

### KidVENTURE ULTIMATE SUMMER CAMPS 2011 AGREEMENT

The professional Camp Staff at KidVENTURE Summer Camps sincerely believes that childcare services are a team effort, between the families and staff. This necessitates that registered families understand and support the following expectations and policies:

1. I understand that I must fill out a registration packet, pay the non-refundable Camp registration fee of \$35.00, if applicable, per Camper and pre-pay before my Camper can participate in KidVENTURE Ultimate Summer Camps.
2. I understand that I have until the Thursday prior to the week I wish my Camper to attend to register for Camp, given available space.
3. I understand that registration for all Camps must take place at the Parks and Recreation Administrative Offices. Registration will not be taken at Camp. **The receipt I receive upon payment is for my tax records.** I understand that the Parks and Recreation Department will provide a yearly total of my childcare costs for a fee of \$5.00.
4. I understand that Ultimate Day Camp (UDC) hours of operation are Monday through Friday 7 a.m. to 6 p.m. and that Ultimate Specialty Camps (USC) hours of operation are Monday through Friday 9 a.m. to 12 p.m. **All Camps are closed on July 4<sup>th</sup>.**
5. I understand for every late pick-up/early drop-off, according to the on-site clock, I will be charged the following:
  - a. \$1.00 per minute
  - b. \$20.00 administrative feeNOTE: More than two late pick-ups/early drop-offs will be reviewed and may result in Camper's suspension from program. Families using CAPSLO-CCRC must pay all fees; CAPSLO-CCRC will not reimburse these fees. (See Camp Guidebook for specific fee details.)
6. I will share with the Camp Director any changes in my Camper's environment that may affect his/her behavior at Camp.
7. I understand that my Camper may be asked to leave UDC/USC if any of the following incidents occur:
  - a. Failure to pre-pay for services
  - b. Continued late pick up/early drop-off of Camper
  - c. Behavior problems on the part of the Camper or family.
  - d. Lack of cooperation regarding policies and procedures
8. I understand that my Camper will **NOT** be released from the program to any person or activity without written permission from a parent or guardian. I will write a note to the Camp Director specifying dates, times and persons.
9. I understand that Parks and Recreation will not tolerate any disrespect for Summer Camp staff including, but not limited to, harassment, threats or ridicule. Such behavior could result in the dismissal of my Camper(s) from the program.
10. I understand that Camp staff have the right to see photo identification from anyone attempting to take a Camper from Camp.
11. I understand that if my Camper needs to sign him/herself out during the day, I must provide a note that specifies dates, times and activities.
12. I understand that it is important for me to physically sign my Camper in and out of Camp each day using my **FULL SIGNATURE.**
13. I understand that field trips for **USC** are included in the cost of Camp; therefore, separate sign-up and payment is not needed. All Campers attending Camp on a field trip day must go on the field trip; there will not be any Campers or staff back at Camp.
14. I understand that field trips for **UDC Full Time Care Option and Summer School Package** are included in the cost of Camp; therefore, separate sign-up and payment is not needed. I understand that field trips for **UDC Drop-in Care** are NOT included in the cost of Camp; therefore, separate sign-up and payment is required. Payment and sign-up for field trips may be taken at initial registration or at the Parks and Recreation Administrative Offices until the Thursday of the week prior to the trip, given space is available. If there are extra spaces available, sign up and payment may occur at Camp the week of the trip until the end of the day prior to the trip. 24 hour notice is required for a refund; requests must be made to the Recreation Supervisor.
15. I understand that my Camper's spot on a field trip may be forfeited, without a refund, if: the Camper does not arrive at least 30 minutes prior to the field trip departure, if the Camper is not wearing a Camp shirt and closed-toe shoes, or if a behavior problem warrants a safety concern.
16. For **UDC ONLY**: I understand that it is my responsibility to provide my Camper with a healthy and filling lunch EVERY DAY at Camp. No candy, gum or soda is permitted at Camp. It is encouraged that extra snacks be sent daily with Campers.
17. I understand that credits/transfers for tuition will be granted only if approved by the Recreation Supervisor. Refunds will not be granted.
18. I have read and understand all the items in the KidVENTURE Ultimate Summer Camp Guide Book 2011.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
CAMPER'S NAME: \_\_\_\_\_

# KidVENTURE Ultimate Specialty Camps 2011

## WAIVER & LIABILITY RELEASE

Name of Child: \_\_\_\_\_

Program Site: KidVENTURE Ultimate Specialty Camps, June 27 – August 12, 2011 at Meadow Park

For the Parent/Guardian: I, the undersigned, understand that KidVENTURE Ultimate Specialty Camps, sponsored by the San Luis Obispo Parks and Recreation Department, involves physical activity, that accidents can occur during KidVENTURE Ultimate Specialty Camps, and that participants in this or any physical activity can suffer serious injury or death. I further understand that while Parks and Recreation Staff may be trained in basic First Aid and CPR, they are not medical professionals and are not trained to diagnose, monitor or treat chronic or acute medical conditions, whether preexisting or caused by participation in KidVENTURE Ultimate Specialty Camps. Nevertheless, I, ON BEHALF OF THE ABOVE-MENTIONED MINOR (hereafter "Minor") AND FOR MYSELF, HEREBY ASSUME THESE RISKS OF PARTICIPATING IN THE ABOVE-MENTIONED SPECIAL EVENT.

In return for allowing Minor to participate I, on behalf of Minor and for myself, hereby waive, release, and discharge any and all claims for damages for death, personal injury, disability or property damage of any kind which may hereafter accrue to Minor or myself as a result of his/her participation in this activity. This release is expressly intended to discharge in advance the City of San Luis Obispo and its employees, agents, and volunteers from and against any and all liability arising out of or connected in any way with Minor's participation in this activity. **THIS WAIVER AND RELEASE WILL APPLY EVEN THOUGH LIABILITY MAY ARISE OUT OF NEGLIGENCE OR CARELESSNESS ON THE PART OF THOSE DISCHARGED INCLUDING THEIR EMPLOYEES, AGENTS, AND VOLUNTEERS, AND INCLUDING GROSS NEGLIGENCE TO THE EXTENT THAT SUCH WAIVER AND RELEASE IS PERMITTED BY CALIFORNIA LAW.** This Waiver and Liability Release shall apply to Minor and myself, as well as any of our heirs, executors, or administrators. By my signature below, I hereby certify that I am the parent or legal guardian of Minor and that I am acting in that capacity. Further, I acknowledge that I have read this document and understand its contents.

**For the Parent/Guardian:** I, the undersigned, acknowledge that the San Luis Obispo Parks and Recreation Department sponsors the above-named activity and realize that **NO MEDICAL INSURANCE IS PROVIDED**. I, the parent/guardian of the above named minor, hereby approve his/her participation in the above mentioned activity. Further, I consent to emergency medical treatment for this minor should the need arise. I expect that the activity supervisors will make an effort to contact me, time permitting, before any treatment other than minor first aid is administered.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Parent/Guardian Name (Print)

\_\_\_\_\_  
Date

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## Photo/Video Release Waiver

I understand that City of San Luis Obispo staff may on occasion visit the childcare sites to take pictures and/or video for use in a City publication, for educational purposes or for a City Council/Commission meeting. Your signature below indicates approval for use of such photography/video in which your child may appear.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Parent/Guardian Name (Print)

\_\_\_\_\_  
Date

## **KidVENTURE Summer Camps 2011 Family Code of Ethics**

1. I will encourage a positive attitude by demonstrating positive communication techniques with my Camper, other families and Camp Staff.
2. I will place the emotional and physical well-being of my Camper ahead of my personal needs.
3. I will insist that my Camper play and interact with other Campers in a safe and healthy way.
4. I will support the Camp Staff working with my camper to encourage a positive and enjoyable experience for all.
5. I will insist that my Camper treat other Campers and Camp Staff with complete respect.
6. I will educate myself on all Summer Camp information, policies and procedures so that I will be organized and feel prepared for my Camper's experience at Summer Camp.
7. I will accept the fact that there are many ways to solve a problem and I will come up with as many options as I can that combine the Summer Camp philosophies and my own interests.
8. I will do the very best to make my Camper's participation in Summer Camp fun and enjoyable.

*I hereby pledge to provide positive support and encouragement for my Camper, other Campers and Camp Staff by following this Summer Camp Family Code of Ethics.*

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Parent/Guardian Signature

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Date

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