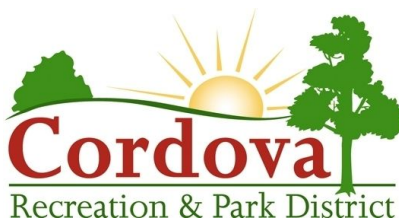




# CAMP CORDOVA

## WINTER BREAK DAY CAMP

### K-8<sup>TH</sup> GRADE



Hagan Community Center  
2197 Chase Drive  
Rancho Cordova, CA 95670  
Program Coordinator, Shelly Romer  
[sromer@crpd.com](mailto:sromer@crpd.com)  
(916) 369-9844

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## Camp Cordova Winter Break Camp Info

Thank you for enrolling your child in Camp Cordova Winter Break Day Camp program. The Cordova Recreation and Park District strives to serve and meet the needs of its community by providing an affordable option for supervised care for children, opportunities for children to build social skills, make new friends, gain a love for physical activity and the outdoors and create positive lasting memories. Camp Cordova Winter Break Day Camp maintains a high level of quality programming through careful planning, qualified staff and safety training.

Please familiarize yourself with this packet and return the **TWO** registration **FORMS** to the Hagan Community Center office at 2197 Chase Drive, Rancho Cordova, CA 95670, attn: Shelly Romer. You can also turn the forms into the Camp Cordova staff on site the morning you arrive for camp. Every child **MUST** have these forms on file on their first day of camp in order to be left under the supervision of the Camp Cordova Winter Break Day Camp staff.

- Camper Information Form
- Camp Waiver

After reviewing the registration packet, additional questions, comments or concerns can be addressed by contacting the Program Coordinator, Shelly Romer at [sromer@crpd.com](mailto:sromer@crpd.com).

## General Program Information

At the Camp Cordova Winter Break Day Camp children participate in a variety of activities including sports, arts & crafts, science activities, cooking projects, indoor and outdoor games. Children are supervised at all times by camp staff while in their age groups\* or camp wide. Campers are required to bring their own lunch, snack, and water bottle each day.

\*Siblings are not placed in the same group unless they are the same age. Exceptions will be made at the discretion of the Program Coordinator for children who are having difficulty adjusting to the camp program.

## Registration Information

- You may register for a single day, however we will not hold spaces without payment and may decline registration for safety reasons if the staff/camper ratio has reached its maximum.
- Children must be registered with **all paperwork completed before the child is left in our care**. Please allow yourself extra time to complete the Camper Info Form and Camp Waiver on-site if you have not returned it prior to the first day of camp.
- This is a recreation program run by the Cordova Recreation & Park District. Our staff is trained exclusively for day camp programs. We are not a licensed child care facility or a daycare program.
- **Photos may be taken** of the program for publication in our activity guide, Facebook page, website and other promotional use. Please note on your child's information form if you object to your child's photo being used.

## Refund Policy

We will issue refunds under the following circumstances:

- *Cancellation prior to the start of the session:* If you cancel prior to the start of the session, you will receive a full refund. If you cancel after the first day of the session, you will receive a prorated refund.
- *Serious illness/hospitalization of camper or death in the family:* provided CRPD is notified within two days of the absence.
- *Dissatisfaction with the program for first-time campers:* We are proud of our program and believe it to be of high quality. However, we know not all programs are right for every child. If you have any questions or concerns, please contact the Recreation Supervisor immediately at (916) 369-9844. We can address any issues and will discuss further if the program is ultimately the right fit for your child.

**PLEASE NOTE: Refunds will NOT be given for missed days or for suspension.**

## Medications

Children who take medication during camp hours should bring it in their lunch container. The lunch container should be labeled with the child's name and the medication **MUST BE LABELED** with the child's name and content. Children can be reminded to take medication, but they are responsible for doing so. Children with life threatening conditions such as asthma, food allergies, or bee sting allergies should keep their medication with them. The medication portion of the Camper Information Form must be completed for children taking or carrying medication at camp. **Camp staff cannot administer or hold onto medication, unless arrangements are made prior to camp.**

\*We will make every reasonable effort to comply with the *Americans with Disabilities Act*. If your child requires special accommodations, please call us in advance at (916) 369-9844.

## Camp Rules:

- Follow directions; listen to, respect and cooperate with others.
- Respect the park, facilities and animals.
- Get permission before leaving your activity area. Always use the "Buddy System".
- You must wear shoes at all times at camp.
- Do not bring cell phones, toys or valuables from home.

## Behavioral Policies

Inappropriate behavior will be addressed promptly. The situation will be discussed by the staff and the participant(s) involved and the parent(s) of the child(ren) may be contacted immediately.

The following format is used:

- 1st offense     Warning
- 2nd offense     Removal from the activity (temporarily)
- 3rd offense     Removal from activity; child speaks to Program Coordinator, parent may be contacted.

Possible consequences include sitting out from a group activity, loss of special activities or having to write a letter home. Should you receive one of these letters, please discuss the incident with your child, sign the letter (so we know you received it) and return it to camp the next day.

If the behavior is such that the child is a danger to himself or others, or is interfering with the program, you will be asked to pick up your child from camp immediately. Refunds will not be issued for children missing camp due to behavioral incidents.

Physical aggression or violence is addressed as follows:

If the offense is severe enough the child will be removed from the program with no refund.

- 1st offense     Removal from activity, speak to Program Coordinator, parents will be called. If the child is uncooperative, violent or disrespectful of staff the child will be sent home.
- 2nd offense     May also be suspended additional full days of camp, speak with the Recreation Supervisor.
- 3rd offense     Permanent removal from program.

The actions taken by staff will be governed by the age of the child and the behavior. If the staff feels the child is a danger to him/herself or others, he or she will be immediately suspended from the program. Our program is recreational in nature; staff are not trained in psychological or behavioral disorders. Staff will attempt to work with the child and parents within reason, however the safety of the other children and our staff is paramount. No child will be allowed to participate if he or she threatens the safety of others.

## **The Staff**

### Recreation Supervisor

The Recreation Supervisor is responsible for creating, and/or implementing the program, the policies and the procedures necessary to ensure the safety of staff and participants in addition to providing quality community enrichment. The Recreation Supervisor deals with administration and registration of the program along with customer service and satisfaction. The supervisor also organizes and conducts the hiring and training process for staff.

Brandi Dionne (916) 369-9844 or [bdionne@crpd.com](mailto:bdionne@crpd.com)

### Program Coordinator

Under the direction of the Recreation Supervisor, the Program Coordinator is responsible for the daily operations of the program, safety and supervision of all staff and participants, proper opening/closing of facilities and maintaining a supply inventory, forms and records, as needed. This position will assist in creating or improving on camp themes, curriculum, policies, procedures and scheduling. The Program Coordinator will also address any customer service or staff related issues.

Shelly Romer (916) 369-9844 or [sromer@crpd.com](mailto:sromer@crpd.com)

### Recreation Leaders

The Recreation Leader is responsible for facilitating, initiating and leading children's games, sports, cooking projects and crafts. This position works directly with campers and is accountable for their safety and supervision throughout the day's activities. Recreation Leaders are expected to create and maintain a safe, enjoyable and fun atmosphere for campers, as well as, be a leader and a role model for appropriate social and physical behaviors.

We are very proud of the quality of staff we have assembled for this program. Our staff is hired and trained specifically for these leadership positions. To be considered for a Camp Recreation Leader position, an applicant must be a minimum of 16 years of age and have experience working with K-5<sup>th</sup> grade children. Candidates are screened through an interview process, a reference check and a Live Scan fingerprinting check for any criminal convictions. Our staff is certified in CPR and First Aid and undergo yearly training which includes Mandated Reporting, activity and games training, leadership, problem solving, handling behaviors and discipline. Many of our staff members are in college, training to work with children in full-time careers as teachers, psychologists or social workers. All have been selected for their enthusiasm, love of children, and the particular skills and strengths they bring to the program.

## **Things to Bring to Camp**

- Shoes - Children must arrive to camp with closed toed shoes to be able to run in and clothing that can get dirty.
- Backpack - Children will carry their belongings as they change activity locations. Please ensure that your child's bag is light enough for him or her to carry. Two shoulder strapped bags are suggested.
- Snack - Morning snack is at 10:00 a.m. and many children need an afternoon snack around 3:00 p.m. Snacks are separate from lunch and often times require an additional drink.
- Lunch - Each camper is responsible for providing their own lunch. Lunch time is "camp wide" at 12:30 p.m.  
An insulated lunch sack with an ice pack is suggested. Sharing or trading food is not allowed at Camp.
- Water - Refillable water containers are recommended. Water breaks are encouraged throughout the day to keep hydrated. Drinking fountains are available for refills.

## What NOT to bring to camp

- We are not responsible for lost, damaged or stolen belongings. Toys, valuables and electronics are not recommended for camp.
- **Cell phones are not allowed at camp.** If a cell phone is a necessity, phones must be left in backpacks during camp hours. Staff members have access to District phones if parental contact is mandatory. Continual program disruptions by cell phones will result in the phone being turned into the Program Coordinator for parent pick-up.

## Schedule

Session 1: December 26-28 (Wednesday – Friday)

\$30/day, \$75/ week

Session 2: January 2-4 (Wednesday- Friday)

\$30/day, \$75/ week

### Daily Schedule

TIME	ACTIVITY
7:30-9:00	ARRIVAL/QUIET ACTIVITIES
9:00-9:30	CIRCLE TIME
9:30-10:30	ART
10:30-11:00	SNACK
11:00-12:00	SPORTS
12:00-12:30	CRAFTS
12:30-1:00	LUNCH
1:00-1:30	PLAYGROUND
1:30-2:30	HYDE OUT
2:30-3:30	COOKING/SCIENCE
3:30-4:00	CAMP WIDE GAME
4:00-5:30	DEPARTURE/QUIET ACTIVITIES

**Drop Off Location: Building #1.** At the entrance of Hagan Community Park at 2197 Chase Drive, Rancho Cordova, park in the office parking lot. Building #1 is the first building that you encounter once you walk up the stairs. Please refer to the map included in this packet to help locate the drop off area. Please remember to check-in your child with a staff leader at the sign in table each morning.

**Pick Up Location: Building #1.** Pick up your child inside Building #1. To pick up your child, you must sign out with a staff leader. You might have to show identification if that staff leader does not recognize you. For others to be allowed to pick up your child they need to be listed on the Camper Information Form as an authorized adult, 18 years of age or older, and show proper identification. Our top priority is the safety of your child. Please be mindful of these requirements.

**Early pick-up:** Please contact us at (916) 369-9844. Children are involved in activities throughout the park and we may be able to save you time with advance notice by having the child wait for you in the office. Always be sure to check out with a staff leader before departure.

# Cordova Recreation and Park District • Camper Information Form

## Child's Information

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_  
Preferred name ("nick name"): \_\_\_\_\_ Gender: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Child lives with:  Both Parents  Mother  Father  Other: \_\_\_\_\_

### **CHECK HERE IF YOU OBJECT TO PHOTOS BEING TAKEN OF THIS CHILD**

## Parent/Guardian Information

Name: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

### **Permission to pick up your child** (must be 18yrs old; may request to show I.D.)

\*addition and changes can be made at any time, contact the site supervisor

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

- Is there anyone who is **NEVER** to pick up your child? \_\_\_\_\_
- Is there any other information we should know about your child? (Special concerns or fears) \_\_\_\_\_

## Medical Information

Any allergies (food, drugs, insects)?: \_\_\_\_\_  
Medical concerns or activity restrictions? \_\_\_\_\_  
Current medications and dosage \_\_\_\_\_

### Complete only if your child takes medication during Camp hours

The child named above will be taking medication while at camp. CRPD staff has my permission to counsel camp staff regarding the possible effects of the medication on my child. I will not hold Cordova Recreation and Park District or its employees responsible if my child refuses to take the medication.

A.) Medication name \_\_\_\_\_ Reason for medication \_\_\_\_\_  
Dosage \_\_\_\_\_ Time to be taken \_\_\_\_\_ If "as needed": how often may it be taken? \_\_\_\_\_  
Side effects \_\_\_\_\_ Signs of over dosage \_\_\_\_\_

B.) Medication name \_\_\_\_\_ Reason for medication \_\_\_\_\_  
Dosage \_\_\_\_\_ Time to be taken \_\_\_\_\_ If "as needed": how often may it be taken? \_\_\_\_\_  
Side effects \_\_\_\_\_ Signs of over dosage \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Parent's Name (print) \_\_\_\_\_

- How did you hear about our program? \_\_\_\_\_
- Is there someone we can thank for referring you? (Name) \_\_\_\_\_

*Please contact us if your child requires special accommodations to fully enjoy our Day Camp Program.*

## Cordova Recreation and Park District • Camp Program Waiver

**Class:** Winter Break Day Camp

**Location:** Hagan Community Center

**Days:** Wednesday - Friday

**Dates:** 12/26-12/28 \* 1/2- 1/4

**Times:** 7:30 a.m. - 5:30 p.m.

**Instructor:** Staff

The Cordova Recreation and Park District's Winter Day Camp takes place at the Hagan Community Center. Planned activities make extensive use of the Park's ball fields, courts, buildings, picnic areas, and open spaces. Wildlife does flourish in the vicinity of the park. Gophers, poisonous and non-poisonous snakes, and skunks have all been encountered by park users. Bee stings do occur, however infrequently.

Arts and Crafts activities involve paints, pastes, glues, paper, scissors, crayons, other basic materials, and items found by participants. Active games are conducted on turf, asphalt, concrete, and unimproved exterior surfaces, while indoor activities of active and passive types are held on tiled and hardwood floors. Games engaged in by participants may involve balls, bats, frisbees, and hula hoops; they may require running, skipping, sliding, and jumping.

Quite often there are other activities taking place in the Park and surrounding areas during the conduct of Day Camp. Some of these activities are sponsored by the Park District, some by other agencies, and many are unscheduled and spontaneous use of the area by groups and individuals.

Parents of children who take medication during camp assume all responsibility and risk of that medication. District will not be held responsible for injuries or problems that occur due to the use of medication. District is not responsible for medication which is lost, stolen, or traded by children. Problems may include: overdose, a child refusing to take medication, or injuries to a child who receives medication prescribed to another child. District staff will not administer medication or assist the child in taking medication. District will not be held responsible if the child forgets or refuses to take medication.

Please be advised that the District places the highest priority on the safety of your child. Staff is well trained and Leader-participant ratios are lower than many comparable programs. However, with activities taking place out-of-doors, over many acres of park space, accidents and injuries are possible, although serious injuries are exceedingly rare. Day Camp participants are subject to the usual assortment of abrasions, cuts, and sprains that active children experience.

### **Agreement, Waiver, and Release - General**

In consideration of being permitted by Cordova Recreation and Park District to participate in this class, I hereby waive, release, and discharge all claims for damages for personal injury, death, or property damage which I may have or which may hereafter accrue as a result of my participation in said activity. This release is intended to discharge in advance the above district, other participants, instructors, officials, sponsors, advertisers, owners and lessees of the premises used to conduct the event and each of them, their officers, directors, agents, all of which are referred to as "Releasees", from all liability to the undersigned, my/our personal representatives, assigns, heirs, and next of kin for any and all claims, demands, losses, or damages on account of injury, including but not limited to death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise.

I fully understand and acknowledge that: (a) There are risks and dangers associated with participation in classes, including but not limited to those of bodily injury, partial and/or total disability, paralysis and death; (b) The social and economic losses and/or damages, which could result from those risks and damages could be severe; (c) These risks and dangers may be caused by the negligence of participants or the negligence of others, including but not limited to the "Releasees" named above; (d) There may be other risks unknown to us or not reasonably foreseeable at this time.

I further accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the "Releasees" named above.

As parent(s) and/or legal guardian(s), I consent to instruct the minor participating in any district class to inspect the facilities and equipment to be used, or I will inspect said facility and equipment myself, and if they believe anything is unsafe, the participant or parent/legal guardian should immediately advise the instructor of such condition and refuse to participate until the faulty condition is corrected. Participant should be fully instructed by parent(s) and/or legal guardian(s) and encouraged to adhere to any class rules and common courtesy.

I agree that this Waiver and Release Agreement covers each and every activity sponsored by the above district including class make-ups and extensions and the "Releasees" are released as to each and every activity and event for the duration of the program.

**PARENTAL CONSENT:** I hereby consent that my child participate in the above activity, and I hereby execute the above Agreement, Waiver, and Release on their behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity. **I have read the above agreement, waiver, and release, and fully understands its contents. I am aware that this is a release of liability and a contract between myself and the above District, and I sign it of my free will.**

SIGNATURE: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

NAME OF PARTICIPANT (if minor): \_\_\_\_\_ DATE: \_\_\_\_\_