

# Bad Axe Summer Day Camp Registration & Handbook

Ages 5 to 12

## Introduction

Welcome to the Bad Axe Parks & Rec. Summer Day Camp. This Day Camp Program offers you and your family a safe and secure environment for your child to have a fun filled summer. Our staff provides quality programming and supervision of children. A wide variety of activities will be provided for your child. We encourage all children to participate in all the planned activities including Arts & Crafts, Socialization Games, Field Trips, Theme Days, Physical Activities, Splash Pad & Water Activities, Academic Opportunities, and time in our local library!

In the following pages, you will find general information about Day Camp and rules that are provided to help you with any questions you may have. A finalized calendar of the summer planned activities will be sent out on the Remind app and the Facebook page.

## Contact Information

Please Direct Questions and Concerns to Camp Director: Morgan Wisenbaugh

Remind: Text **81010** this message **@cfgf68**

Facebook/Messenger: Bad Axe Park & Recreation

## Enrollment Costs

### City Residents

5 Days a Week – \$315

2 Fieldtrips a Week – \$265

3 Days No Fieldtrips – \$205

2 Days No Fieldtrips – \$140

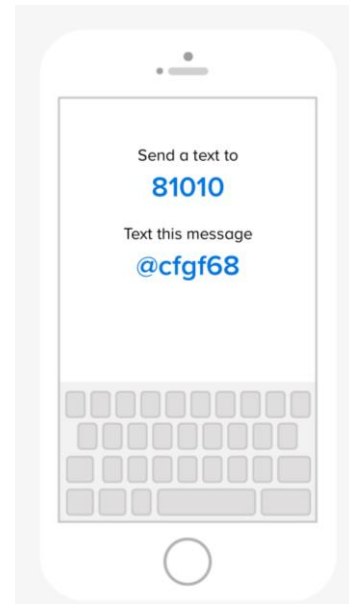
### Non-City Residents

5 Days a Week – \$415

2 Fieldtrips a Week – \$345

3 Days No Fieldtrips – \$280

2 Days No Fieldtrips – \$190



If you selected the 2 day/no fieldtrips plan, please inform us of what days they will be attending 😊

## **Payment**

**Enrollment must be paid in full by Monday June 15th** for your child to attend the first day. Payment plans are available to begin whenever you register and will need to be paid in full by Monday June 15th. All payments are made at Bad Axe City Hall.

The final day to sign your child up is Friday June 12<sup>th</sup>

If your child cannot attend one day, or camp is canceled due to weather, or other hazardous conditions, you will NOT be reimbursed. If your child needs to be picked up or removed from camp due to his/her behavior you will NOT be reimbursed.

## **Program Overview**

Day Camp begins Monday, June 15th and runs through Friday, July 31st.

**No day camp July 2nd and July 3rd due to the holiday weekend.**

Hours: 9:00 a.m. – 2:00 p.m. Monday-Friday

Location: Bad Axe City Park Pavilion, located behind City Hall, next to the Bad Axe City Library.

Field trips are on Tuesday and Thursday's. If your child will not be attending these field trips, they will not have camp on that day.

It is encouraged that your camper brings one backpack every day to hold lunches, extra clothes etc. Please label belongings if possible.

## **Picking Up and Dropping Off**

When your child comes to camp each morning, they will have to check in with their counselor. We will only allow your child to leave with the person(s) specified on the registration form. If there is a change in pickup person, please notify the camp director. No child is allowed to leave early without permission from a guardian.

Camp begins at 9:00 am, **please ensure your child is not at the park before 8:45 am.** Staff is not at the park before 8:45 am.

Camp ends at 2:00 pm, please ensure that your child is picked up prior to 2:15pm. Staff is not at the park after 2:15 pm. If you are going to be late, please reach out to the camp director to make arrangements.

## **Communication**

We will be using the Remind app as the main mode of communication for Day Camp. If you do not join our group, we are not responsible for any missed communication. All reminders, updates and announcements are made through the app. If this is a problem, please contact us. REMIND App: Text **81010** this message **@cfgf68**

## **Weather Policy**

If camp will be cancelled or the location changed, it will be announced between 7:30 A.M. and 8:00 A.M. via the REMIND app. If we are unable to secure a secondary location camp will be cancelled for the day, if it is on a fieldtrip day we will try to reschedule, no reimbursement for missed trips. If the rain starts while camp is already in session, we will plan activities under the pavilion or in the library. Other factors that may interrupt camp are extreme heat, dangerous winds, and extremely poor air quality.

## **Snack/ Lunch**

Campers have a snack time midmorning. Campers will need to bring their cold lunch to camp daily. Campers must bring a water bottle daily. If it will be an issue to provide your child with a lunch, or one is forgotten reach out to us and we will provide one. All requests are confidential.

## **Park Rules (please go over these with your child)**

1. Respect others
2. Listen to instructions
3. Stay with your group
4. Follow the schedule
5. Be responsible for belongings
6. Leave no trace
7. Participate enthusiastically
8. No electronics during camp hours
9. Be inclusive
10. Be safe
11. Have fun

## **Discipline Policy**

Major negative behaviors such as swearing, bullying, aggression will be taken seriously and may lead to removal from the program.

First Offense: Verbal Warning

Second Offense: Written warning and sit-out

Third Offense: Parents called for pickup

Fourth Offense: Dismissal from program. NO REFUND.

**Please separate packet here, only turn in pages 4-11 keep 1-3 for your own reference.**

**Please separate packet here, only turn in pages 4-11 keep 1-3 for your own reference.**

## Registration & Waivers

Please check what plan your child is participating in.

City Resident	Non-City Resident
5 days a week \$315.00 <input type="checkbox"/>	5 days a week \$415.00 <input type="checkbox"/>
2 fieldtrips a week \$265.00 <input type="checkbox"/>	2 fieldtrips a week \$345.00 <input type="checkbox"/>
3 days a week (no fieldtrips) \$205.00 <input type="checkbox"/>	3 days a week (no fieldtrips) \$280.00 <input type="checkbox"/>
2 days a week (no fieldtrips) \$140.00 <input type="checkbox"/>	2 days a week (no fieldtrips) \$190.00 <input type="checkbox"/>

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

\_\_\_\_\_  
Age

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Home/Cell Phone Number

\_\_\_\_\_  
Work Phone Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

### **Please circle a t-shirt size:**

youth S / youth M / youth L / youth XL / adult S / adult M / adult L

Person to be notified in an emergency when parent/guardian is unavailable:

\_\_\_\_\_  
Name Emergency Contact

\_\_\_\_\_  
Home/Cell Phone Number

\_\_\_\_\_  
Work Phone Number

### **Medical Information:**

\_\_\_\_\_  
Child's Physician

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Health Insurance Carrier

\_\_\_\_\_  
Policy / Group Number

\_\_\_\_\_  
Allergies/ Other Conditions

Is your child currently under medication or treatment? Yes \_\_\_\_ No \_\_\_\_

If yes, give type, dosage, frequency, and symptoms: \_\_\_\_\_

If staff has to administer medication, a medication release for **MUST** be issued.

My child will be leaving by way of:

Bike \_\_\_\_\_ TAT \_\_\_\_\_ Walking \_\_\_\_\_ Parent \_\_\_\_\_

Other persons my child may be released to: \_\_\_\_\_  
\_\_\_\_\_

**Permission's Waiver and Authorizations:**

Child's Name: \_\_\_\_\_

The above-named child has my permission to attend the Bad Axe Parks and Recreation Summer Day Camp Program. I realize that by signing this form, I will not hold the city of Bad Axe, its employees, or organizers of the program responsible for any injuries that may occur during the program hours. I also realize that the staff and program organizer will do everything possible to offer a safe and injury free program. I also realize that by participating in this program there is a certain degree of risk, and that injury may occur.

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

I hereby give my permission to the Bad Axe Park and Recreation Staff to obtain emergency medical and or surgical treatment for the above-named minor/ child of such treatment is deemed by professional, trained medical personnel. I also understand that the Bad Axe Parks and Recreation/ City of Bad Axe will not be held responsible for any medical cost.

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



## **Child's Medication Release Form**

Child's Name: \_\_\_\_\_

I, the undersigned parent/legal guardian, acknowledge that my child is in good health. I understand that I must list any health restrictions, allergies, or medications in the space provided below that pertain to the above-named child.

The above-named child has the following:

Health Restrictions:

\_\_\_\_\_

\_\_\_\_\_

Allergies:

\_\_\_\_\_

\_\_\_\_\_

Medications:

\_\_\_\_\_

\_\_\_\_\_

I understand that the Bad Axe Summer Day Camp Program will not be responsible for anything that may happen because of health information incorrectly shared or not shared or not shared on this form. I assume complete responsibility that my child is in good health and assume responsibility for my child's state of health while he/she attends Bad Axe Summer Day Camp.

\_\_\_\_\_  
Print Parent/Guardian Name

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

\_\_\_\_\_  
Date

### **Parental Consent, Warranty of Physical Health and Waiver of Liability**

We, being either the natural or adoptive parents or legal guardian for the individuals whose names are set forth on the registration form, represent and

warrant that the child is physically healthy and able to participate in the activities for which the child is registered, acknowledging the full understanding of such activities and an opportunity to review with the Department any and all questions regarding such activities. We further represent that to our knowledge, such child or children have no physical health problems, which would affect participation. We further represent that we have full authority on behalf of such child or children to consent to the child's participation and do consent to such participation. We acknowledge that participation in recreational activities carries the risk of serious injury or death from occurrences during such activities, including, but not limited to. Being struck by objects, slip, trip or fall, being injured by other participants, and other health hazards. We fully release and absolve from liability the Bad Axe Parks & Recreation Department, its employees, agents' contractors, and those participating with it from any and all liability, injury or damages on behalf of our child, and individually on behalf of us. This release extends to personal and bodily injury, as well as property damage. The above includes a waiver of liability and should be read carefully and fully before signing. I the undersigned, hereby agree to allow the individual(s) name hereon to participate in the Bad Axe Parks & Recreation activities. I certify that, to the best of my knowledge, the participant(s) named hereon is/are physically fit and able to engage in Parks & Recreation activities. In case of emergency, I give my permission for emergency medical treatment. This form shall be considered valid until canceled or changed in writing by the undersigned parent/guardian/participant. I hereby authorize the Bad Axe Parks & Recreation Department to use all photos, both video and audio portion of videotapes on which my dependent or I appear. I understand that portions of these tapes may be used in other programs, training aids, and productions at the discretion of the Bad Axe Parks & Recreation Department.

Allergies:

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Parents/Guardian Signature

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Date

## **RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT**

In consideration for participating in canoeing, kayaking, paddle boarding, and swimming, and for all other good and valuable considerations, I hereby agree to release and discharge from liability IHF, LLC (dba Camper's Haven Family Campground) and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Camper's Haven"), on behalf of myself and my children, parents, heirs, assigns, personal representatives and estates, and also agree to the following:

1. I acknowledge that the sports of canoeing, kayaking, paddle boarding, and swimming involve known and unanticipated risks, which could result in physical and/or emotional injury, paralysis, permanent disability, death, and property damage. Risks include, but are not limited to, death as a result of drowning or brain damage caused by near drowning; broken bones, torn ligaments or strains as a result of falls while launching boats or entering/exiting the water, or while moving a boat or paddle board; medial conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent with this activity that might have been caused by the negligence of Camper's Haven. My participation (or my children's/wards') in these activities is completely voluntary and I (we) elect to participate despite the risks. In addition, if at any time I (we) believe that activity conditions are unsafe or that I (we) am unable to participate due to physical or medical conditions, I (we) will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Camper's Haven from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment of facilities, arising from negligence or accidental occurrences. This release does not apply to claims arising from intentional conduct. Should Camper's Haven or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless of all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I (myself or my children/wards) may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of—all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so solely in the state where the Camper's Haven facility is located, and I further agree that the substantive law of that state shall apply.

6. I agree that if any portion of this agreement is found to be void or unenforceable, that remaining portions shall remain in full force and effect.
7. I understand that by completing this form for a minor child, whether or not I am the child's legal guardian, that the child(ren) I have listed on this form have my permission (or their legal guardian's permission). I understand that if a conflict of permission arises that I am responsible for the discrepancy. By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

In consideration of the services of IHF, LLC (dba Camper's Haven Family Campground), their owners, directors, officers, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Camper's Haven"), I do hereby agree as follows:

1. I understand that the Jumping Pillow and miniature golf are fun-filled family activities which are safe when all safety rules are followed. By purchasing a wristband or Fun Pass and signing this form, I hereby agree to be held solely responsible for all persons listed on this form, insuring that they understand and follow all rules. All children under 18 must have an adult present to enforce pillow safety rules. Jumping pillow rules are posted at the entrance to the pillow enclosure.
2. I have been advised that the jumping pillow is NOT safe for pregnant women, the elderly, or those with health concerns. Please consult a physician if you have any doubts as to your ability to participate in this activity.
3. I acknowledge that the Jumping Pillow and miniature golf involve known and unanticipated risks. Such risks include but are not limited to: physical and/or emotional injury, paralysis, permanent disability, death, and property damage. I understand such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. I accept responsibility for these risks and others not specified on behalf of myself and any minor children I have listed on this form.
4. I declare that my participation in these activities is voluntary; no one is forcing me to participate in spite of the risks. I certify that I am physically capable of participating in this activity. Therefore, I assume responsibility for myself and any minor children listed on this form, for any occurrences of bodily injury, death, and loss of personal property and expenses incurred as a result of those inherent risks and dangers of my negligence in participating in this activity.

I have had sufficient time to read this entire document and should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in

return for the execution of this release is a reasonable bargain. I have read and understood this document and I accept the terms and conditions stated. I acknowledge that this agreement shall be effective and binding upon me, my heirs, assigns, personal representatives, estates, and for all minor children accompanying me. I acknowledge I am not relying on any oral, written, or visual representations or statements made by Camper's Haven, including those made in brochures or electronic communication, to induce me to participate in this activity.

### Parent or Guardian Additional Agreement

(Must be completed for participants under the age of 18)

In consideration of the following minor children, which I hereby agree to be responsible for according to all of the items listed in this agreement:

Being permitted to participate in this activity, I further agree to indemnify and hold harmless Camper's Haven from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Participating Minor: \_\_\_\_\_

may use the boats without supervision

CANNOT use the boats without supervision

Participating Minor: \_\_\_\_\_

may use the boats without supervision

CANNOT use the boats without supervision

Participating Minor: \_\_\_\_\_

may use the boats without supervision

CANNOT use the boats without supervision

Participating Minor: \_\_\_\_\_

may use the boats without supervision

CANNOT use the boats without supervision

Participant or Parent/Responsible Party (Print Name) \_\_\_\_\_

Phone \_\_\_\_\_

Your Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_ 9

Participant or Parent/Responsible

Signature \_\_\_\_\_ Date \_\_\_\_\_