# Registration Information

Welcome to Raleigh Parks, Recreation and Cultural Resources Department's 2015 summer camps. All camp offerings are included in this booklet to assist in summer planning. Raleigh Parks, Recreation and Cultural Resources strives to offer diverse, goal-oriented, affordable, and enjoyable opportunities for youth of all ages and abilities. Age eligibility for each camp is determined by age as of August 31, 2015. Please consult each individual camp's description for additional age requirements or limitation information. Please call the camp supervisor for age and program-related questions.

#### **Registration Information**

This booklet contains all of the information and materials needed for registration. Please read the following instructions thoroughly before completing the registration form.

- For additional camp information, please call the phone number associated with the camp description in this booklet or use the Summer Camp Location page to find phone numbers.
- 2. For payment questions, please call 919-996-4800 or email Camp.Registration@raleighnc.gov

Incomplete registrations WILL NOT be processed. We will attempt to contact you by phone and/or email to obtain all the missing information and/or payment. Your registration request will remain pending until all required information is received. For your convenience, the Raleigh Parks, Recreation and Cultural Resources Department will accept completed registration materials by mail-in, drop-off, online, or walk-in registration. Please do not mail or drop off cash.

#### Mail-In and Drop-Off Registrations

Recreation Business Office Attn: Summer Camp Registration 105 Pullen Road • Raleigh, NC 27607

Registration forms may be mailed in and dropped off at any time. Processing will begin February 2, 2015. In order for your registration request to be processed, you must include required payment with signed and completed registration forms. Note: Families may choose a payment plan option for family registrations of \$400 or more. PLEASE SEAL DOCUMENTS IN AN ENVELOPE marked Summer Camp Registration. Please place completed registration forms for silbings in the same envelope. Each day, fully completed registrations will be processed randomly. You may drop your envelope at any staffed Parks, Recreation and Cultural Resources facility. No confirmation of registration will be given at the time of drop-off. Confirmations will be mailed after February 27, 2015.

#### Online and Walk-In Registration

Online and walk-in registration will begin March 24, 2015. Online registration will be available at RecLink.Raleighnc.gov. Full payment is required with all online registrations. Completion of the Participant Information form is required on the day of registration. Your registration is not complete until the form is completed and submitted.

All walk-in registrations will be processed at the Recreation Business Office in the Pullen Arts Center at 105 Pullen Road, Raleigh, NC 27607. Full payment is required. Note: Families may choose a payment plan option for family registrations of \$400 or more. Camp choices may be limited.

#### Getting started with online registration

To register online, you must set up a family account in advance:

- 1. Go to reclink.raleighnc.gov.
- In the Getting Started section, request a family account (allow 1-2 business days) or retrieve your Login ID and Family PIN.
- 3. Submit payment information (American Express, MasterCard or Visa).

 Submit a Participant Information form. (A link to the form is available at recklink.raleighnc.gov.) For help, call RecLink Support at 919-996-2153.

#### Parent/Guardian's Role in Camp Registration:

- · Read and follow all registration instructions.
- Complete all registration forms and enclose required payment.
- Submit forms and payment by mail-in, drop-off, online or walk-in.
- Allow time for confirmations to be mailed.
   We will start mailing registration confirmations
   February 27, 2015.
- Understand that payment is due for all registrations regardless of participation.

Withdrawal requests must be received in writing 14 days prior to the start of the program.

Check the status of your registration at any time by going to Reclink.raleighnc.gov and clicking on My Account.

**Registration Status** 

#### **Registration Process**

- Complete and submit the following forms: Camp Payment
  Options, Camp Registration, Participant Information, and Assisted
  Administration of Medication (if needed). Each participant must
  have his or her own set of forms. Please make copies as needed
  for additional children.
- All forms must be received at the Recreation Business Office prior to the start of each camp session.
- Health Information Section The Adventure Program and Specialized Recreation Services will require an additional health form signed by a physician. The Adventure Program form will be mailed to participants after registration. The Specialized Recreation Services physician signature block is located on page 28.
- Any participant requiring medication to be administered at camp must fill out a Permission Form for Assisted Administration of Medication on page 28.

#### **Payment Instructions**

Pay for your 1st choice selections only and any additional fees below the subtotal line. Payment options include check or money order (payable to City of Raleigh), American Express, Visa or MasterCard. All registrations less than \$400 per family or submitted after May 15, 2015, must be paid in full. Any special requests must be submitted in writing and may delay processing of your registration. Please do not mail or drop off cash.

#### 2015 Camp Policies

Please read all registration information thoroughly. The Participant Information Form on page 23 must be completed, signed and dated before your child can participate in a Raleigh Parks, Recreation and Cultural Resources Summer Camp.

# Participant Information (One form per participant - Copy as needed)

Last Name	First Name	Pro	eferred	Name	е		Gende	r
Address	City	State	Zip		*	'Hom	ne Phone	
Date of Birth	Age (As	of Aug 31, 2015 this ag	ge must r	match :	the re	quire	ments in the camp de	escription)
School	Participant T-Shirt Size (C	Circle Size) YS YM Y	L YXL	AS	АМ	AL	<b>AXL</b> (for applicable	camps only)
PARENT/GUARDIAN INFORM	ATION * required field							
Mother/Guardian Last Name	First Name		,	*Email	l			
Address	City	Sto	ate				Zip	
*Home #	Work #	*M	obile#					
Father/Guardian Last Name	First Name		4	*Email				
Address	City	Sto	ate				Zip	
*Home #	Work #	*M	obile#					
EMERGENCY CONTACT AND	RELEASE AUTHORIZATION							
Please list in order the names of inc allowed to pick up the participant	•							
1) Name		Re	lationsh	ip to a	child			
Address	City	State					Zip	
Home #	Work #	Mobile	e#					
Please check the box if you authorize	e staff to disclose information about th	ne participant's behavi	or and o	ther ac	ctivitie	s at c	camp.	
2) Name		Re	lationsh	ip to a	child			
Address	City	State					Zip	
Home #	Work #	Mobile	e #					
Please check the box if you authorize	e staff to disclose information about th	ne participant's behavi	or and o	ther ac	ctivitie	s at c	camp.	
3) Name		Re	lationsh	ip to a	child			
Address	City	State					Zip	
Home #	Work #	Mobile	e #					
Please check the box if you authoriz	e staff to disclose information about th	ne participant's behavi	or and o	ther a	ctivitie	s at c	camp.	
4) Name		Re	lationsh	ip to a	child			
Address	City	State					Zip	
Home #	Work #	Mobile	e #					
Please check the box if you authoriz	e staff to disclose information about th	ne participant's behavi	or and o	ther ac	ctivitie	s at c	camp.	
Medical insurance is required for a l confirm that the participant has r By signing below, I acknowledge the	medical insurance. yes	mer camp. Third par no	rty opp	ortunit	ties m	nay k	be available upon	request.
<ul> <li>The City of Raleigh pro- coverage for participa</li> </ul>	nts;	<ul> <li>In the event of a me be made to contact City of Raleigh staff</li> </ul>	t parent	(s)/gua	ardian(	(s). I c	authorize the	
, ,	ecreation and Cultural Resources	parent/guardian ca  I have selected an a	nnot be appropri	reache ate pro	ed; ogram	for th	ne interests	
<ul> <li>I understand I am waiv to camp policies.)</li> </ul>	ing my legal rights. (Please refer	and abilities of the p have provided on th and accurate.						
<b>Signature is required to complete t</b> guardian whose signature appears on person(s) listed. Any person listed as a p	this registration form to make changes	to the form and staff v	vill only re	elease	inform	natior	n about the participa	nt to those
Parent/Guardian Name	Signature					[	Date	
Parent/Guardian Name	Signature						Date	

# Participant Information (One form per camper - Copy as needed)

#### Participant's Name (please print)

The City of Raleigh Parks, Recreation and Cultural Resources Department welcomes the participation of all individuals, including those with disabilities or special needs. We are committed to compliance with the ADA and will provide reasonable accommodations to facilitate participation in our programs. To ensure that reasonable accommodations are in place, program registration or accommodation request should be received at least two weeks prior to the start date of the program. For more information please contact Inclusion Services at 919-996-2147.

The City of Raleigh recommends that parents or guardians consult their participant's pediatrician or health care professional to assess their participant's ability to participate in the program. It is requested that parents or guardians provide in writing any additional instructions for the specific condition or special need of their participant.

#### **HEALTH INFORMATION**

yes $\square$ no $\square$	Autism Spectrum Disorder (Asperger's, Autism, HFA, PDD)	yes $\square$ no $\square$ ADHD / ADD (please circle one)
yes $\square$ no $\square$	Diabetes	yes 🗆 no 🗆 Allergies:
yes $\square$ no $\square$	Down Syndrome	yes □ no □ Asthma
yes $\square$ no $\square$	Emotional / Behavioral Disorder (not related to ADHD/ADD)	yes 🗆 no 🗆 Dietary Restrictions:
yes □ no □	Epilepsy / Seizures Disorder	yes $\square$ no $\square$ Hearing or Visual Impairment: (glasses, hearing aids, etc.
yes $\square$ no $\square$	Intellectual Disability / Developmental Delay	
yes $\square$ no $\square$	Motor Impairment (Cerebral Palsy, Partial Paralysis, etc)	If participant has any allergy that could result in anaphylaxis (example tree nut or bee allergy) please note that we strongly encourage providing your participant with an Epi-Pen to keep at the program site
yes $\square$ no $\square$	Sensory Integration/Processing Disabilities	☐ Please check here to verify that you will not be providing your participant with
yes 🗆 no 🗆	Other Condition:	an Epi-Pen for the allergy listed above, that you understand the risks of not doin so, and that you release the City of Raleigh from any and all liability regarding treatment of your child in the event of a life-threatening allergic reaction. In the event of a life-threatening allergic reaction, program staff will immediately call 911. We do not have Epi-Pens on site available for use.

#### PLEASE COMPLETE IF REGISTERING FOR SPECIALIZED RECREATION CAMPS (CAMP FRIENDLY or CAMP EXPLORATION)

Height	Weight	Pulse	Blood Pressure	Date of Exam
Physician Name			Ph	none
Address				
Physician Signatu	re			

#### MEDICATION INFORMATION

Only medications that are medically necessary and cannot be scheduled outside the hours of the recreation program will be given during the program. No program participant should be in possession of non-prescription or prescription medication of ANY kind without the knowledge of the program staff. Any participant who must receive medication during the program must have on file the appropriate signed medication form:

- A. <u>Assisted Administration of Medication</u>: Parks, Recreation, and Cultural Resources staff maintain, provide and monitor consumption of both prescription and non-prescription medication.
- B. <u>Self-Administration of Medication</u> (for use in Teen, Adventure and SRS Adult Programs ONLY): Participant may maintain and consume non-prescription medication, inhalers and/or EPI pen as needed with review from staff.

The Assisted Administration of Medication form is included within the Camp Brochure on page 28. Both forms may also be obtained by contacting the specific camp location or by calling the Recreation Business Office at 919-996-4800. Medication forms should be submitted PRIOR to the participant attending camp.

Please list any medication the participant will be taking during the day at camp and additional information you would like to share:

\*Please be aware all camps are not offered every week.

#### Please make a copy for your records

Indicate a 1st and 2nd choice for each session. Fill in fees for your 1st choice. If your first choice is full, the second choice will be applied.

Weeks	1st Choice			2nd Choice			Fee
of Camp	Bar Code	Camp	Location	Bar Code	Camp	Location	ree
Jun 8-12							
Jun 15-19							
Jun 22-26							
un 29-Jul 2		Pro-Rate	d Cost – No c	amp on July (	3, prorated fe	es apply	
Jul 6-10							
Jul 13-17							
Jul 20-24							
Jul 27-31							
Aug 3-7							
Aug 10-14				No Ranoca			
Aug 17-21		(No S	ummer X-Pres:	s, Teen Extrem	e, Ranoca Co	amps)	
						Subtotal	
	* Donations o	are due at the time o	upport a child's partic of registration and ca	nnot be added to a p	pay plan. (Please sp	ecify amount here.)	
•	Add Non-Resident Fe	ee: \$15 per session -	# of sessions x \$15 (N	ot applicable for Spe		Services programs)	

#### **Refund Policy**

- All refund requests must be received in writing at least 14 days in advance of the start date of a program. Requests may be emailed to Camp.registration@Raleighnc.gov or mailed to the Recreation Business Office, 105 Pullen Road Raleigh, NC 27607.
- 100% refund/credit/transfer if Department cancels program.
- 100% credit or transfer of fees to another program at time of withdrawal OR 85% refund based on total cost of program.
- Refund/credit/transfer request received less than 14 days prior to start date of a program will not be granted.
- Refunds for medical reasons requested prior to start date of program will be granted at 100%, subject to verification.
- A credit may be used by any family member on the same registration account.
- Non-attendance/Non-participation in a program or activity does not entitle a patron to a refund.

# 2015 Summer Camp Payment Options

Main Contact Name		Participant Name	
	Please cor	mplete Option A or B in its entirety.	
	registrations less than \$40 ation, your forms will not b	00 OR registrations received after May 15, 2015. De processed and we will attempt to contact yo	
Check or Money Order att	tached (payable to City of I	Raleigh) O American Express O MasterCard O Visc	ב
Name of Card Holder			
Billing Address			
City/Zip			
Card Number		Expiration Date	
Amount Authorized \$		Signature	
	payment amount, take		
	February 2-15	Divide the cost into 5 equal monthly payments	
	February 16-March 15	Divide into 4 equal monthly payments	
	March 16-April 15	Divide the cost into 3 equal monthly payments	
	April 16-May 15	Divide cost into 2 equal monthly payments	
your payment plan priviled  My first payment is by:  Che  Name of Card Holder  Billing Address	fter May 15, 2015, must be p your payments, Raleigh Park ges.	vaid in full.  As, Recreation and Cultural Resources reserves the right  ad (payable to City of Raleigh)   American Express	
City/Zip			
Card Number		Expiration Date	
Authorize monthly payment of	as stated on payment plan	Signature	

# 2015 Summer Camp Payment Options (Continued)

If you want your remaining payments charged by our office to the same credit card, authorize by signing below.

Authorized Signature Date

If we are unable to process your payment we will contact you. Resolution on declined payments must be completed within 3 business days to avoid restrictions on your account and/or to continue participation in our programs.

Sign below if you choose to pay the remaining payments by check or money order.

Signature	Date

Parent/Guardian Signature

#### FINANCIAL ASSISTANCE

Parks, Recreation and Cultural Resources recognizes that some participants may need financial assistance and/or a payment schedule to have the opportunity to participate in our programs. Financial assistance is available only for Traditional and Specialized Recreation camps. Because funds are limited, requests need to be made by June 1, 2015, or as long as funds are available. For more information about eligibility requirements and additional forms required with registration, please call 919-996-4800.

### Permission Form for Assisted Administration of Medication

#### Parks, Recreation, and Cultural Resources employees administer medication to participants only if:

- The City of Raleigh permission form for Assisted Administration of Medication is completed and in the possession of the Parks, Recreation and Cultural Resources staff.
- 2. A Parks, Recreation and Cultural Resources employee will not give medication unless it is in an original container with appropriate medicine contained within, with a visible label including the name of medication, the date of expiration, clear dosage amount and directions with the participant's name CLEARLY INDICATED on the bottle/box.

#### The Parent/Guardian is responsible for the following with ALL medication:

- 1. Complete and sign the portion of the form below and return to the program staff.
- 2. Provide medication in an original container with visible label including the name of medication, the date of expiration, clear dosage amount and administration directions with the participant's name CLEARLY INDICATED. Note: Inhalers outside the original package must be accompanied by a copy of the original package label noting the above information.
- 3. Provide new, labeled containers if/when medication changes are made.
- 4. Parents/guardians must transport medication to program site and give directly to program staff.
- 5. Parent/guardian must pick up medication at the end of each week/program from program staff. Medications not picked up at the end of 14 business days following the last day of participation in the program will be disposed of by program staff.
- 6. Recreation program employees will dispose of empty containers unless otherwise instructed.
- 7. For prescription medications: The pharmacy label will serve as the physician's authorization for the medication to be administered. Have the pharmacist label two containers: one for home use and one for use in the program if the participant is to receive medication at both sites.
- 8. If the medication is an EPI pen or inhaler, it is recommended (not required) that the pharmacist label two containers to keep at the program site. The parent/guardian should check to ensure the medication does not exceed the printed expiration date. Program staff will not accept expired medication.
- 9. Non-prescription medications: The medication must be administered according to the dosage and administration instructions on the original container.
  - \*\*A physician's signature will be required as authorization IF medication is requested to be given in an alternate dosage, etc.
- 10. Parents/guardians should notify program staff as soon as possible if there are any changes to instructions for the administration of medication once this form has been submitted. A new form may be required.

By completing the information below, y medication(s) provided as indicated as	rou authorize the Parks, Recreation and Cultural l pove.	Resources staff to c	idminister any
Participants's Name			
1) Name of medication:		Prescription 🗌	Non-prescription
Dosage:	Times:		
Reason for Medication:	Side effects:		
2) Name of medication:		Prescription 🗌	Non-prescription
Dosage:	Times:		
Reason for Medication:	Side effects:		
Parent/Guardian Signature			
Parent/Guardian Name	Parent/Guardian Signature		Date
**ONLY under special circumstances fo	or Non-Prescription medications (see #9 above).		
   Physician Name	Physician Signature		Date



#### Age Verification

The City of Raleigh Parks, Recreation and Cultural Resources Department strives to provide age-appropriate curriculum and programming for all recreation services delivered. To meet this goal, the age of the participant as of the cut-off date for the program is required at the time of registration to appropriately place the participant in our programs. The Parks, Recreation and Cultural Resources Department reserves the right to request that the parent/guardian provide a legal document (i.e. birth certificate) verifying the age of the participant as of August 31. Specific camps may have additional requirements or limitations that can be found in the camp's description. If legal documentation is requested and not provided within 24 hours, the program supervisor may offer the parent/guardian a transfer to an age-appropriate program if available or dismiss the participant from the program. The parent/guardian will be responsible for any difference in fee if a transfer occurs. No refund will be given if the participant is dismissed from the program.

#### **Babysitting**

Any babysitting arrangements with present or former staff of the Parks, Recreation and Cultural Resources Department are separate and independent from any Departmental program. These arrangements must be based on the independent responsibility and judgment of the parent or guardian. The City of Raleigh Parks, Recreation and Cultural Resources Department is not responsible for any claims or liability in connection with such babysitting activities.

#### **Behavior Management**

We utilize and encourage the practice of praise and positive reinforcement as effective methods of behavior management. We believe that when participants receive positive and understanding interactions, they can develop good self-concept, problem-solving abilities, and self-discipline. The City of Raleigh Parks, Recreation, and Cultural Resources Department supports and practices the following procedures for behavior problems:

- 1. Initially, participants will be given a quiet reprimand/ verbal warning.
- If behavior persists after verbal warning, a Behavior Action Plan will be implemented to identify specific behaviors and work with the participant and parent/guardian to develop appropriate behavior management solutions.
- If behavior problems continue after implementation of the Behavior Action Plan, a first Incident Report will be presented to the parent/guardian.

- 4. Additional behavior problems will constitute a second Incident Report presented to the parent/guardian and a possible suspension of two full days from the program may occur. (No refunds will be given for the days suspended.) The parent/guardian may be requested to pick up the participant within an hour of the initial contact to the parent/guardian. If a parent/guardian does not pick up the participant within an hour, a late fee may be charged.
- 5. If a behavior problem persists, a third Incident Report will be presented and the participant may be asked to leave the program. A suspension of two full days will be issued to the participant while the Incident Reports are being reviewed.
- 6. For severe offenses, such as but not limited to fighting/ hitting, theft, vandalism, bullying, possession of weapons or drugs, severe verbal threats, sexual misconduct, or any other safety related behavior, the participant may be suspended or dismissed from the program immediately. Any of the above mentioned behaviors may result in immediate suspension or expulsion from program.
- 7. Participants will not be disciplined in camp for behavior that occurred outside of camp hours, even at parental requests.
- 8. Participation in camp activities during program hours is required.

#### Confidentiality

Parks, Recreation and Cultural Resources Department staff will not discuss confidential matters or personal information with anyone outside of the Department or with unauthorized individuals.

All participants are encouraged to respect the confidentiality of other participants by not disclosing personal information with social media such as Facebook, Twitter, etc. Departmental staff are not permitted to share personal information about or images of any participants or staff through social media such as Facebook, Twitter, Instagram or Snapchat, or discuss any personal information about participants outside of the workplace.

#### **Dress Code**

Participants should wear cool, comfortable clothing and athletic shoes in order to participate in recreational or athletic activities each day. If appropriate attire is not worn, therefore preventing participation, the parent/guardian may be asked to bring appropriate clothing or will be required to pick up the participant. Certain camps may have additional clothing requirements.

Unacceptable affire: sandals or flip-flops; shirts with spaghetti straps; clothing that displays drugs, alcohol, tobacco, sexual or gang references; two-piece bathing suits; excessively loose pants or shirts; revealing clothing; jewelry; crocs<sup>™</sup>. Certain camps may allow exceptions to this list.

## 2015 Camp Policies

#### **Electronic Devices/Items From Home**

No electronic devices are allowed (examples: mobile phones, MP3 players, gaming devices, etc.) unless accommodations have been made for the participant through an Inclusion Plan. Staff reserves the right to confiscate electronic devices if issues arise.

Participants may have the opportunity to bring in items (toys, books, etc.) from home with program staff permission. If you choose to allow your participant to bring in items from home, the City of Raleigh Parks, Recreation and Cultural Resources Department does not assume any responsibility for lost or broken items. Departmental staff reserves the right to confiscate any item that is not appropriate or may be used in an inappropriate manner while in our program. Items that are not appropriate include, but are not limited to:

- Any type of weapon, including toy guns, knives and swords, and anything the participant can use to approximate a weapon.
- Any item that can be used to harass or intimidate another participant.
- Any item that causes disruption to scheduled activities Confiscated items will be returned to the parent/guardian at the end of the day.

#### Field Trips

Raleigh Parks, Recreation and Cultural Resources will transport participants offsite in vehicles provided by or contracted by the City of Raleigh. If a program participant arrives at camp after the scheduled departure for a field trip, it is the responsibility of the parent/guardian to either:

- Transport the participant to the field trip location and sign in the participant with a City of Raleigh camp staff member at the field trip site, or;
- Transport the participant to the camp site once the camp returns from the field trip location and sign in.

Buses will leave the program location at the advertised scheduled time and will not be delayed to wait for participants to arrive at the program site. Participants cannot be left at a camp location without camp staff present. Refunds will not be awarded if participant misses a field trip. The City of Raleigh Parks, Recreation and Cultural Resources Department does not accept responsibility for program participant until they are signed in with program staff.

If a parent/guardian needs to pick up a participant while on a field trip, it is the responsibility of the parent/guardian to pick up the participant at the field trip location. Confirmation of the early release is required prior to participant being released.

#### Food

Any food brought into any program to be served to program participants must be store-bought with labeled ingredient information. Due to allergy concerns, homemade food items will not be accepted into our programs.

#### Illness/Injury

Any participant should remain home from all summer camps if they have had any of the following in the past twenty-four (24) hours:

- Contagious conditions (i.e. fever 100 degrees or higher without fever-reducing medication, diarrhea, vomiting, sore throat, undiagnosed rash, chicken pox, pink eye, ringworm, head lice, or any other potentially contagious condition.)
- Physical injury that does not allow the participant to safely participate in the camp program.

If a participant demonstrates any of the above while at camp, the parent/guardian will have one hour to pick up the participant from the camp location. If the participant becomes sick while at camp, he/she will be separated from the other participants while the parent/guardian is called to come and pick them up. After 24 hours, if the participant is symptom free or written documentation has been received from a doctor stating the participant is not contagious or can safely participate, they may return to camp. If you suspect that your participant has a contagious condition that may be spread to others, please notify your camp director as soon as possible. Please do not bring the participant back to camp until the camp director has been contacted.

The above criteria apply to all participants including those with Inclusion Plans or other accommodations.

#### **Inclusion Services**

The Raleigh Parks, Recreation, and Cultural Resources
Department welcomes the participation of all individuals in
our programs. We are fully committed to complying with the
Americans with Disabilities Act (ADA) and providing reasonable
accommodations to facilitate participation in our programs.

Inclusion Services supports access to typical programs by offering reasonable and appropriate resources to the participant. These may include but are not limited to: additional information from parent/guardian/service provider from interviews; supportive materials; program or site-specific training; and/or additional staff for the group. Participants who indicate a disability or accommodation request on their registration form may be contacted by Inclusion Services to determine if any of the above resources are necessary for participation. Any participant requiring a more intensive level of support may consider having

2015 Policies continued next page —

2015 Policies continued —

their own care provider attend the program as a personal assistant. (Assistants, volunteers, therapists, or other care providers are required to complete a background check and informational forms before attending the program.)

To ensure that adequate resources are in place, registration should be received at least two weeks prior to the start date of the program. Please contact Inclusion Services at 919-996-2147 for more information.

#### Late Pick-up

Participants who are picked up after the closing time of camp will be charged a late fee. The fee is as follows: Once the parent/guardian is up to ten minutes late, a \$5 fee will be charged per family. An additional \$1 per family will be added for every minute past ten minutes late. Payment is due at the time of late pick-up. Continual late pickups may lead to dismissal from the program.

#### Lost/Stolen Items

The City of Raleigh Parks, Recreation and Cultural Resources Department is not responsible for any personal items lost or stolen at our programs.

#### Movies

Movies may be shown to participants in Raleigh Parks, Recreation and Cultural Resources Programs. Before movies are shown, the titles will be communicated to parent/guardians. All movies shown are rated G or PG.

#### Non-Discrimination

The City of Raleigh Parks, Recreation and Cultural Resources Department does not discriminate on the basis of race, color, national origin, sex, religion, age, sexual orientation or disability in employment opportunities or the provision of services, programs or activities. A participant alleging discrimination on the basis of any of the aforementioned areas may file a complaint with the director of the Raleigh Parks, Recreation and Cultural Resources Department or the Office of Equal Opportunity, U.S. Department of the Interior, Washington, D.C. 20240.

#### Participant Sign Out

The Security Key Tag Identification Process is in place to properly identify individuals who have the parental/legal guardian permission to sign out a participant from any camp program. Legal guardians and other individuals listed on the Participant Registration Form as an authorized pick-up person

will be issued a security key tag. Key tags may be obtained from the site on the first day of the camp program. Tags will only be issued to the individual listed on the registration form with a photo ID. A parent/guardian will not be issued multiple key tags to be given to other individuals authorized to pick up the participant. A photo ID may be requested by program staff at any time to verify a person's identity even if the person has a security tag.

Any person listed as a parent/guardian on the registration form may add or remove additional person(s) to the authorized pick up list. Parents/guardians should inform anyone picking up a participant without a key tag that they will be required to show a photo identification card. Participants will not be released without proper photo identification.

#### **Payment**

Please see payment options on page 26-27. If the required payment is not provided with the completed registration forms, the participant registration will not be processed but we will attempt to contact you to obtain payment.

#### **Personal Care**

The City of Raleigh Parks, Recreation and Cultural Resources
Department does not provide personal care for program
participants. Department staff does not assist in the toileting
of any camp participants or help with dressing participants.
The Department requires that all program participants are potty
trained in order to participate. Program participants must be able
to change their own clothing if soiled. Raleigh Parks, Recreation
and Cultural Resources Department staff are not expected to
change program participant's clothing.

If a toileting accident does occur, a change of clothes must be brought to the program site or the participant must be picked up from the program site within one hour of the incident. If toileting accidents are routine, participants may be dismissed from the program.

#### Photography/Video Waiver

The City of Raleigh Parks, Recreation and Cultural Resources Department may capture pictures or video clips of program participants while involved in its programs. Should that occur, these items will be used by the Department for marketing and promotion, staff training, and program activities. Participants' names will not be published when photo or video clips are used. Some program areas are permitted to have social media sites. These sites are controlled by Department staff.

# 2015 Camp Policies

#### Release and Indemnity Agreement

I understand that participating in the recreational program selected involves risk of injury. These risks include inclement weather, accidents while traveling, equipment problems or failures, contact with and actions of other participants, slips/trips/falls, and musculoskeletal injuries, among others. I choose for myself or for my participant to participate in the selected programs despite the risks. By signing the Participant Information Form, I acknowledge all risks of injury, illness, and/or death and affirm that I have assumed all responsibility of injury, illness, and/or death in any way connected with participation in the program. I also agree for myself and for any participant to follow all rules and procedures of the program and to follow the reasonable instructions of the teachers and supervisors of the program.

In return for the opportunity to participate in this program, I agree for myself and for my heirs, assigns, executors, and administrators to release, waive, and discharge any legal rights I may have to seek payment or relief of any kind from the City, its employees or its agents for injury, illness, and/or death resulting from this program. If I am registering a participant for a program, I agree that I am a parent or, legal guardian, or am otherwise responsible for the participant whose application I am submitting and that I release, waive, and discharge any legal rights that I may assert on behalf of the participant's participation in the program. I also agree not to sue the City, its employees, or its agents and agree to indemnify the City for all claims, damages, losses, or expenses, including attorney's fees, if a suit is filed concerning an injury, illness, or death to me or to my participant resulting from participation in the program.

#### Refunds

All refund requests received in writing 14 days or more in advance of the start date of the program/rental/team placement are entitled to:

 100% refund/credit/transfer if the department cancels program or facility rental, 100% credit or transfer of fees to another program at time of withdrawal or, 85% refund based on total cost of program, 85% credit/transfer/refund of eligible rental fees

Refund/credit/transfer requests received less than 14 days prior to the start date of a program/rental/team placement will not be granted.

- Refunds for medical reasons requested prior to the start date of a program/rental/team placement will be granted at 100%, subject to verification.
- Outdoor facility usage cancelled due to inclement weather may be rescheduled pending space availability.

- A credit may be used by any family member on the same registration account.
- Non-attendance/non-participation in a program does not entitle a patron to a refund.

#### Sunscreen and Insect Repellent

If needed, please apply these products to participants before they come to the program each day. Please supply any sunscreen and/or insect repellent that the participant may need during any program. Staff will provide frequent opportunities for participants to reapply over the course of the day. Staff or siblings may assist participants in applying sunscreen only to exposed skin that the participant cannot reach on their own. Spray or mist sunscreen and/or insect repellent are recommended. These products are not to be shared with other campers. Participants in Specialized Recreation Services camps may be assisted to apply sunscreen and/or insect repellent as provided and directed by the parent/guardian.

#### Swimming Information (for applicable camps)

Raleigh Parks, Recreation and Cultural Resources staff will conduct swim tests for all program participants and issue lifejackets to non-swimmers. To swim without a lifejacket, a swimmer must be able to swim one length of the pool (approximately 25 yards or 75 feet) on their front and tread water for 30 seconds. All non-swimmers will be required to wear lifejackets. Parent/guardian can request that staff not allow the participant to participate in the swim test and automatically place the participant in a lifejacket. Staff reserves the right to place a participant in a lifejacket in the interest of a participant's safety. All participants, regardless of swimming ability, will wear lifejackets when participating in water activities including swimming in lakes, rivers, or the ocean.

#### **Waitlists Notification**

If your participant clears the waitlist, you will be notified by telephone or email. You will have 24 hours to accept and remit payment for the requested program. Your acceptance must be confirmed in writing, and if notification is not received within 24 hours, you will forfeit your participant's placement.

#### Withdrawal and Transfers

All withdrawals and transfers must be received in writing 14 days or more in advance of the start date of the program. Non-attendance or non-participation in a program does not entitle a patron to a credit of the registration fee.