

Summer 2024 - Day Camp Enrollment

Day Camp is for kids entering grades K-6th. Pages 1-6 is required for each child.

Child's Name: _____ School: _____

Mailing Address: _____

DATE OF BIRTH MONTH / DAY / YEAR			AGE	GRADE (Fall 2024)	BOY	GIRL	T-SHIRT SIZE (Youth/Adult)	IS CHILD A NORFOLK YMCA MEMBER?
							<input type="checkbox"/> Extra for \$10	YES ____ NO ____

Mom/
Guardian: _____

Dad/
Guardian: _____

Cell #: _____

Cell #: _____

Email: _____

Email: _____

Please indicate that you understand the following by checking each box:

- Registration is open Tuesday, April 16th at 8 am.** Spots limited—first come, first serve.
- 2 Registration Options**
 1. **Online Registration** - www.norfolkymca.org; Select the grade level the child will be entering Fall 2024; Full payment (includes \$20 Deposit) is required for all weeks; Enrollment Forms due **April 28th**; Must have a Norfolk Family YMCA account created; Child's membership must be active prior to registration to receive member rate; Please **test** your Login email & password prior to registration (account will lock for 24 hours after several failed attempts)
 2. **In-House Registration** - \$20 Deposit per week, per child is due at registration; see page 2 for payment options (scheduled payments, in full, or state subsidy); Enrollment Forms due at registration.
- NOTES:** State Paid must register in-house (no deposit required). NO over the phone registrations will be taken. Enrollment Forms are NOT accepted prior to registration day (April 16).
- Deposit Required:** At registration, a \$20/week deposit is due per camp week, per child. This is applied towards the weekly camp fee, it is **not** extra. The deposit is non-refundable, non-transferable. If you cancel, regardless of the date, you will forfeit the \$20 deposit, per week, per child. Not required if State paid.
- Cancelation:** If you cancel, you will receive the following credit or refund (deposit still forfeited): **Monday prior: 100%, Tuesday prior: 75%, Wednesday prior: 50%, Thursday prior: 25%, Friday prior: 0%.**
- Rates:** Each camp has a weekly rate, providing care as long as 6:00 am - 3:30 pm; main programming hours are 9 am - 3 pm. After Care (3:30-6:00 pm) is an additional daily fee. Weekly rates will not be prorated.
- After Care:** The **After Care deadline is the TUESDAY PRIOR** to camp, by the end of the day. Register online or in-house. Rates are \$6/\$10 PER DAY.
- If your child is picked-up past 3:30 pm, After Care fees will apply and be added to your account.**
- Waiting List:** If your child is on a waiting list for any week of camp, and then you make other plans, please call the YMCA to **remove** your child's name from the waiting list! Time is limited to fill spots.
- If your child will not be attending, please call 402-371-9770 to leave a message with the Welcome Center.
- If you are late picking up your child (6:00 pm), a fee of \$1 per minute applies (per family, not per child).

PROGRAM RATES	Member	Non-Member
Day Camp	\$135/week; (Wk #1 & #6-\$108)	\$160/week; (Wk #1 & #6-\$128)
After Care (3:30-6:00 pm)	\$6/day	\$10/day

Please check your personal Health & Accident Insurance as the YMCA does NOT cover these areas. I have read and understand the information and policies in the YMCA parent handbook included with this packet. I have also taken the time to read and explain the policies to my child who will be attending camp this summer.

Parent/Guardian Signature: _____ Date: _____

Payment Form - Take a picture for your Records

This form is required for every family. Siblings can be joined on one form, **only** if their registrations are exactly the same.

Child's Name: _____

Please save form of payment to Y account!

Payment & Registration Options (Please Check One):

In-house: Automatic Payments - Select camps below; default draft date is the Tuesday prior
 => Bank Draft (checking/saving) - last 4 #s _____ Debit/Credit Card - last 4 #s _____
 => **After Care:** Indicated Below I'll register weekly by the Tuesday prior Don't Need

In-house: Payment in Full
 => **After Care:** Indicated Below I'll register weekly by the Tuesday prior Don't Need

In-house: Child is/will be State Paid - Select camps below - (Also see page 11)
 => **After Care:** Indicated Below I'll register weekly by the Tuesday prior Don't Need

Online Registration & Payment in Full - these forms are due no later than **Sunday, April 28th**
 => **After Care:** Already Registered I'll register weekly by the Tuesday prior Don't Need

Child is on a Waiting List only - forms still **due**; if your plans change, please notify the Y to remove name

Other:

Rates: Day Camp: \$135 Member/\$160 Non-member, per week (*Wk #1 & 6 prorated - \$108/\$128 per week)
 After Care: \$6/\$10 per day (3:30-6:00 pm)

Draft Date: Default Draft Date will be the **Tuesday prior**, dates listed below; otherwise, please write your own preferred date, which must be before the camp week begins.

Deposit: \$20 per week, per child is due at registration; non-refundable, non-transferable; towards camp fee

After Care: If you want to pre-register for After Care along with your Camp registration, please circle the days below; otherwise you can register weekly by the Tuesday prior.

DAY CAMP

<u>Week #</u>	<u>Dates</u>	<u>After Care (Circle)</u>	<u>Default Tuesday Draft</u>	<u>OR Your Draft Date</u>	<u>Amount</u>
<input type="checkbox"/> *1	5/28 - 5/31 (NO 5/27)	<input checked="" type="checkbox"/> T W Th F	5/21	_____	\$ _____
<input type="checkbox"/> 2	6/3 - 6/7	M T W Th F	5/28	_____	\$ _____
<input type="checkbox"/> 3	6/10 - 6/14	M T W Th F	6/4	_____	\$ _____
<input type="checkbox"/> 4	6/17 - 6/21	M T W Th F	6/11	_____	\$ _____
<input type="checkbox"/> 5	6/24 - 6/28	M T W Th F	6/18	_____	\$ _____
<input type="checkbox"/> *6	7/1 - 7/5 (NO 7/4)	M T W <input checked="" type="checkbox"/> F	6/25	_____	\$ _____
<input type="checkbox"/> 7	7/8 - 7/12	M T W Th F	7/2	_____	\$ _____
<input type="checkbox"/> 8	7/15 - 7/19	M T W Th F	7/9	_____	\$ _____
<input type="checkbox"/> 9	7/22 - 7/26	M T W Th F	7/16	_____	\$ _____
<input type="checkbox"/> 10	7/29 - 8/2	M T W Th F	7/23	_____	\$ _____
<input type="checkbox"/> 11	8/5 - 8/9	M T W Th F	7/30	_____	\$ _____

Record for your records

By signing below, I agree to the following:

- I authorize the YMCA to charge my account for the applicable member/non-member rate for Day Camp & After Care on the default Tuesday prior deadline date, or on the date I have provided.
- I understand that if my payment is returned for any reason, my account will be charged a \$30 Return Fee.
- I understand that if I cancel, I will forfeit the \$20 deposit, per week, per child.
- I understand that if I cancel, I will receive the following credit or refund (deposit still forfeited):
Monday prior: 100%, Tuesday prior: 75%, Wednesday prior: 50%, Thursday prior: 25%, Friday prior: 0%.
- I understand that past due balances may be automatically drafted if overdue by 30+ days, and no communication.
- I understand that the child must be an active Norfolk member to receive member rate; expired is non-member rate.
- I understand that Big Deal Certificates cannot be used towards Day Camp; they are for Membership only.

Signature: _____ Date: _____

Received - Staff & Date: _____ Draft Completed - Staff & Date: _____



NORFOLK FAMILY YMCA

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

ATTENTION: This Release and Waiver of Liability and Indemnity Agreement applies to anyone at the YMCA for any purpose - as a participant, a spectator or a visitor to the YMCA.

In consideration for being permitted to utilize the facilities, services, and programs of the Norfolk Family YMCA ("YMCA") for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, assignees and successors, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, INCLUDING ANY YMCA PART OF THE NATIONWIDE MEMBERSHIP PROGRAM, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "Releases") from all liability to the undersigned, his or her personal representatives, assignees, heirs, and successors for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, *whether caused by the negligence of the Releasees or otherwise* while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA *whether caused by the negligence of the Releases or otherwise*.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE *due to negligence of Releases or otherwise* while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

"I understand, comprehend, and appreciate the foreseeable, unforeseeable, and inherent dangers and risks associated with the use of the Norfolk Family YMCA facilities and specifically those risks associated with communicable diseases including SARS-CoV-2/ COVID-19 (the Coronavirus). I fully assume all responsibility for the risks associated with my use of the Norfolk Family YMCA and I hereby release, discharge, and hold harmless the Norfolk Family YMCA, its board members, and employees, from all claims, liability, and causes of action, of whatever form, arising out of or incidental to my use of Norfolk Family YMCA facilities."

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Nebraska and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

Printed Name

Signature

Date

Child's Full Name

PROCEDURES FOR BEHAVIOR MANAGEMENT (Signature Required Below)

It is the goal of the Norfolk Family YMCA to provide a safe and fun program in a secure environment. YMCA staff teach the core values of respect, responsibility, caring, and honesty. All children participating in the program are expected to follow the behavior guidelines and act appropriately in a group setting.

BEHAVIOR GUIDELINES:

- We show respect to ourselves, each other, and the environment.
- Everyone is responsible for their own actions.
- We will care for ourselves, others and equipment.
- Honesty will be the basis for all relationships and interactions.
- A positive attitude is necessary for everyone to have fun!

When a child does not follow these behavior guidelines, the following steps will be taken:

1. YMCA staff will redirect the child for more appropriate behavior.
2. The child will be reminded of the appropriate behavior and rules not being followed and a discussion will take place.
3. Parent will be notified if the inappropriate behavior continues.
4. Documentation of the incident will take place by the staff.
5. A conversation will be scheduled with the parent to discuss the appropriate action.
6. A possible follow up or progress check will follow.
7. If the problem still persists, a conversation will be scheduled with the parent, child, program director and staff involved. All written documentation will be available.
8. If at any time the child's behavior threatens the immediate safety of the child, other children, or the YMCA staff, the parent will be notified and arrangements must be made for the child to leave immediately.

NOTE: The YMCA reserves the right to suspend or even dismiss any child from the program that portrays a continuously disruptive or aggressive behavior.

The following behaviors are not acceptable:

- Putting the health or safety of others in danger
- Stealing or damaging YMCA property
- Leaving the program or designated area without permission
- Refusing to follow these behavior guidelines
- Using any form of obscenity, vulgarity or profanity

**See page 10
for
Discipline Policies**

Children may be suspended up to 3 times before expulsion is issued. Immediate expulsion will result if a child is found using or in possession of any form of tobacco, alcohol, illegal drugs, firecrackers, firearms or explosives.

PARENT/GUARDIAN SIGNATURE REQUIRED

I have reviewed the procedures for Behavior Management with my child. We understand and agree to all of the terms presented in this document.

Parent/Guardian Signature: _____ Date: _____

CHILD HEALTH FORM

Write
Clearly!

Child's Name _____ Age _____ DOB ____/____/____ Boy Girl
Last First Shirt Size _____
Address _____ Grade (Fall 2024) _____
Street City School _____

Parent's Marital Status: Married Separated Divorced Living Together Single Other _____

Mom/Guardian _____ DOB ____/____/____ Cell # _____

Employed by _____ Work # _____

Dad/Guardian _____ DOB ____/____/____ Cell # _____

Employed by _____ Work # _____

In case of **EMERGENCY** and parents are unreachable, please contact: (Must be local. List names in order.)

1. Name _____ Phone _____ Relation _____

2. Name _____ Phone _____ Relation _____

3. Name _____ Phone _____ Relation _____

Authorized individuals for pick-up. Must list parents. (Registered Sex Offenders are NOT allowed on property; therefore, cannot pick up/drop off.)

1. _____ 2. _____ 3. _____

Relation _____ Relation _____ Relation _____

4. _____ 5. _____ 6. _____

Relation _____ Relation _____ Relation _____

HEALTH QUESTIONS:

Details

YES NO **Food Allergies** (be specific) _____

YES NO **Allergies** (Sunscreen, Seasonal, Medications, Bee stings, etc.) _____

YES NO **Medical Conditions** (Asthma, ADHD, Autism, Eczema, etc.) _____

YES NO **Behavior Traits** (runs away, defiant, self-inflicted harm, etc.) _____

YES NO **Medication taken at Camp** (original bottle required; give to staff) _____

Time & Dosage: _____

YES NO **Other at-home Medications** _____

YES NO **Medical History** _____

YES NO **Restrictions to Activities** _____

YES NO **Fears** _____

YES NO **Changes/Events/Issues** (death, divorce, moving, new baby, etc.) _____

FIELD TRIP PERMISSION

My child has my permission to participate in any field trips with Day Camp. This includes both walking and bus transportation.

Parent/Guardian Signature: _____ **Date:** _____

CHILD HEALTH FORM (continued)

Swimming:

1. Swimming Ability: Non-swimmer to Weak _____ Average _____ Strong _____
2. My child has permission to swim. YES NO
3. My child has permission to swim in a depth of water over their head.
 (If Yes, you're allowing them to be in a depth of water that they **can't touch the bottom when standing.**) If NO, SKIP #4 - they will not be allowed to take Swim Test. YES NO
(Skip #4)
4. My child has permission to take the Deep Water Swim Test (Front Crawl swim the length of the pool & tread water 1 minute). If child passes, they can swim in the big pool, 4-12 ft. NOTE: **Non-swimmers/weak are not allowed to take the Swim Test.** (___ Already Passed) YES NO

Sunscreen:

I give permission for the YMCA to provide sunscreen to my child. YES NO
(If allergic or skin sensitivity, please mark this on previous page as well.)

Immunization Records: State Certification requires Immunization Records be on file before the child can be admitted into the program. Note: We do not need another copy if your child has attended this program in the past and we have the most current records on file already.

- Copy Attached All Current & On file already Refusal - Copy of refusal from doctor must be included

EMERGENCY MEDICAL CARE AUTHORIZATION

I (We) expect to be notified at once in case of accident or illness to my (our) child. I (We) will make arrangements for medical care of my (our) child with the physician or hospital of my (our) own choice. If I (we) cannot be reached to make the necessary arrangements, I (We) hereby authorize the YMCA to

Contact Dr. _____

Address _____ Phone _____

Or the nearest hospital for the emergency care of (child's name) _____

Parent/Guardian Signature _____ Date _____

This is to certify that my child is, to the best of my knowledge, in good health and free of disabilities that would endanger him/her or other children in the YMCA programs.

Parent/Guardian Signature _____ Date _____

WAIVER:

- I understand that the NORFOLK FAMILY YMCA assumes no responsibility for injuries or illnesses which my child may sustain as a result of his/her physical condition or resulting from his/her participation in any athletic activities, sports programs, equipment usage, exercise or other activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk for any and all injuries and illnesses that may result from my child's participation in these activities. I hereby release and discharge the NORFOLK FAMILY YMCA, its agent, servants and employees from any and all claims for injury, death, loss or damage which he/she may suffer as a result of his/her participation in these activities.
- I understand that the NORFOLK FAMILY YMCA is not responsible for personal property lost or stolen while using the YMCA facilities or visiting YMCA property.
- I give permission to the YMCA to use, without limitation or obligation, photographs, film footage, my child's image or voice for purposes of promoting or interpreting YMCA programs.
- I have received the Department of Health & Human Services (DHHS) Parent Information Brochure for Licensed Child Care, which is attached in the Parent Handbook, pages 14.
- I acknowledge the waiver above and accept the conditions set forth because I understand the goals and purposes of the YMCA.

Parent/Guardian Signature: _____ Date: _____

Norfolk Family YMCA

Day Camp

**Parent Handbook
Summer 2024**



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

Shayla Lind, Day Camp Director
301 W. Benjamin Ave. Norfolk, NE 68701
Phone: 402-371-9770 Fax: 402-371-9162
Website: www.norfolkymca.org
Email: OutOfSchool@norfolkymca.org

2024 Summer Schedule

DAY CAMP

- ⇒ Field Trip information will be emailed the Friday prior to camp and available at drop-off Monday mornings.
- ⇒ Group division will vary for each field trip, as well as leave & return times.
- ⇒ **Groups:** Rockets (Gr. K-1st); Stars (Gr. 2nd-3rd); Novas (Gr. 4th-6th)
- ⇒ Summer School kids will be able to attend **all** field trips.

<u>Week #</u>	<u>Dates</u>	<u>Cancellation Deadline</u>	<u>Theme</u>	<u>Field Trip</u> <i>(scheduled for Thursdays)</i>
*1	May 28 - 31	May 20	Happy Campers	Skyview Park (Norfolk)
2	June 3 - 7	May 27	Animal Adventures	Poppy's Pumpkin Patch (Norfolk)
3	June 10 - 14	June 3	Game Time	King's Lanes Bowling (Norfolk)
4	June 17 - 21	June 10	Camp Hollywood	Norfolk Public Library (Norfolk)-Tue 6/18
5	June 24 - 28	June 17	Ocean Commotion	AquaVenture Water Park (Norfolk)
*6	July 1-3, 5	June 24	Christmas in July	Ta-Ha-Zouka Park (Norfolk)
7	July 8 - 12	July 1	Fun at the Fair	Madison County Fair (Madison)
8	July 15 - 19	July 8	Heroes vs. Villains	Norfolk 7 Movie "Despicable Me 4" (Norfolk)
9	July 22 - 26	July 15	Camp Olympics	YMCA Gymnastics Center (Norfolk)
10	July 29 - Aug 2	July 22	Color Me Crazy	Divot's Miniature Golf (Norfolk)
11	Aug 5 - 9	July 29	S.T.E.A.M. at Camp	Norfolk Arts Center (Norfolk)

(The YMCA reserves the right to change this schedule as needed.)

DAILY SCHEDULES

This is a general daily schedule for each group at Day Camp. Field Trips are on Thursdays (may not swim). Main programming hours are between 9 am - 3 pm. All kids will be together to start and finish the day.

Rockets (K-1st)

6:00-8:00	Free Time
8:00-9:00	Group Gym Games
9:00-9:45	Free Play & Circle Time
9:45-10:30	Activity/Craft
10:30-11:00	Gym/Turf
11:00-12:00	Lunch,Outside,Story,Change
12:00-1:00	Swim (Mon-Thu, 12-1 pm; Fri, 12:30-1:30 pm)
1:00-1:45	Snack & Free Play
1:45-3:00	Activity/Outside/Games
3:00-3:30	Parent Pick-Up & Free Play
3:30-4:15	After Care Snack & Clean up
4:15-6:00	Outside/Gym/Turf

Stars (2nd-3rd) & Novas (4th-6th)

6:00-8:00	Free Time
8:00-9:00	Group Gym Games
9:00-9:15	Opening/Announcements
9:15-10:00	Activity/Craft/Turf/Outside
10:00-10:45	Activity/Craft/Turf/Outside
10:45-11:30	Activity/Craft/Turf/Outside
11:30-12:00	Lunch & Free Play
12:00-1:00	Activity/Craft/Turf/Outside
1:00-3:00	Swim (Stars: Mon-Fri, 1-2 pm; Novas: Mon-Fri, 2-3 pm)
3:00-3:30	Parent Pick-Up & Free Play
3:30-4:15	After Care Snack & Clean up
4:15-6:00	Outside/Gym/Turf

OBJECTIVES

At Day Camp, we offer activities that will sharpen your child's skills and challenge them to develop physically, mentally, and socially. All children will learn and interact in a safe and fun environment. Camp participants will build character and reinforce values, develop meaningful relationships, show appreciation for materials, self, and others, become involved and incorporate healthy lifestyles, and learn new skills and enhance old ones.

GROUPS

The Day Campers will be divided into age appropriate groups, by the grade they are entering this Fall, for daily activities during the main programming hours, 9 am - 3 pm, (Homeroom):

- Rockin' Rockets - Grades K-1st (Preschool Room)
- Shooting Stars - Grades 2nd-3rd (Room 3/4 by West Doors)
- Shining Supernovas - Grades 4th-6th (Party Room by Racquetball Courts)

DROP-OFF & PICK-UP

- Each child should be dropped-off and picked-up in Rooms 3/4 (by West doors), which requires a signature of a parent or an approved adult that is on the pick up list. Do not drop off your child outside and have them walk in by themselves. Staff may require ID to be shown.
- Please pick up your child between 3:00-3:30 pm if they are not attending After Care.
- Registered Sex Offenders are **not** allowed on YMCA property or off-site program areas; therefore, no one on the National Sex Offender Registry List may drop off, pick up, or visit during camp, no exceptions. All names listed for authorized adults to pick-up may be checked.

COMMUNICATION

- Daily Messages about your child's attendance is important! Please call the YMCA with updates.
- Checking your Email is very important! Please provide your primary email/s clearly on the front enrollment form. **Weekly emails will be sent out the Friday before camp** with information about the week's activities and field trip details. Please check your email frequently, as email is used for communication and Invoices/Receipts.
- Weekly handouts with field trip information are available at the Sign In/Out table.
- We will use Text Alerts for changes to camp due to the weather or other reasons.
- **If you need to reach your child, you may call the camp cell phone:**
 - **Rockets (Gr. K-1st): 402-860-8425** (9 am - 3 pm)
 - **Stars (Gr. 2nd-3rd): 402-860-1698** (Main phone, used all day)
 - **Novas (Gr. 4th-6th): 402-860-3957** (9 am - 3 pm)

SWIMMING

Each group will have this typical swim schedule each week (may *not* swim on field trip day):

- **Rockets (Gr. K-1st):** Mon-Thu, 12-1 pm, Fri 12:30-1:30 pm
- **Stars (Gr. 2nd-3rd):** Mon-Fri, 1-2 pm
- **Novas (Gr. 4th-6th):** Mon-Fri, 2-3 pm

Swim Test: To be allowed to swim in the big pool (4-12 ft), the child must successfully perform and pass a Swim Test (Front Crawl swim the length of the big pool & tread water 1 minute).

Swimmers will be marked with a colored swim necklace:

- ⇒ **Red** = Non-swimmer/weak; has not passed the swim test; small pool only
- ⇒ **Yellow** = Average swimmer; has not passed the swim test; small pool only
- ⇒ **Green** = Strong swimmer; has passed the swim test; small or big pool

Please note: Child must have swim suit & towel DAILY. **Siblings need separate towels and bags!**

If they forget these items, they will not swim. Write your child's name on all items (suits, towels, bags, goggles). Puddle Jumpers can be provided, upon request. Those who choose not to swim must remain in the pool bleachers, but can bring simple things to do (books, drawing, card games).

DAILY ITEMS TO BRING (IN A BACK PACK)



Please make sure you label ALL of your child's belongings with first and last names!

- **Day Camp:** Cold Lunch, extra snacks, water bottle, swim suit, towel, swim bag, running shoes, & sweatshirt/light jacket. Wear Day Camp t-shirt on field trip day. Sunscreen is optional (provided).
- Siblings need everything separate—lunch box, swim bags, camp bags, towels, etc.
- Please be sure that your child wears comfortable running **shoes** every day. **If flip flops are worn, and it's deemed unsafe to participate, the child may be asked to sit out, so please pack or wear shoes to camp!** We play several games in the gym & outside, and we run & walk a lot.
- No toys or pool toys should be brought from home, so please do not bring any. Goggles and lifejackets are allowed for the pool.

LUNCHES AND SNACKS

- A cold lunch needs to be sent with your child daily, and a snack if staying for After Care.
- Snack will be eaten at 3:30 pm in After Care. Rockets (Gr. K & 1st) need 2 snacks.
- Please provide healthy foods, drinks, and eating utensils for your child. Lunches should be packed that **do not require heating** (microwave) or refrigeration. The lunch needs to be in a soft-sided insulated lunch box. Freezing your child's juice box or GoGurt will help keep their food cooler.
- Breakfast - Please have child eat breakfast before drop off. If necessary, child can eat breakfast at camp, but only if dropped off prior to 7:30 am.

FIELD TRIPS

- We typically take one field trip each week, usually on **Thursdays**. Campers are to wear their Day Camp t-shirt and comfortable shoes on field trip days.
- **Weekly emails** will be sent out the Friday before camp with information about the week's activities and field trip details. The YMCA reserves the right to change the schedule as needed.
- If you miss the bus for trips, staff do not stay back to supervise stragglers. You must be on time.

LOCATION OF CHILDREN

- It's best to attend Day Camp from 9 am - 3 pm, Monday-Friday, during the main programming hours. You may drop off as early as 6 am (to Rooms 3/4, by West doors) for camp, and **must** be picked up by 3:30 pm, unless staying for After Care (3:30-6:00 pm).
- **Adult must bring child into the building**, and sign-in the child in Rooms 3/4.
- Day Camp takes place at the YMCA, 301 W. Benjamin Ave, as well as weekly off-site field trips.
- Transportation will be by bus and walking, weather permitted.

DISCIPLINE POLICIES **** Please read ****

- The YMCA provides a highly sought-after and unique summer camp experience. **We will not tolerate ongoing unacceptable behaviors.** If your child displays ongoing disruptive, harmful, or any unacceptable behaviors, the child will earn write-ups which result in suspensions. Our goal is to ensure that all kids have an enjoyable camp experience.
- Unacceptable behaviors may include, but are not limited to: hitting, kicking, biting, bullying, foul language, running away, disrespect towards staff or campers, talking back or not listening to staff, disruptive, unwilling to participate, or stealing.
- Verbal Warnings will be given, however, for each Behavioral Report form that's completed, the following will occur: (credits will not be given)
 - 1st offense - Warning
 - 2nd offense - 1 day suspension
 - 3rd offense - 2 day suspension
 - 4th offense - 5 day suspension
 - 5th offense - Possible Expulsion
- The Director has the right to suspend or expel a child immediately, at any given time for any reason.

CAMP FEES

A \$20 Deposit per week, per child, is due at registration (non-refundable, non-transferable). Payment for each week is due in full by the Tuesday prior of camp. Weekly rates, for all camps, include care from 6:00 am-3:30 pm; additional fees for After Care (3:30-6:00pm). Daily Pick-Up time is between 3:00-3:30 pm. Each child will receive one t-shirt for Day Camp. Extra shirts are \$10/each; must order at Enrollment. Weekly fees will **not** be prorated for partial attendance.

<u>PROGRAM RATES</u>	Member	Non-Member
Day Camp	\$135/week; (*Week #1 & #6-\$108)	\$160/week; (*Week #1 & #6-\$128)
After Care (3:30-6:00 pm)	\$6/day	\$10/day

Week #1 & #6: Prices are prorated due to **no camp on holidays.*

CANCELATION

If you must cancel, you will receive the following credit or refund (deposit still forfeited):
Monday prior: 100%, Tuesday prior: 75%, Wednesday prior: 50%, Thursday prior: 25%, Friday prior: 0%.

WAITING LIST

- Enrollment Forms are **still due** to the YMCA by Sunday, April 28th. No exceptions.
- If your child is on a waiting list for any week of camp, and then you make other plans, please call or email the Director to **remove** your child's name from the waiting list! Time is limited to fill spots.
- Payment in full is expected at the time of accepting a spot into camp.

AFTER CARE

After Care is optional after each camp, 3:30-6:00 pm. **If your child is picked up after 3:30 pm, and you have not paid for After Care for that day, a daily After Care charge will be added to your YMCA account and the balance must be paid.** To avoid additional charges, please plan to pick up your child between 3:00-3:30 pm, daily.

INCONVENIENCE FEES

- A \$1 per minute Late Pick-Up Fee applies if you pick up past 6:00 pm.
- If your child is state paid, a \$20 fee applies **per child** if your child is registered for camp, and does not attend. Spots are limited. You must cancel registration the Monday prior to camp. Fees must be paid before the child returns to attend camp.

DHHS CHILD CARE SUBSIDY PROGRAM

If you feel you need financial assistance, the Y participates in the Child Care Subsidy program through DHHS. For camp, our provider #03334361, and provider name is "Norfolk Family YMCA".

Things to Know if your child receives state subsidy:

1. You do not have to pay the \$20/week Deposit.
2. You must register in-person at the YMCA on the Registration Day (April 16th). It's first come, first serve; spots fill fast. Online and over-the-phone registrations are not available to you.
3. You cannot turn in forms prior to registration day.
4. You must complete page 2 of the enrollment forms. Be sure you select your Week #s, and check the appropriate box for your plans for After Care.
5. **Your child must plan to attend full-time, 4-5 days per week, or 30+ hours.** We cannot accommodate a part-time schedule, such as 2-3 days per week. Camp has limited spots, and the child must attend regularly, or you may forfeit your spot in remaining weeks.
6. If your child is registered, and is often absent, you may forfeit your spot in remaining weeks. This is because we cannot collect payment from the State of NE. You are allowed only 5 Absent Days per calendar month.
7. If your child is registered, and they do not show up or you fail to cancel the week prior, you will owe a \$20 fee per child, and this is due before the child can return. This is because the spot will now be vacant and we cannot collect billing from the State of NE. **Cancellations are required by the Monday prior to camp (1 full week in advance).**
8. Our Provider # is the same for both the Day Camp and Y Kids Club programs (#03334361). You don't need to make any changes to your Authorization.

RULES OF THE YMCA













- Show respect to yourself, staff, and others. No talking back.
- No running in the rooms, hallways, locker rooms, or pool areas; stay with group at all times.
- Be honest at all times. Always tell the truth and play fair.
- No swearing or other improper language or gestures. Use kind words.
- No sharing food for lunch or snack. And no gum at Day Camp.
- Nothing comes from home – No toys, phones, music, game systems, trading cards, money, etc.
- No hitting, kicking, slapping, pinching, fighting, teasing, or irritating others. Hands to yourself.
- All equipment and other belongings must be treated with respect.
- All safety and discipline rules need to be followed.
- A positive attitude and participation is necessary for everyone to have fun!!

BUS RULES

- Children must remain seated and facing forward while the bus is in motion.
- No standing up, kneeling on seats, turning around, or switching seats.
- Feet and personal items need to remain clear of the aisle.
- No loud voices/noises, yelling, hitting, or putting hands on anyone.
- When the bus comes to railroad tracks, be absolutely quiet. No talking, laughing, or making noises.

HEALTH POLICIES

- Please evaluate the health of the child and adult each day before drop-off and pick-up. Honesty is extremely important to keep everyone safe. If the child or adult feels unwell, please stay home.
- Children are not allowed to attend if they have a temperature of 100°F or higher or contagious illness. A 24 hour time period with no symptoms must pass before your child is allowed back.
- **Medication** - Any medication that must be administered must be given to the staff with a Medication form filled out and signed by the parent. Medicine must be in it's **original bottle** with the dosage clearly marked.

If your child has a Fever		If your child has Thrown Up	
	And their temp is Under 100°F, they are drinking fluids, and they are acting normal, then your child can attend.		And it was more than 24 hours ago and they do not have a fever of 100°F or higher, then your child can attend.
	And their temp is Over 100°F, they must be fever free for 24 hours without the use of medication.		And it was less than 24 hours ago, your child must stay home. Your child can return once vomit free for 24 hours without the use of medication.
If your child has Diarrhea (Poop)		If your child has a Red Eye	
	And they are acting normal and their poop is only slightly loose, then your child can attend.		And the white part of the eye is only a little pink and oozing is clear and watery, they can attend.
	And they have loose or liquid poop, your child must stay home.		And the eye is stuck shut, and/or the oozing is yellow/green, it's likely a form of Pink Eye. Must stay home until they have been on medication for 24 hours.
If your child has a Sore Throat		If your child has Tummy Pain	
	And they do not have a fever, then your child can attend.		And this is the only sign of sickness and they are active, then your child can attend.
	And they have swollen glands, a fever, cough, runny nose, headache, or tummy ache, call your doctor. Must stay home until fever free for 24 hours without the use of medication.		And it's connected to throwing up, loose poop, fever, or child is not themselves, call your doctor. Must stay home until symptom free for 24 hours without the use of medication.

WEATHER

Y staff will be informed of inclement weather and will follow the emergency procedures as needed. We keep parents updated by Text Message Alerts (If you reply, we don't see it until we manually check the website.)

LEAVE IT AT HOME

- Personal items are a huge distraction at camp! Please keep items at home. Staff may keep any item, including jewelry, hats, or phones, safe until pick up. The Y is not responsible for any items that get lost, stolen, traded, given away, misplaced, or broken.
- **Cell phones are NOT allowed at camp**, no exceptions. If you need to check in with your child, you can call the camp phone at anytime.

STAFF QUALIFICATIONS

- All staff are CPR & First Aid Certified. We strive to employ quality staff, such as classroom teachers or support staff, or whom have prior experience or Education department college courses.
- All staff undergo background checks through Central Registry, Criminal Checks through NE State Patrol, Sex Offender Registry, Report of Law Enforcement Contact, and reference checks.
- All staff are legally mandated reporters of child abuse and neglect by the State of Nebraska. If we feel that a child is being harmed in any way, we are required to call Child Protective Services (CPS).

CHILD ABUSE AND NEGLECT

- The Nebraska Child Protective Services (CPS) hotline is 1-800-652-1999.
- The 4 types of child abuse and neglect and their indicators:
 1. Physical Abuse - unexplained bruises, welts, burns, or abrasions that are in various stages of healing, clustered, patterned, or that appear regularly after absences; afraid to go home; wary of adult contact; extreme behaviors
 2. Physical Neglect - consistent hunger, poor hygiene, inappropriate dress; consistent lack of supervision for long period of time; unattended physical problems or medical needs; abandonment; begging, stealing, or hiding food; constant fatigue or falling asleep
 3. Sexual Abuse - difficulty walking or sitting; pain, itching, or bruising in private areas; suspicious underclothing; unusual or sophisticated sexual behavior or knowledge
 4. Emotional Maltreatment - habit disorders (sucking, biting, rocking, etc.); conduct disorders (antisocial, destructive, etc.); neurotic traits (sleep disorders, speech disorders, inhibition of play); psychoneurotic reactions (obsession, compulsions, phobias); behavior extremes; overly adaptive behavior, developmental lags.
- If staff suspect child abuse or neglect, we ask minimal facts questions. If child discloses any information, we ask what happened. If any abuse or neglect is observed, we ask how it happened. We ask when it happened, who did it, and if that person lives with them. We ask non-leading questions. Local law enforcement is contacted if child is in immediate danger. Any suspected abuse or neglect is reported to CPS.



Contact Information for Child Care Licensing

The following information may be of help in gathering information about Child Care Licensing and includes a mailing address, phone numbers and websites.

For questions regarding Child Care Licensing:

800-600-1289 (toll free)
Child Care Licensing
Department of Health and Human Services
PO Box 94986
Lincoln, NE 68509-4986
dhhs.ne.gov/publichealth/Pages/crl_childcare_childcareindex.aspx

Review or request a copy of Child Care Licensing Regulations:

dhhs.ne.gov/Pages/reg_t391.aspx
Phone: 800-600-1289

Request copies of Compliance Reviews, the results of Licensing visits to the provider:

Douglas, Sarpy, Washington, Cass
County—402-595-3343
All other counties—800-600-1289

Review Negative Actions:

dhhs.ne.gov/publichealth/Pages/crl_monthlydisciplinereports.aspx

Make a complaint:

dhhs.ne.gov/publichealth/Pages/crl_childcare_complaints.aspx
Phone: 800-600-1289

Licensed Child Care

You have chosen to use a licensed Child Care provider for the care of your child or children.

According to Nebraska State law (Neb. Rev. Statute 71-1909), the licensing and regulation of Child Care programs exists to protect children and to assist parents in making informed decisions about the enrollment and care of their children in Child Care programs. These licensing and regulatory responsibilities are within the Department of Health and Human Services (DHHS).

Nebraska Law requires anyone providing care to four or more children from different families, for compensation, to be licensed.

The Types of Licensed Child Care in Nebraska are:

Family Child Care Home I
Family Child Care Home II
Preschool
Child Care Center
School-Age Only Center



Roles and Responsibilities of Child Care Licensing

The roles and responsibilities of DHHS Child Care Licensing staff are to ensure that programs are providing proper care for and treatment of the children they serve, and that the care and treatment are consistent with the child's physical well-being, safety, and protection.

Licensed Child Care programs are encouraged to involve you. We urge you to let your Child Care provider's staff know of any concerns. There may be situations where you believe that the program is not responding to your concerns or may not be meeting state licensing standards. This brochure,

Review or request a roster of Licensed Child Care Providers:

dhhs.ne.gov/publichealth/Documents/ChildCareRoster.pdf

Phone: 800-600-1289

Additional Resources

These resources may be of additional interest to you.

Child Abuse/Neglect Hotline
800-652-1999

Child and Adult Care Food Program:
800-731-2266
www.education.ne.gov/NS/cacfp/index.html

Child Care Subsidy (ACCESS Nebraska)
accessnebraska.ne.gov

Nebraska Dept of Health and Human Services
dhhs.ne.gov

Nebraska Immunization
dhhs.ne.gov/publichealth/Pages/immunization_index.aspx

State of Nebraska
nebraska.gov

Child Care Licensing
dhhs.ne.gov/publichealth/Pages/crl_childcare_childcareindex.aspx

National Children's Coalition
teenzen.org

CREG-PAM-24 Rev. 12/14 (99424)
(Previous version should be used)

which Child Care providers are required to share with you, provides information that might be helpful in those situations. Please complete the receipt section and return it to your Child Care provider. This will be kept with your child's records.

Responsibilities of Licensed Child Care Providers

Licensed Child Care providers should:

Comply with child care regulations for their license type at all times.

Obtain and maintain accurate records for children they have in care, such as Enrollment Forms, Parent Information Brochure Receipts, Immunization Records and Medication Administration records.

Keep accurate and up-to-date records for their license and staff members. Report changes to Child Care Licensing and complete required paperwork to reflect changes.

Allow access to their licensed facility when children are in care at all times to parents, Child Care Licensing representatives and the Fire Marshal.

Develop policies and procedures for their programs.

Communicate with families their needs and concerns for the children in care.

Contact Child Care Licensing with any question or concerns they may have.
800-600-1289
402-471-9278 or
dhhs.ne.gov/publichealth/Pages/crl_childcare_childcareindex.aspx

Department of Health & Human Services



Division of Public Health

PARENT INFORMATION BROCHURE FOR LICENSED CHILD CARE



Expectations of Child Care Consumers

As a consumer of Licensed Child Care you should:

Read thoroughly all the information your provider gives you.

Complete your Child's Record Forms and return to your provider before your child begins care. Review and update these records as needed.

Supply your provider with your child's immunization records and keep them updated as needed.

Sign and date the receipt of this Parent Information Brochure for Licensed Child Care and return it to your provider before your child begins care.

Talk to your Child Care provider regularly to address needs and concerns for your children in care and as a parent.

Be informed of the child care regulations. Make sure you know what your licensed child care provider is regulated to do or not do.

Contact Child Care Licensing with any questions or concerns you may have.
800-600-1289
402-471-9278 or
dhhs.ne.gov/publichealth/Pages/crl_childcare_childcareindex.aspx

