



# Camp Blizzard Registration Form

## Caroline Family YMCA

Child's Name \_\_\_\_\_ Nickname \_\_\_\_\_ Grade \_\_\_\_\_

Allergies \_\_\_\_\_ D.O.B \_\_\_\_\_

Child's Name \_\_\_\_\_ Nickname \_\_\_\_\_ Grade \_\_\_\_\_

Allergies \_\_\_\_\_ D.O.B \_\_\_\_\_

Child's Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_ Employer \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Employer \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contacts (May not be a parent or live in the same household as another emergency contact):

Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Authorized Pick-ups:

\_\_\_\_\_

Unauthorized Pick-ups (must provide court documentation):

\_\_\_\_\_

I have read and understand the Behavior Management Policy and my child has permission to participate in all field trips, swim in the YMCA pool, and be transported by a YMCA vehicle.

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

I authorize the Rappahannock Area YMCA, Inc. to draft the program fees from the current account on file.

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

Please circle the days your child will be attending: 12/21 12/22 12/23 12/28 12/29 12/30

**Daily Rates:** \$25/child for Y members, SACC participants, and CCPS staff, \$35/child for non-SACC participants  
1/4 is a Teacher Workday, the price is \$15/day for SACC participants and CCPS staff and separate registration is required

**Registration Fee:** Waived for SACC participants, \$15/child for non-SACC participants

**Late Registration Fee:** \$20/child after 12/16

All payments are due by 12/16; there will be a \$25 late payment fee applied to your account if payment is not made.

# PARENTS – PLEASE KEEP THIS SHEET FOR YOUR INFORMATION

Items to bring and things to keep in mind:

1. Smile!
2. Food: (NO GLASS BOTTLES OR PEANUT PRODUCTS)
  - Morning Snack
  - Lunch
  - Afternoon Snack

\*Note: there is no refrigerator or microwave and we do not serve breakfast.
3. Swimsuit and Towel, labeled with child's name.
4. Please remember we require a medication consent form, filled out by your child's doctor, in order to provide EMERGENCY medication, i.e. inhalers and Epi-pens. All other medication must be taken at home.
5. Field trip money, in cash only.
6. Please make sure that all personal belongings are labeled with the child's name.
7. All children MUST be signed in and out each day.
8. EVERY person signing out a child MUST have photo ID. We do this for your child's safety!

## **NO TOYS OR ELECTRONICS FROM HOME PLEASE – THE YMCA IS NOT RESPONSIBLE FOR LOST OR STOLEN ITEMS.**

### Behavior Management Policy:

Please make sure your child is aware of the following rules.

- A. Respect others
- B. Be responsible
- C. Always tell the truth
- D. Care for others
- E. Have fun!

Parents will be informed if their child continues to display poor behavior. General discipline techniques involve positive reinforcement for good behavior and careful explanation of behavior that is unacceptable. An activity will be denied for repeated poor behavior and the child will be directed to an alternative activity. Physical discipline will not be used nor will food be denied as a punishment.

### Unacceptable Behavior:

- A. Repeatedly engaging in fighting as a way to solve an issue.
- B. Stealing or defacing the site or other children's property
- C. Refusing to follow basic safety rules
- D. Showing disrespect for staff or rude and discourteous behavior toward other children
- E. Repeatedly displaying an inability to follow established guidelines.

The YMCA reserves the right to withdraw any child who continually does not follow the rules.

**IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT:**

Sharyn Witkowski at 804-448-9622 ext. 4042 or [switkowski@family-ymca.org](mailto:switkowski@family-ymca.org)