuck YMCA upon your return from an impacted state, the enrolled child may return to the center after a 14 day time period to ensure s/he is not spreading or has not contracted the virus.
- The most current list of hotspot states can be found at https://portal.ct.gov/Coronavirus/Covid-19-Knowledge-Base/Travel-In-or-Out-of-CT.
- Governor's Memo: <u>https://portal.ct.gov/-/media/Coronavirus/20200702-DPH-travel-advisory.pdf</u>

HAND WASHING and SANITIZING:

- Hand washing is done regularly during the program hours. We are encouraging additional handwashing times.
- Children are reminded to avoid touching their eyes, nose and mouth.
- Children are sent home if they are sick. We are monitoring the health of the children in our programs and ask for parents to keep sick children home.
- We have increased our regular cleanings and disinfecting of surfaces used by the children.

EXPOSURE:

In the event of a child or staff is diagnosed with Covid-19, we will take the following steps:

- Notify the families and staff in the child care program.
- Contact our local health department of the CT Department of Public Health.
- Follow guidance from our local health department and the Office of Early Childhood.

SIGNATURE: _____ DATE: _____



COVID-19 RELEASE AND WAIVER OF CLAIMS ADDENDUM

("Release")

I hereby acknowledge the health risks and dangers associated Coronavirus, COVID-19. COVID-19 is an **extremely contagious** virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a means to prevent the spread of the virus. **COVID-19 can, among other things, lead to severe illness, personal injury, permanent disability, and death.** Participating in **the Naugatuck YMCA programs or accessing the Naugatuck YMCA facilities could increase the risk of contracting COVID-19.** The Naugatuck YMCA in no way represents or warrants that COVID-19 infection will not occur through participation in the Naugatuck YMCA programs or accessing The Naugatuck YMCA facilities. I have read and fully understand and acknowledge the contents of the Release. In exchange for participating in the Naugatuck YMCA events and/or at any of its facilities (collectively, "Participation"), I, for myself and on the behalf of my family, agree that I am voluntarily waiving, releasing, indemnifying and discharging the Naugatuck YMCA and its officers, directors, employees and volunteers for, from and against any and all liability, damages, and each and every action including, but not limited to, exposure or transmission of the COVID-19 virus (collectively, "Claims") by Participation associated with or at the Naugatuck YMCA.

I represent that I have full authority to sign on behalf of my family and that my signature binds each other person having authority to make decisions on behalf of my family.

My signature below is confirmation that I have read and fully understand and acknowledge the contents of the Release and agree that I am voluntarily waiving, releasing, indemnifying and discharging the Naugatuck YMCA and its officers, directors, employees and volunteers for, from and against the Claims.

Name: _

Signature:_____ Date:_____





PARENT INFORMATION

GOALS Help children develop to their fullest potential. Support and strengthen the family unit. Deliver child care in a safe and positive environment. Teach, model, celebrate, practice, praise, and reinforce the four values of character development: caring, honesty, respect, and responsibility; and confront inconsistencies. Foster health and well-being for children and families.

FORMS NEEDED

Registration formAstCT Depart. Of Ed.Health Assessment RecordEmMedication Administration Form (if needed)IndMedication in original box with prescript label (if needed)

Asthma Action Plan (if needed) Emergency Action Plan (if needed) Individual Care Plan(if needed)

STAFF

We have a certified head teacher and a supportive trained staff. We have First Aid and CPR certified staff member on site at all times. Medication Administration and Epi Pen Trained staff are on site when a child is present with the need for care.

CONTACT INFORMATION YMCA 284 Church Street Naugatuck (203)729-9622

HOURS OF OPERATION

9am-4pm (Extended Care 7am-9am & 4pm-6pm)

DROP off and PICK UP POLICY

Drop off and pick up is located at the St Francis Field on Church Street. In the event of a storm or extreme heat and poor air quality dismissal may be indoors at the YMCA. Children are to be dropped off between 9am and 9:10am. Children must be picked up by an adult. Parents must sign their child out at time of pickup. Please list all people allowed to pick up your child. Please advise them they will need to show ID. IF A PARENT IS NOT ALLOWED TO PICK UP A CHILD, A COURT ORDER MUST BE ATTACHED TO REGISTRATION FORM.

Dismissal is at 6:00. A late fee will be charged of \$5 will be charged for every 5 minutes you are late. If you are unable to be reached at your contact numbers, we will attempt to call emergency contact people. If the child is not picked up by emergency people or the parents by 7:00, we are mandated by the state of CT to contact the Naugatuck Police Department and DCF.

PAYMENT POLICY Payments are due the Friday before care is given. All accounts must be kept up to date in order to stay active in any of our YMCA programs. Failure to pay will result in a referral to a collection agency. You will be responsible for attorney fees, court costs and any other cost associated with this debt. There is a \$25 bounced check fee. We do accept Care 4 Kids. Program Financial Assistance is available for those who qualify. Families must apply for Care 4 Kids before financial assistance is given.

Summer Camp requires a \$50 non-refundable deposit for each week registered for. This deposit will hold your child's place and will be applied to the full payment of the camp tuition. Lack of payment or late payment may result in loss of reserved space. Please note a late charge of \$15 applies to each late payment. All cancellations must be made in writing at least 30 days prior to the start of the camp session. All cancellations must be received in writing between 15-29 days prior to the start of the camp session for a 50% refund minus the \$50 nonrefundable deposit per session. No refunds will be granted less than 15 days prior to the start of the session.



MEDICATION Prescribed emergency medication will be the only medication administered by the trained staff in our program. All other medication should be dispensed by the school nurse prior to dismissal. A trained staff will be on site at all times when a child who may require medication is in our care. Medication must be in original container with dated current labeling that includes pharmacy and name of prescribing physician. Forms needed are: Written Order from an Authorized Provider/parent's Permission, Emergency Health Care Plan, Asthma Action Plan, Individual Plan of Care and Epi Pen Administration Permission. Emergency medications are stored in the director's office. Controlled medication is stored in a locked box in the director's office. Thorough hand washing is expected. Staff will wear gloves at all times when dispensing or handling medications .If medications are administered, the date, time, dosage and comments will be recorded on the child's individual administration of medication record. The information will be logged into our medical incident log for review by our consulting physician if necessary.

<u>ATTENDANCE</u> Attendance will be taken on a daily basis; please call the YMCA (203)729-9622 if your child is going to be absent. We will be expecting your child if we do not receive a call saying otherwise. There is no fee adjustments for missed days.

HEALTH AND ILLNESS If your child becomes ill, parents will be called first. If we are unable to reach a parent we will call emergency contact people. 2 emergency contact people must be listed on your registration form. The child must be picked up within an hour of the call. Sick children will be supervised away from other children and made comfortable while waiting to be picked up. Please keep your sick children home. This will help prevent spread of infection or illness among children. Children should be kept home if they have experienced any of the following within the past 24 hours; a fever of 101 or more, a runny nose with green or yellow discharge, diarrhea, vomiting or nausea, unidentified rash, any contagious disease or condition including but not limited to conjunctivitis, chicken pox, impetigo, lice or severe cough/croup.

Please notify the YMCA if your child has developed a contagious disease. If a child develops these symptoms while in after school, we will call the parents or authorized pick up person to take the sick child home.

INJURY AND ACCIDENTS If your child is injured at the summer camp program and more than first aid is required, 911 will be called first then every effort to contact the child's parent or legal guardian will be made. Emergency transportation will be provided by emergency service vehicles only. Treatment will try to be secured at the hospital of your choice.

DISCIPLINE AND BEHAVIOR The YMCA uses positive discipline techniques for guiding children. Avoiding competition, comparison and criticism, staff members must deal with children using positive methods of guidance including redirection, anticipation and elimination of potential problems, positive reinforcement and encouragement. Discipline techniques are to be non-punitive and accompanied by rational explanation of expectations. At no time may the staff use corporal punishment or any other humiliating or frightening discipline techniques. The withholding of food may not be used as consequence of behavior at any time. No child shall be restrained. The program operates on the basis of clear and consistent rules, which are explained and understood by the children. Difficult behavior is routinely anticipated, activities are redirected and alternative behaviors are discussed with children. At no time is neglect or abuse of children tolerated. Removal of a child from the group for disciplinary or health reasons will be to a location where at least 2 staff members may maintain visual supervision. Parents can discuss the discipline policy with the staff. The following procedures will take place:

• The child will be given a verbal warning and redirected to another activity.



- If inappropriate behavior continues, the child will be encouraged to talk it out.
- Whenever there is a serious concern about a behavior or discipline problem, the staff will inform the parents. The staff and family will meet to develop plans to resolve the problem and communication on behavior will be offered daily.
- In the event that a recommendation is made for the child to receive an assessment from local health education or mental health services, the parent agrees to provide the results of these assessments to the center. (Any costs relating to these services are the responsibility of the parent.)
- If the above actions have not resulted in improved behavior from the child, written notice will be given to the parent/guardian to remove the child from the program for a determined period of time. During this time period, the YMCA staff will continue to work with the parent/guardian and child on behavior modifications.
- The YMCA reserves the right to remove any child who may pose a danger to themselves or other children in our setting. Efforts will be made to recommend an appropriate placement for the child.

WITHDRAWLS 2 weeks advanced notice must be given when withdrawing a child from the program. All families failing to provide this notice will be responsible for 2 weeks payment following the withdrawal.

If the program is cancelled due to weather there will not be a refund for the closing. Summer Camp requires a \$50 non-refundable deposit for each week registered for. This deposit will hold your child's place and will be applied to the full payment of the camp tuition. Lack of payment or late payment may result in loss of reserved space. Please note a late charge of \$15 applies to each late payment. All cancelations must be made in writing at least 30 days prior to the start of the camp session. All cancellations must be received in writing between 15-29 days prior to the start of the camp session for a 50% refund minus the \$50 nonrefundable deposit per session. No refunds will be granted less than 15 days prior to the start of the session.

SCHEDULE SAMPLE

7-9am Extended Care
9-9:30 Opening Ceremony
9:30-11:30 Free Choice Activities
11:30 Lunch provided except for the 1st week of camp.
12:00 Reading or Journaling
12:30 Swimming
1:00 Group Games
1:30 Outdoor Activities
2:00 Youth Room Activities
2:30 Open Gym
3:30 Closing Ceremony
4:00 Dismissal
4-6pm Extended Care



SNACKS and LUNCHES

Summer Camp: Lunches are provided except for the first week and last week of camp. Campers need to bring a snack and water bottle daily. They need to follow our healthy eating guidelines. We do not have access to heating lunches or refrigerating lunches. Peanut butter and nuts are not allowed due to allergies. Fruits or vegetables are to be served at every snack. Sugar content must be 8 grams or lower. No Trans Fat is allowed. No fried or pre-fried foods are allowed. Whole grain foods served daily at snack time. Water or low-fat milk are the only beverages allowed.

Summer Camp Field Trips Emergency information forms will accompany children on the trip along with emergency procedures and first aid kit. If transportation is required, adequate safety procedures and regulations will follow in compliance with state regulations. Transportation will be contracted school vendors. Permission is on the registration forms. Be sure to have your child at camp on time.

<u>Clothing</u> Children should wear comfortable clothing suitable to the season and the activities in the program. Bathing suits and towels should be brought daily along with a full change of clothing for emergencies. Please be sure to label all of your child's belongings with their first and last name. Children are to wear sneakers. Flip flops and sandals are not allowed.

Screen Time Policy Digital devices are to be used for programs that engage children in physical activity.

Travel Policy

- For the protection of others, and to contain the spread of the virus, the State of Connecticut has recommended that persons traveling from an impacted state into Connecticut self-quarantine for 14 days. If you do not wish to self-quarantine, please see the link to the governor's memo below for testing alternatives. If you come in contact with a child enrolled in the Naugatuck YMCA upon your return from an impacted state, the enrolled child may return to the center after a 14 day time period to ensure s/he is not spreading or has not contracted the virus.
- The most current list of hotspot states can be found at <u>https://portal.ct.gov/Coronavirus/Covid-19-Knowledge-Base/Travel-In-or-Out-of-CT</u>.

Governor's Memo: https://portal.ct.gov/-/media/Coronavirus/20200702-DPH-travel-advisory.pdf

Questions and Concerns Contact Sherri Beck (203)729-9622 sbeck@naugatuckymca.org