

**Montpelier Recreation Department**  
**February Day Camp February 24<sup>th</sup> – February 28<sup>th</sup>**  
**April Day Camp April 20<sup>th</sup> – April 24<sup>th</sup>**

Campers Name:

**Montpelier Capital Kids Day Camp Forms Checklist:**

- Completed & Singed Form
- Check/Payment or Subsidy Certificate
- Immunization Records (Need a new Copy within the last year)
- Field Trip Permission Form
- Medication Permission Form (If Applicable)
- Subsidy Information (If Applicable)

For Subsidy information or applications contact:  
 The Family Center of Washington County Child Support Services  
 383 Sherwood Drive  
 Montpelier VT, 05602  
 802-262-3292

**Must return complete packet with everything above checked and with payment to Montpelier Recreation Department to be placed into camp.**

**Montpelier Resident's Fee:**

\$120.00 per week/1st camper  
 \$105.00 per week/2nd camper  
 \$32.00 per day/1<sup>st</sup> Camper  
 \$25.00 per day/2<sup>nd</sup> camper

**Non-Montpelier Resident's Fee:**

\$160.00 per week/1st camper  
 \$140.00 per week/2nd camper  
 \$46.00 per day/1st camper  
 \$35.00 per day/2<sup>nd</sup> camper

**February – Registration Deadline February 13th**

Full Week     Mon     Tues     Wed     Thurs     Friday

**April – Registration Deadline April 9th**

Full Week     Mon     Tues     Wed     Thurs     Friday

**Please Print:**

First Name

Last Name

M.I.

Age

Date of Birth

Grade

Home Phone Number

**Mailing Address:**

Street Address

Street Address Line 2

City

State

Zip Code

**Parent's/Guardian's Information:**

Name

Email Address

Work Number

Cell Number

**Parent's/Guardian's Information:**

Name

Email Address

Work Number

Cell Number

**Emergency Contact 1:**

Name

Email Address

Work Number

Cell Number

**Emergency Contact 2:**

Name

Email Address

Work Number

Cell Number

**Medical Information:**

Doctor

Doctor's Phone Number

Dentist

Dentist Phone Number

Insurance/Health Coverage

Does your child have allergies?

Yes    No

If Yes, What?

Any other medical information that may be helpful to us and/or emergency personnel.

**Camper Code of Conduct:**

In order to maintain a safe and peaceful camp environment we require parents and campers to read and comprehend the importance of abiding by the following code of conduct.

I will follow the camp schedule. I will bring only the listed items to camp (no weapons, electronic items etc) I will respect counselors, directors, and other campers by not using foul language, name calling, or fighting. I will follow all safety rules set forth by the camp staff.

Camper Signature

Date

I agree to help my child abide by this code of conduct

Parent/Guardian Signature

Date

### **Montpelier Recreation Day Camp Disciplinary Policy:**

Day Camp is meant to be a fun, educational, and recreational activity. For the benefit of all campers, it is important that children behave appropriately within the day camp. If it becomes necessary to take disciplinary action against a student the steps that will be followed are outlined below:

**1st Incident:** The camper will receive a verbal warning and an explanation as to why the behavior is inappropriate (whenever possible, this will be done in a one-on-one setting removed from other campers).

**2nd Incident:** Staff will determine an appropriate consequence for the camper's actions (examples may include a "time out" or exclusion from participation in an activity). The camper's parent's will be notified of their child's behavior when they arrive for pick up.

**3rd Incident:** Child will be removed from camp without a tuition refund

#### **Immunization Records:**

We need a copy of your child's immunization records on file or a signed statement that your child is not immunized because of the child or family's moral or religious rights prior to admission into our program.

**Authorization of Treatment:** I hereby give my permission to the medical personnel selected by the Camp Director to order treatment and necessary transportation of my child. In the event that I cannot be reached in an emergency, I hereby give my permission to the physician to secure and administer treatment for my child.

Initials

**Photo Release:** The Montpelier Recreation Department is committed to the safety and privacy of you and your children. Some of our programs and/or special events may be photographed or videotaped. Please indicate your preference for display in our brochures or local newspapers.

- Yes, permission granted
- No, don't display pictures

**Liability Waiver:**

I assume all risks and hazards incidental to such participant, including transportation to and from Day Camp, and I hereby waive, release, absolve, indemnify, and agree to hold harmless the City of Montpelier, the Montpelier Recreation Department and the Montpelier Public School System, their officials, employees, and volunteers, the organizers, sponsors, supervisors, and participants for any claim arising out of an injury to my child or myself.

Parent/Guardian Signature

Date

**Medication Permission Form**

I \_\_\_\_\_, give my permission to the Capital Kids Day Camp staff to provide my  
Child \_\_\_\_\_, with the following medication in process stated below.

Medication 1

Type of Medication: \_\_\_\_\_

Amount: \_\_\_\_\_

Date(s)/Time(s): \_\_\_\_\_

Medication 2

Type of Medication: \_\_\_\_\_

Amount: \_\_\_\_\_

Date(s)/Time(s): \_\_\_\_\_

Medication 3

Type of Medication: \_\_\_\_\_

Amount: \_\_\_\_\_

Date(s)/Time(s): \_\_\_\_\_

Signature \_\_\_\_\_

# Montpelier Recreation Department's Special Event for Day Camp

What: Trip to Echo Aquarium.

When: Thursday, February 27th, 2020

Details:

Camp will depart from Main Street Middle School 9:15am

Bus will arrive at the ECHO around 10:00 a.m.

Bus will depart the ECHO around 2:15 p.m.

Campers will arrive back at Main Street Middle School around 3:00 p.m.

If there are any further questions or concerns, please do not hesitate to contact the Recreation Department at 225-8699 or talk with the Day Camp Director.

Thanks

Eric White

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Tear along line and return to Camp Director as soon as possible.

I (we) grant permission for \_\_\_\_\_ to go to the Echo Aquarium Thursday, February 27th, 2020, from 9:15a.m. - 3:00 p.m.

NO: \_\_\_\_ My child will not attend Day Camp on Thursday February 27th.

Are there any problems we should know about? \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_