

HELLO

Adventure Camp 2010...



...is a day camp for ages 5 – 14 held at Quaddick State Park and sponsored by Thompson Recreation. Our goal is to engage youth in positive activities and events that will support their physical, emotional and social growth in a safe, fun, encouraging environment. Activities include arts & crafts, swimming, games, sports, performing arts shows, talent shows, bus trips and special events to name a few.

The camp runs for 8 weeks, June 28 - August 20, 2010 (no camp July 5) Mon.-Fri., 9:00 a.m. to 4:00 p.m.. Extended hours are also available. Before camp hours are 7:15 a.m. until the bus picks children up at Library/Community Center to bring them to camp. After Camp hours run the time the bus drops campers off at the Library Community Center until 5:30 p.m. Camp is held rain or shine.

(In case of inclement weather, camp will be held at the Thompson Middle School. An announcement will be made on Ch. 3 and 4 and on WINY - set your dial at 1350 am. You may also call the Recreation Office for a recorded message. If weather becomes inclement while we are at camp, campers will be transported by school bus to the Thompson Middle School.)

The paperwork you will need to return is on the pages which follow.

Please use this as a checklist in completing this packet so all materials are returned.

For each camper you will need to fill out:

- Registration Form (p. 5)
- Camp Cost Worksheet (not necessary if you choose to pay weekly) (p. 6)
- Hospital Medical Information (p. 7)
- Release Forms for Child (p. 8)
- A copy of the child's annual physical dated within 36 months of the first day of camp (Include copy every year)
- If your child must take medication (over the counter or prescription, including epi-pen or inhaler) during camp, the medication authorization form must be completed by your physician. (Forms available on-line or at office)
- If your child has a prescribed epi-pen, there must also be a Emergency Treatment Plan form completed by a physician (Form available on-line or at our office.)

REGISTRATION

Registration begins May 3, 2010 from 9 a.m. to 2 p.m., Monday through Friday, in the Recreation Office at Town Hall. Beginning June 14, 2010 registration hours are from noon to 5:30 p.m.

Registration can also be made by mailing forms to TRC, P.O. Box 899, North Grosvenordale, CT 06255.

Personal checks, money orders, and cash are accepted. If a check is returned to us by the bank there will be a \$20 service fee and all future payments must be made in cash or money order.

FEES

Camp Fees include one or more of the following:

- A. Basic camp fee
- B. Field trip fee
- C. Before and After Care fee (optional)
- D. T-shirt fee (worn on field trip days - optional)

These fees are described on the following page.

FEES

There are 4 possible fee areas: A. Basic camp fees, B. Field trips, C. Before and after care, and D. Camp t-shirt.
Rates are based on current transportation costs and are subject to change.

A. Basic Camp fees: Based on two factors: the number of weeks a child will be attending camp and whether you choose to pay the fees weekly or to make two payments of 50% of the total camp costs. **If you wish to pre-pay at the discounted rate, proceed to #1 below. If you will pay on a weekly basis, please proceed to #2 below.**

New this year: 10% discount on 3rd child or more. (Discount on Basic Camp fees only.)

1. PRE-PAY - EARLY BIRD PRICE Register and pay a 50% deposit by June 11, 2010 for the total weeks your child is attending to receive the early bird discount. See the charts below for the rates. After June 14, if you wish to register for multiple weeks at the reduced rate, you must pay a late fee of \$10 per week of camp. The final installment is due by July 2, 2010. Beginning July 3, the late fee on the balance is an additional \$10 per week of camp.

<u>a. Full weeks at camp (4 or 5 days)</u>	<u>Thompson Resident Rate</u>	<u>Non-resident Rate</u>
6-7-8 weeks	\$79 per week	\$89 per week
4-5 weeks	\$84 per week	\$94 per week
2-3 weeks	\$89 per week	\$99 per week

b. Partial weeks at camp (2 or 3 days):

<u>Thompson Resident</u>	<u>6-8 weeks</u>	<u>4-5 weeks</u>	<u>2-3 weeks</u>
2 days per week	\$ 43	\$ 48	\$ 53
3 days per week	\$ 58	\$ 63	\$ 68
<u>Non-resident</u>			
2 days per week	\$ 53	\$ 58	\$ 63
3 days per week	\$ 68	\$ 73	\$ 78

2. PAY ON A WEEKLY BASIS - If you wish to pay weekly, each payment is due by the Thursday before the week attending. Please be sure to add field trip cost (if your child will be attending on field trip days) and any extended hours cost (when pertinent) to your payment.

<u>Rate</u>	<u>4-5 days</u>	<u>3 days</u>	<u>2 days</u>
Thompson Resident	\$ 99	\$ 76	\$ 66
Non -residents	\$ 109	\$ 86	\$ 76

B. Weekly Field Trips: Generally held on Wednesdays. If your child attends camp on a field trip day, these costs must be added to the total. Page 3 lists field trip destinations dates and fees.

C. Extended Hours: If you need extended hours prior to 9 am or after 4 pm, it is available for an additional fee. Drop off at Library/Community Center beginning at 7:15 a.m. and pick-up at Library/Community Center by 5:30 p.m.

Fee: Daily Before <u>or</u> After	Daily Before <u>and</u> After
\$3 per day	\$5 per day

D. Camp T-shirts: We suggest that all campers wear the camp t-shirt on all field trips. The cost of the shirt is \$7. Note: If you purchased a t-shirt last year, you do not need to purchase a new one - your child may wear that on field trips.

E. Camperships/Financial Aid: Contact TEEG at 923-3458 for scholarship information. Contact Care4Kids at 888/214-5437 for financial aid.

REFUND POLICY

CAMP: Full refunds, minus a \$25 processing fee, will be granted up to and including the very first day your child attends camp. You must notify us within 24 hours in order to qualify for this refund.

CAMP FIELD TRIPS: If your child misses a field trip for which they are registered, a partial refund (equal to the entrance fee) will be refunded. Transportation costs will not be refunded.

Thompson Recreation Adventure Camp 2010

Field Trips/Enrichment Programs

There are field trips each Wednesday. If your child does not wish to participate in a field trip, please plan to make alternate child care arrangements on those days.

Groups are: Age 5-6/Red Age 7-8/Blue Age 9-10/Green Age 11-13/Yellow Age 13-14/CIT

<u>Week of Camp</u>	<u>Day/Date</u>	<u>Group</u>	<u>Trip/Special Event</u>	<u>Cost</u>
1) June 30 - July 2	Wed., June 30	All	Monster Mini Golf	\$12
2) July 6 - 9	Wed., July 7	Red/Blue Green/Yellow/CIT	Southwick Animal Park R.I. Rock Gym	\$15 \$18
	Fri. July 9	Red/Blue	Creative Games @ Camp	Free
3) July 12 - 16	Mon., July 12	Girls age 8-12	Girl Scouts @ Camp	Free
	Wed., July 14	Red/Blue Green/Yellow/CIT	Dinosaur Park & Splashpad * Breezy Waterslides (rain date 7/15)	\$22 \$19
	Thurs., July 15	All	Crazy Craig (Juggler)	Free
4) July 19 - 23	Mon., July 19	Girls age 8 - 12	Girl Scouts @ Camp	Free
	Wed., July 21	All	Mystic Seaport	\$22
	Fri. July 23	Green/Yellow	Creative Games @ Camp	Free
5) July 26 - 30	Mon., July 26	Girls age 8 - 12	Girl Scouts @ Camp	Free
	Wed., July 28	All	Coco Key Waterpark *	\$28
	Thurs., July 29	All	Comedy Magic by Joe	Free
6) Aug 2 - 6	Mon., Aug. 2	Girls age 8 - 12	Girl Scouts @ Camp	Free
	Wed., Aug. 4	All	Trampoline Place	\$13
	Thurs., July 5	All	Vanilla Swirl Comedy Variety Show	Free
	Fri. Aug. 6	Red/Blue	Creative Games @ Camp	Free
7) Aug 9 - 13	Mon., Aug. 9	Girls age 8 - 12	Girl Scouts @ Camp	Free
	Tues., Aug. 10	Red/Blue	YMCA Camp Trip	\$12
	Wed., Aug. 11	All	Campardy (at Middle School)	Free
	Thurs., Aug. 12	Green/Yellow/CIT	YMCA Camp Trip	\$12
8) Aug 16 - 20	Wed., Aug. 18	Red/Blue	Pump It Up Indoor Playscape with pizza lunch	\$13
		Green/Yellow/CIT	Lake Compounce **	\$33
	Fri. Aug. 20	All	Creative Games @ Camp	Free

* = Water shoes or flip flops need to be packed for these trip

** = Late Return for the Lake Compounce trip of 7 p.m. to the middle school

TRANSPORTATION: Bus Transportation is provided within Thompson only. Depending on where you live, pick up is between 8 and 9 a.m. and drop off is between 4 and 5 p.m.

If you will be dropping off your child at camp, drop-off is at Base Camp **beginning at 9:00 a.m.**

If you will be picking your child up at camp at the end of the day, pick-up is at Base Camp no later than 4:00 p.m. If your child is not picked up by 4:00 p.m., they will be placed on Bus C to Thompson Library/Community Center..

When camp is located at Thompson Middle School, both drop-off and pick-up are in the cafeteria (base camp location). Call the Recreation Office at 860-923-9440 with any transportation questions.

Bus Routes

Bus times are estimates and will change based on the number of campers on the route. Bus routes subject to change.

When Camp is at Quaddick State Park

Morning Pick-up:

Bus Route A

Bus departs bus garage at 8 a.m., turns left onto Buckley Hill Road to left on Rawson. To right onto Riverside Drive (Rte 12) at 8:05 a.m. It follows a right onto Route 12 North. It continues on Rte. 12N, then takes a left onto Andersen Road. Then turns left onto Corttiss Road and follows to Quinebaug Road. The bus takes a right onto Quinebaug Road. There will be a stop at The VFW Post (8:18 a.m.). Bus continues on Rte. 131 to right onto Walker Road (8:20), to left on Old Turnpike Road (Route 197) (8:22 a.m.) to left onto Rte. 131 (8:26 a.m.). Right onto Fabyan Woodstock Road (8:30). After Bridge, takes left onto Fabyan Road (8:35 a.m.). Follow to right onto Blackmer Downs, follows to end turns around back to left onto Fabyan Rd to left onto Fabyan Woodstock Road. Bus then takes left onto Hagstrom Road, follows to the end and takes a right on to Fabyan Road. Follow to left at Red Bridge Road, stop at Mountain Hill Road (8:40 a.m.). First Street and then right onto Reardon Road, follow to Blain Road. Right onto Rte. 12S to left onto Rte. 200 to Quaddick Road (8:45 a.m.) to Park.

Bus Route B

Bus departs garage at 8 a.m. turns left onto Buckley Hill Road, left onto Murolo Road, continues to right onto Route 12 N. Continues on Route 12 N and follows to Thatcher Road, turns and goes back to Rte. 12 S to Park Street to Rte. 200 (8:08 a.m.). Left onto Pasay Road to Pompeo Road to straight to Wagher road (8:15 a.m.), to right on Denis Drive to right onto Labby Road (8:20 a.m.) to left on Wilsonville Road. It will follow Wilsonville Road to left on Thompson Road (Rte. 193) (8:31 a.m.) to left on Sand Dam Road. There will be a stop at the intersection of Sand Dam/Jeziarski Lane (8:33 a.m.). The bus takes a left onto Indian Inn Rd, left on Elaine St. and left onto Bonnette Ave and back to Sand Dam Rd.. The bus will stop at Sand Dam/Oakwood (8:36 a.m.), Sand Dam/Orchard Drive (8:37 a.m.). The bus will turn right onto Porter Plain Road, right onto Babula, and turn around at Center Street. Back out to Porter Plain with stops at either end of Emil Drive (8:45 a.m.). It will then take a left on Thompson Road and follow to Brandy Hill Road (8:50) to left on Quaddick Town Farm Road (8:55 a.m.) to park.

Bus Route C

Bus departs bus garage at 8 a.m. turns left on Buckley Hill Road all the way to the end. Turns left onto Riverside Drive to Lib/Com (8:10 a.m.). Takes right out of Lib/Com onto Riverside Drive. Follow Riverside to light at Buster's. Turns right onto West Thompson Road. Stops at the West Thompson Fire Station. Turn left out of fire station onto West Thompson Road back to the light at Buster's. Goes straight across to Thompson Road (Rt193). Stops at Congregational church (8:30 a.m.) Follow Thompson Road, bear right onto E. Thompson Road pass the Speedway. Take a left onto Lehtinen Road, follow to end and turn around. Turn left onto E. Thompson Road, stays right at fork to continue on E. Thompson Road to Fire House (8:45 a.m.). Takes a right onto New Road to Left onto Quaddick Town Farm. Follows to Quaddick State Park (8:55 a.m.).

Afternoon Drop-off: reverse the above routes to estimate times.

When Camp is at Thompson Middle School (inclement weather)

Morning Pick Up: Same as above

Afternoon Drop-off: All buses will drop off in the same order as the morning pick-up so your times will change from days when camp is at Quaddick State Park..

Thompson Recreation Adventure Camp 2010 Registration Form

•Please list only one child per form •Copy forms as needed •Use black or blue ink only •Please print •Please complete in full

Section I General Information

Child's Name _____ Age (as of June 28, 2010) _____

Street Address _____ Town _____ State _____ Zip _____

Mailing Address (if different from street address) _____

Please circle the group which corresponds to your child's age:

(Age 5-6) Red (Age 7-8) Blue (Age 9-10) Green (Age 11-13) Yellow (Age 13-14) Counselor in Training/CIT (Age 15+) Volunteer

Parent/Guardian # 1 Name _____ E-mail _____

Home Phone # _____ Cell # _____ Work # _____

Parent/Guardian #2 Name _____ E-mail _____

Home Phone # _____ Cell # _____ Work # _____

Other Emergency Contact _____ Their Telephone # _____

Section II Transportation within Thompson only (See bus routes on page 4.)

Note: If your child is enrolled in extended care (am or pm) they will be on bus C.

In the morning my child will (*please check one*): be parent drop-off _____ take the bus _____

AM Bus Route: (circle one) A B C

Address of bus pickup if different than home address: _____

In the afternoon my child will (*please check one*): be parent pick-up _____ will take the bus _____

PM Bus Route: (circle one) A B C

Address of bus drop-off if different than home address: _____

Section III Health

Does your child have any medical issues we need to be aware of? Yes _____ No _____

Describe _____

Does your child use an inhaler or an epi-pen? Yes _____ No _____

(If yes, there must be one available for him/her at camp. These require the completion of additional form(s) by your child's physician: 1. "Medication Authorization" and 2. "Emergency Treatment Form". Forms available at www.thompsonrec.org and in our office at Thompson Town Hall.)

Will your child need medication (prescription or over-the-counter) during camp hours? Yes _____ No _____

(If yes, this requires completion of another form to be completed by your child's physician "Medication Authorization". It is available at www.thompsonrec.org and in our office at Town Hall. Parent must deliver the completed form and medication to Thompson Recreation prior to your child being allowed to attend camp. Medication must be in original container with child's name, medicine dosage on it and must be current (not expired). No medication will be administered without this medical authorization. Campers should bring no medication, over the counter or prescription, to camp. No child will be allowed to attend camp without prescribed inhaler or epi-pen and appropriate paperwork.)

Section V Release

I, the undersigned, hereby give my son/daughter permission to participate in all activities in the 2010 Adventure Camp at Quaddick State Park, including field trips. In addition, I will hold harmless the Town of Thompson, the Recreation Commission, its members, agents, directors, and employees for any liabilities that may occur as a result of participation in said program. Photos of my child may be used for promotional purposes. I understand that full refunds minus a \$25 processing fee will be granted up to and including the first day my child attends camp. I understand there is a \$20 fee for checks returned to TRC by the bank and all payments thereafter must be made in cash. I understand camp rates are based on current transportation costs and are subject to change. I give permission to treat my child for medical emergency if I am unavailable. I understand there is a late fee I must pay if payment is not made on time.

Parent/Guardian Signature

Date

Section VI Payment Chose one of the following options:

1. I will pay for camp on a weekly basis. These payments are due by the Thursday preceding the week of camp. There is no need to complete the worksheet below.
2. I choose to pre-pay and save. Please complete the worksheet below and submit with registration and 50% payment by June 11. After the 11th, this option is an additional \$10 per week. The balance is due by July 1. The late fee on the balance is an additional \$10 per week of camp

<p>Child's Name _____ Group - Circle One: Red (age 5-6) Blue (age 7-8) Green (age 9-10) Yellow (age 11-13) CIT (age 13-14)</p> <p>Basic Camp Fee</p> <p>The section below covers basic camp days.</p> <p>The 1st column lists the weeks of camp.</p> <p>In the 2nd column, write the number of days your child will attend each week you checked off.</p> <p>In the 3rd column, circle the actual days your child will attend each week.</p> <p>In the 4th column, write in the basic fees using the fee schedule on page 2.</p> <p>Note: If registering a third, fourth, etc child, please deduct 10% from the basic camp fee subtotal.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Camp Week</th> <th># of Days (2, 3, 4, 5)</th> <th>Which days? 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Field trips are on Wednesdays.</p> <p>The 1st column lists the date of the field trip.</p> <p>In the 2nd column, place a check mark next to the date your child will attend the field trip.</p> <p>In the 3rd column, write the cost of your child's field trip (taken from the field trip schedule on page 3) for each week you checked off.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Field Trips Attending (✓) please check</th> <th>Fee</th> </tr> </thead> <tbody> <tr><td>June 30</td><td>_____</td></tr> <tr><td>July 7</td><td>_____</td></tr> <tr><td>July 14</td><td>_____</td></tr> <tr><td>July 21</td><td>_____</td></tr> <tr><td>July 28</td><td>_____</td></tr> <tr><td>Aug. 4</td><td>_____</td></tr> <tr><td>Aug. 10/12</td><td>_____</td></tr> <tr><td>Aug. 18</td><td>_____</td></tr> <tr><td colspan="2">Total Field Trip Fee \$</td><td>_____</td></tr> </tbody> </table>	Field Trips Attending (✓) please check	Fee	June 30	_____	July 7	_____	July 14	_____	July 21	_____	July 28	_____	Aug. 4	_____	Aug. 10/12	_____	Aug. 18	_____	Total Field Trip Fee \$		_____	<p>Extended Hours</p> <p>The section below cover extended hours before and after regular camp hours.</p> <p>The 1st column list the weeks of camp.</p> <p>In the 2nd column, place a check mark next to the weeks your child will require extended hours before camp (beginning at 7:15 a.m.).</p> <p>In the 3rd column, place a check mark next to the weeks your child will require extended hours after camp (until 5:30 p.m.).</p> <p>In the 4th column, write the cost for your child's extended hours for each week you checked off: \$3/day for before or after; \$5/day for both</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Camp Week</th> <th>Before Camp (✓)</th> <th>After Camp (✓)</th> <th>Extended Hours Fee</th> </tr> </thead> <tbody> <tr><td>June 28</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>July 6 (Tu)</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>July 12</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>July 19</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>July 26</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>Aug. 2</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>Aug. 9</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>Aug. 16</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td colspan="3">Total Extended Hours Fee \$</td><td>_____</td></tr> </tbody> </table>	Camp Week	Before Camp (✓)	After Camp (✓)	Extended Hours Fee	June 28	_____	_____	_____	July 6 (Tu)	_____	_____	_____	July 12	_____	_____	_____	July 19	_____	_____	_____	July 26	_____	_____	_____	Aug. 2	_____	_____	_____	Aug. 9	_____	_____	_____	Aug. 16	_____	_____	_____	Total Extended Hours Fee \$			_____
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Now add the totals from each column above for your total camp cost. (Basic Camp + Field Trips + Extended Hours + T-shirt)

Total Camp Cost \$ _____ Amount Paid \$ _____ Balance Due by July 1 \$ _____

Thompson Recreation

HOSPITAL MEDICAL INFORMATION

Attention Parents/Legal Guardians

Did you know that if your child has an accident or illness in your absence, except in cases of injuries which threaten life or limb, patients under 18 years of age must have a parent or legal guardian sign a consent form before treatment can be given in a hospital emergency room? You can save time and the concern of the person to whom you entrust the care of your child by completing and signing an authorization for examination and treatment of your child should this be necessary during your absence. It is important to include any allergy, illness history and medications that your child is taking as well as the name of the child's physician and last tetanus immunization. The emergency department staff at Day Kimball Hospital has devised a consent form for you to use. Just complete the form below and leave it with your sitter. Additional forms are available in the emergency department.

DAY KIMBALL HOSPITAL EMERGENCY DEPARTMENT
PATIENT CONSENT FORM

FULL NAME (PATIENT): _____ AGE: _____

ADDRESS(HOME): _____ D.O.B.: _____

TELEPHONE #: _____ RELIGION: _____

PHONE # (CELL): _____ PHONE# (WORK): _____

SOCIAL SECURITY # (PARENT OR GUARDIAN): _____ AUTO LICENSE: _____

CHILD'S SOCIAL SECURITY #: _____

NAME (PARENT OR GUARDIAN): _____

EMPLOYER (PARENT OR GUARDIAN): _____

EMPLOYER ADDRESS: _____

GUARANTOR (NAME OF PERSON CARRYING INSURANCE): _____

FAMILY MEDICAL DOCTOR: _____

CURRENT MEDICATIONS - Any medications that the child is taking, regardless of whether they will be taken at camp.:
_____ Will medication be taken at Camp: Yes No

ALLERGIES TO MEDICATIONS: _____

PERTINENT MEDICAL HISTORY: _____

LAST TETANUS IMMUNIZATION: _____

In the event your efforts to reach me are unsuccessful, I, parent or legal guardian, consent to Emergency evaluation, treatment and/or admission to Day Kimball Hospital as determined by physician in charge of the care of the above named person.

Dated: _____ Signature: _____

Consent Expires: _____

IT IS VITAL THAT YOU COMPLETE THE ABOVE FORM IN ITS ENTIRETY. PLEASE LIST ANY AND ALL ALLERGIES OR MEDICAL CONDITIONS THAT THE STAFF OF THE CAMP SHOULD BE AWARE OF.

NOTE: Please include a copy of a physical examination health status certification completed by a physician dated within 36 months prior to the first day of camp. A physical exam report, including a complete immunization history, that is required for school purposes may be used. A new copy must be provided each year.

Thompson Recreation *Adventure Camp 2010*

Child's Name _____ Date of Birth _____

Parent/Guardian Names _____

Authorization for Release of a Child

Dear Parent/Guardian,

The first priority of our program is your child's safety. Please complete the release form below for our records. For your child's safety, he/she will be released only to parent/guardian listed in this packet and to those named below. When the person arrives to pick up your child, he/she must show a picture I.D. to the staff on duty. Please include anyone who you may need to pick your child up in an emergency situation and make sure they understand the pick-up procedure and are prepared to present a picture I.D. In addition to the parent/guardian(s) listed above, the following people have my permission to pick up my child from Thompson Recreation's Adventure Camp 2010.

Name	Relationship to child	Address	Phone
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Parent/Guardian Signature _____

_____ Date

Authorization for the Administration of Non-Prescription Topical Products by Camp Personnel

Dear Parent or Guardian,

Re: sunscreen/insect repellent policy

Instead of requiring each parent to supply sunscreen and/or insect repellent, we will be supplying these products at camp. We will be using Bullfrog Mosquito Coast Sunblock with Insect Repellent. If you wish for this product to be administered to your child at camp please complete and sign below. You also must apply the product to your child at least once before they can receive it at camp.

I hereby request that the non-prescription topical product Bullfrog Mosquito Coast Sunblock with Insect Repellent be administered to my child by a staff member of Thompson Recreation's Summer Adventure Camp. This authorization is limited to the afore mentioned product. This product has been used on my child at least once before attending camp.

Area of Administration (examples: face; arms and legs only; etc.)

Parent/Guardian Signature _____

_____ Date

Lake Compounce Trip Special Permission Form - Aug. 18, 2010 - for 12 years and up only

I grant permission for my child _____ to travel with a buddy on the Lake Compounce trip with Thompson Recreation's Adventure Camp on August. 18, 2010.

I do not grant permission for my child _____ to travel without a camp counselor on the Lake Compounce trip with Thompson Recreation's Adventure Camp on August 18, 2010.

Parent/Guardian Signature _____

_____ Date

RI Rock Gym Special Permission Form - for Green/Yellow/CIT Groups only

I grant permission for my child _____ to participate in all activities at the Rhode island Rock Climbing Gym with Thompson Recreation's Adventure Camp on July 7, 2010.

Parent/Guardian Signature _____

_____ Date