



We build strong kids, strong families, strong communities.

**Family YMCA at Tarrytown
2010 PARENT CAMP HANDBOOK**

Welcome to the Family YMCA at Tarrytown's Day Camp where we build strong kids, strong families and strong communities. In this handbook we define our policies as well as your responsibilities. Open communication between staff, parents and children is critical to providing a rewarding camp experience. These policies exist for the safety and well being of children and parents. Please feel free to discuss any concerns or questions with us.

MISSION

The Family YMCA at Tarrytown is dedicated to serving a diverse community and building spirit, mind and body through a unique combination of child care, fitness, cultural and adult male residential programs.

YMCA PROGRAM GOALS

All YMCA programs, while varied, have at their core the drive to meet the following objectives. The participants share opportunities to:

1. Grow personally.
2. Clarify values.
3. Improve personal and family relationships.
4. Appreciate diversity.
5. Become better leaders and supporters.
6. Develop specific skills.
7. Have fun!

In addition, role modeling, values activities and general atmosphere in our camp help focus on the four components of Character Development, namely Caring, Honesty, Respect and Responsibility.

REGISTRATION AND PAYMENTS

All camper accounts are required to be **PAID IN FULL** for each session **PRIOR** to the start of that session. Campers who arrive with unpaid balances will not be allowed to remain in camp. Parents will be asked to pick them up. Payment will be requested at that time. **Registrations must be made no later than 9:30 p.m. on the Monday one-week prior to the start of the session.** All registrations are accepted on a first come basis and space is limited. All campers must have the following forms on file with the camp on the Friday **prior** to their first day of attendance:

1. Registration Form
2. Health Examination & Immunization Form
3. Parent/Counselor Confidential Form
4. Swim Evaluation

REFUNDS

Program fees are refundable only if requests are made at least one month prior to the first day of the session; for classes the YMCA cancels; and for documented medical reasons. Unless the YMCA cancels a class, a \$10.00 processing fee is charge for all refunds. Camp deposits are non-refundable. Memberships are non-refundable.

FINANCIAL AID

The YMCAs policy is that no one is turned away from its programs based upon their ability to pay. Income-qualified families should apply for DSS services through NYS and if additional support is needed you may apply for financial aid at the Member Service Desk. Full deposit is required to secure placement for your child. Participants who have applied to but have not been awarded a scholarship before camp begins are required to pay full price until the scholarship becomes effective. The scholarship is then applied to future payments of camp. We will not adjust previous payments.

DSS Child Care Subsidies Contact: Arlene Leuzzi, Child Care Council of Westchester (914) 761-3456, ext 122.

ARRIVAL

Children should plan to arrive between 8:00 and 9:15 AM at the YMCA. It is important that all campers arrive by 9:00 AM. A parent or guardian must escort all children to their groups each morning. On the first day of each session, please stop at the registration table to meet the Camp Director and finalize any outstanding paperwork or payments.

DISMISSAL

All authorized persons who are able to pick up your child, and are written on the registration form, must sign your child out each day. The regular camp day ends promptly at 6:00 PM. Children can be picked up from their group at that time. If someone is designated to pick up your child, please make sure you identify the name(s) of that person on your child's Registration Form. Please notify the Camp Director in writing if your child is to be picked up early or by someone not listed on the registration form. **The YMCA will not allow any child to leave camp with an unauthorized person unless specified by the parent/guardian.** YMCA staff will not release a child to any person who is under the influence of drugs/alcohol. The Family YMCA at Tarrytown may request picture identification from anyone who is authorized to pick up your child.

LATE FEES

Please plan to pick up your child(ren) on time. Late fees will be in effect at 6:00 PM. Parents/guardians will be charged five dollars (\$5.00) every 5 minutes. **Late payments are due at that time. Please leave your payment at the Members Service Desk.**

ABSENCE/LATE ARRIVAL/EARLY DISMISSAL

Please inform the Camp Director and or Unit Leader by 9:00 AM if your child will be late or will not be coming to camp that day by calling 631-4807 ext. 26. To ensure your child's safety, our staff may contact you when your child is absent from camp without prior notification. Please inform the Camp Director and/or Unit Leader if you are planning to pick up your child early on any given day.

CAMP RULES AND DISCIPLINE PROCEDURES

The YMCA asks that you support our efforts to maintain a safe environment for your child. "Safe" implies not only a cushion from physical harm, but also the emotional security required for personal growth. Campers will not be asked to follow a long list of "Don'ts" (although the usual list will apply: don't hit, steal, curse, etc.). We will, however, ask them to follow three simple "Do's":

1. **Do Respect others** (their wishes, needs, belongings, bodies, etc.) refrain from activity or behavior that hurts another in any way.
2. **Do be Responsible** (for your behavior, belongings, for knowing the rules, etc.)
3. **Do Stay with your Counselor or Buddy** (The Buddy System is an effective supervision technique used by our staff.)

Minor infractions of these rules will be dealt with in the group and will probably not involve parents unless you specifically ask your child's counselor about behavior. A camp administrator, via a telephone call to parents or guardians, will address repeated or purposeful infractions.

For most behavior issues, administrators will make up to three telephone calls before serious action is taken. The third phone call will result in an automatic two-day suspension from the camp program. Upon a camper's return from suspension, any subsequent need for a call home will result in automatic dismissal from camp

WITHOUT A REFUND.

In the most serious cases, usually when a camper endangers the welfare of themselves or others, immediate expulsion may be necessary. Please instruct your camper that hitting, spitting, kicking, biting, other aggressive behaviors and running away will not be tolerated.

Sometimes families have specific concerns regarding their child's behavior, or are working in the home and school to modify some behaviors. Our camp staff welcomes the opportunity to support these efforts. Please apprise a camp administrator of your specific needs and we will be happy to include your child's counselor(s) in a discussion with you regarding special techniques or concerns.

ILLNESS AND EMERGENCY PROCEDURES

On the camp registration form, there is a place for an emergency contact. Please write somebody other than yourself as the emergency contact; we will always try to contact the parent first. Parents/Guardians are also asked to update their records on any change in home, work and emergency contact telephone numbers as soon as they occur.

Please notify the YMCA if your child is diagnosed with a communicable disease so that we may determine what date your child may reasonably be expected to return. A physician's written permission to return to camp may be required.

If a camper becomes ill during the camp day and is unable to participate in the activities, the parent/guardian will be notified. If a camper is hurt, a member of the day camp staff or an authorized person will administer immediate first aid. If the situation should require immediate medical attention, the Camp Director or YMCA staff will attempt to contact and inform the parent/guardian as soon as circumstances permit. In the event that the parent/guardian cannot be reached, the emergency contact person will be called. The Camp Director or another staff member will call the designated physician and/or local emergency unit for treatment and /or transportation to a hospital. A staff member will accompany the camper to the hospital and stay until the parent/guardian arrives and signs the camper into their custody.

HEALTH FORMS AND MEDICATION

Campers **will not be admitted** to camp without completed registration and health information forms. **These should be completed and submitted to the YMCA upon registration, prior to the first day of camp.**

When possible, please administer of all medications at home. Our staff cannot administer medicine to any child .

LUNCH AND SNACK

Please bring a lunch everyday and pack it in a brown bag. Lunch boxes are discouraged, as it is easier for everyone if your child can throw away their lunch bag when finished rather than have to carry a lunch box to and from activities. Clearly label your child's **FULL NAME** on all lunches. Lunches should include a beverage and a snack. Please do not send extra money for the vending machines, they are off limits. We will provide nutritious snacks during the course of the day.

SWIMMING INFORMATION

The YMCA offers swim lessons that incorporate the latest research on motor control, motor learning and child development. Quality will be ensured through guidelines and constant evaluation. Instructions are delivered in a student-centered, caring atmosphere with well-trained instructors who give personalized attention. Lessons are developmentally appropriate and designed to quickly and affectively teach skills.

YMCA swim lessons are by age levels. Preschool lessons are for ages three to five, and Youth lessons are for ages six to eleven.

Preschool Level

This is a child's first experience in the pool without parental assistance. Campers are taught the basic skills that are the building blocks of swimming. Campers also learn about pool safety, boating safety and the use of personal floatation devices. Class participants are divided into skill levels, and class size is such that the instructor can provide children with individual attention. The YMCA levels are Pike, Eel, Ray and Starfish.

Youth Level

Each skill level builds upon the preceding level; with seven levels covering all the strokes, diving fundamentals and safety skills. The YMCA levels are Polliwog, Guppy, Minnow, Fish, Flying Fish, Shark and Porpoise.

Evaluations are given upon a parents request. Swimming is a major part of the camp day and all campers are encouraged to participate. Exemptions will be made only for a medical reason. Please send two towels and two bathing suits regardless of the weather. Please write campers full names on all items. We wish to provide all children with the opportunity to become better swimmers. All campers are required to participate in swim lessons in order to participate in recreational swims.

Please provide your child with a plastic bag for the wet towel and bathing suit.

Swim caps and goggles are recommended for all children. For your convenience, caps and goggles are sold at the YMCA. Please purchase your cap or goggles before your child's first day. Staff may not buy them for you.

All campers are required to have a swimming evaluation completed before their first day of camp. Please submit the evaluation slip with your child's registration material. Evaluations are offered on Mondays, Wednesdays and Fridays 4:45pm-5:15pm.

PERSONAL PROPERTY

- > The YMCA discourages campers from bringing personal items from home but there may be occasions when children are asked to bring an item from home. This item must be pre-approved by the child's unit leader and appropriate to bring to camp.
- > The YMCA is not responsible for the personal property of campers.
- > Please label all personal items. This includes towels, swimsuits, socks, shirts - EVERYTHING. (All unclaimed items will be placed in the lost and found).
- > All Tiny Tots and Young Kinder Campers are encouraged to keep an extra set of clothing at the YMCA.

PERSONAL INFORMATION

Personal information concerning campers and staff will not be released without authorization of the parties involved. This includes verbal communications as well as written records. Personal information includes, but is not restricted to, medical examination reports, evaluations, personal data and records.

ADJUSTMENT

If this is your child's first day camp experience (and your first real separation from him/her), you may both feel a combination of excitement, anxiety and anticipation. To ease the transition into day camp please do not leave camp without saying good-bye to your child and be prompt in picking up your child, especially during the first few days. "Slipping away" could destroy their sense of trust and could lead to problems at home and in camp. Sometimes bringing a favorite or familiar object from home during the adjustment period helps to make the separation period easier. Each child is different and the periods needed for adjustment are also different for each child and parent.

BIRTHDAYS

Birthdays are a special event to young children. It is an occasion they like to share with friends. Celebrating your child's birthday in camp should be planned in advance with your child's Unit Leader. Parents may send in a special snack and are invited to join the campers. If you plan to have a party at home and do not plan to invite your child's entire camp group, please confine your arrangements to after-camp hours, as feelings may get hurt.

TRIPS

We have planned out several trips for the summer. Trip itineraries will be handed out with dates, times, and destinations.

SPENDING MONEY

We do not encourage children to bring money to camp. The children are not allowed to use the vending machines in our lower lobby.

PARENTAL VISITATIONS/FAMILY FUN DAY

Parents are welcome to visit the camp at any time. Every Wednesday parents are welcome to observe their children during instructional and/or recreational swim. Please pick up a camp schedule on your child's first day to see specific swim times. Specific details concerning our Family Fun Day will be available at the start of camp. All campers and their families are welcome.

TAXES

For tax purposes, please keep all receipts. The YMCA **will not** be responsible for written documentation beyond original receipts.

Our tax identification number is 13-1740516.

COMMUNICATIONS

The YMCA's main number is (914) 631-4807. Voice-mail messages can be left for the Camp Director between 6:00 AM and 9:45 PM, Monday through Friday, at ext. 26. Written messages can be taken for Camp Unit Leaders and Counselors during the camp day.

If anything unusual or new is happening in your child's life, our staff will be able to better serve your child's needs if we are kept aware of the situation. With this information, the staff will be better able to foster your child's emotional and social development. If you wish to speak to staff about something that does not immediately involve your child's day in camp, it would be best to leave a message for your child's Unit Leader or the Camp Director. He/She will call you to arrange an appointment, if necessary. The primary responsibility of the staff is the well being of **all** the children, so it may be hard for them to give you their full attention if you approach them while the children are arriving at camp or during camp hours.

PROPER ATTIRE

All children should be sent to camp in comfortable clothing and sneakers. Open toe sandals, flip flops, crocs or sling back shoes are not permitted in camp.



We build strong kids, strong families, strong communities.

Family YMCA at Tarrytown, 62 Main Street, Tarrytown, NY 10591, (914) 631-4807

SUMMER CAMP REGISTRATION FORM 2010

Tiny Tots Camp or Kinder Camp (please circle)

Camper's Name: _____

Grade in Fall _____ Age _____

Date of Birth _____ Sex _____

Address _____ Apt _____

City _____ State _____ Zip _____

E-mail Address: _____
Important for parent/camp Communication

| Name | Home Phone # | Work Phone # | Cell Phone # |
|-------------|--------------|--------------|--------------|
| Mother: | | | |
| Occupation: | | | |
| Father: | | | |
| Occupation: | | | |
| Guardian: | | | |
| Occupation: | | | |

Emergency Contacts: Persons to be notified in case of illness or accident. This must be someone other than you. We will try you first.

| Name | Relationship | Phone # |
|------|--------------|---------|
| | | |
| | | |

List all persons permitted to remove your child from the program:
 Mother: Y or N Father: Y or N (*Circle*)

| Name | Relationship | Phone # |
|------|--------------|---------|
| | | |
| | | |
| | | |

**Your child will not be released to anyone else unless you notify the YMCA by phone or in writing.*

****Please read and sign the back****

Child's Name: _____

Parent Statement of Understanding

I, the undersigned, give permission for my child to participate in all activities planned for the days my child attends the Family YMCA at Tarrytown Camp Program. I give my child permission to participate in supervised out-of-facility trips, including walking trips.

I understand that my child will not be able to participate in the program until I have turned in a signed physical examination. The exam must have been taken within twelve months and all immunizations must be up-to-date.

In case of an emergency, I understand that every effort will be made to contact parents or guardians of my child. In the event that I can not be reached, I hereby give permission to the physician selected by the YMCA staff to care for my child.

I hereby give my consent to the Family YMCA at Tarrytown, and to such other person(s) as the Family YMCA at Tarrytown may designate, to use my name, voice, statements, and portrait or picture (motion or still) for advertising purposes, for purposes of trade, or for any lawful purpose whatever, in any media now known or hereafter developed.

I understand that I am not to leave my child at the YMCA program site unless a YMCA Staff Person is there to receive and supervise my child.

I understand that my child will not be able to leave the program with an unauthorized person. Any person authorized to pick up my child must be listed on the registration form, or must be arranged separately with the Director of the program.

I understand that if any person arrives to pick up my child who appears to be under the influence of drugs or alcohol, for the child's safety, staff may have no recourse but to contact the police.

I understand that state law requires the YMCA to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

I have read and fully understand the statement above and the policies detailed in the Parent Handbook.

Parent's Name

Parent's Signature

Date

Family YMCA at Tarrytown
62 Main Street
Tarrytown, NY 10591
(914) 631-4807

Parent/Counselor Confidential Form

Instructions- This form is designed to improve the communication between camp & the families we serve. Please take a moment to complete & return with your registration form and child's immunization record.

Camper's name _____ Nickname _____

D.O.B. _____ Grade _____

Camp Sessions (circle) 1 2 3 4 5 6 7 8 9

Home Phone _____ Cell Phone _____

With whom does the child live? _____

What does he/she like to do best? _____

Special talents or abilities: _____

Hobbies and/or special interest: _____

If there is some activity your child wants particularly to do at camp, please name it: _____

How does your child get along with others of the same age? _____

Does your child have any serious fears? _____

Please list three objectives you have for your child at day camp:

1. _____

2. _____

3. _____

Any other information you wish to provide that we may be in a better position to understand your child and his/her needs: _____

How did you here about our camp? _____

YDAY CAMPTM

We build strong kids, strong families, strong communities.

Family YMCA at Tarrytown
62 Main Street, Tarrytown, NY 10591
(914) 631-4807

Camp Medical Form

Child's Name: _____ DOB: _____
Date of Exam: _____

Immunization

If one or more of the required medical immunizations is deemed detrimental to this child's health, attach certificate specifying which immunizations.

Include all dates

| Name | Date | Date | Date | Date | Date |
|------------|------|------|------|------|------|
| DPT | | | | | |
| Oral Polio | | | | | |
| Hib | | | | | |
| Hep | | | | | |
| MMR | | | | | |
| Chkn Pox | | | | | |
| Other | | | | | |

Tests

Tuberculin Test: ___/___/___ ___Pos ___Neg
Date

If positive please attach documented medical treatment and follow-up.

Lead Screening: ___/___/___

Health Questions

Are there allergies? _____

Is medication taken regularly? _____

Is a special diet required? _____

Are there any hearing, visual, dental conditions that require special attention? _____

Are there any medical or developmental conditions requiring special attention? _____

Comments: _____

On the basis of my findings as indicated above and on my knowledge of the above named child, I find that (s)he is free from contagious and communicable disease ___YES ___NO and is able to participate in Nursery School ___YES ___NO.

Signature of Examiner

Address

Name (Print)

Title

Phone

Date