Summer Day Camp 2017
RANDOLPH YMCA
#BestSummerEver
WE, ME YOU SUMMER CAMP – Perfect for Kids Ages 3–Kindergarten
LOCATION: PROGRAM HOUSE
The perfect camp for young children! Campers will enjoy exciting activities including sports, gymnastics, arts & crafts, science and cooking. Children will also enjoy swim instruction and pool activities three times per week in our Warm Water Pool! Fun trips are planned once per week and guest speakers such as firefighters, policemen, and animal specialists will visit the campers. This program is available in full or half days to children ages 3–5. (not yet in Kindergarten) CHILD MUST BE COMPLETELY POTTY TRAINED.

WE, MÉ, YOU Camp Director: Lynn Molitoris - Contact: (973) 366-1120 x16 or (973) 583-4748 or lynn@randolphymca.org

CAMP WIDE HORIZONS – 1st–4th grade in September 2017 – LOCATION: RANDOLPH YMCA
We have new classes (archery, music, karate, and dance) as part of our daily curriculum. Every week will be a new theme with special guests like magicians, reptile specialists, carnivals and many fun event days! We will still have favorites like sports, crafts, science, and gymnastics. Swimming will be three days per week with instruction and fun mixed in! Field trips will be offered every week to local attractions. All children will be challenged by supervised activities to promote the YMCA core values of caring, respect, honesty, and responsibility.

WIDE HORIZONS Camp Director: Lynn Molitoris - Contact (973) 366-1120 x16 or (973) 583-4748 or lynn@randolphymca.org

YOUTH ADVENTURE CAMP – Grades 5th–9th in Sept. 2017
LOCATION: HEDDEN PARK, FORD RD. ENTRANCE
Your child will be part of an exciting adventure which includes two field trips per week. Campers will participate in arts and crafts, games, hiking, sports and other adventures. Free swim three times per week will take place in the main pool at the YMCA (lessons will be provided if needed). Campers will make friends while learning the values of diversity and cooperation while having fun in a friendly, caring, and safe environment.

YOUTH ADVENTURE Camp Director: Jenn Patrick - Contact (973) 366-1120 x18, Keith Kowalski (973) 366-1120 x18 or yadvcamp@randolphymca.org

C.I.T. PROGRAM – 9th & 10th grade in September 2017
A special training program for teens interested in becoming camp counselors. Under the leadership of a Senior Counselor, C.I.Ts will receive daily instruction in conjunction with practical experience working with campers in their groups. Interested C.I.Ts must arrange an interview with the camp director prior to their acceptance into this program.

C.I.T CAMP DIRECTOR: Lynn Molitoris - Contact: (973) 366-1120 x16 OR (973) 583-4748 OR lynn@randolphymca.org

CELL PHONES ARE NOT PERMITTED AT CAMP. NO EXCEPTIONS.

Camp Information Meetings

WEDNESDAY, JUNE 7th
6:30 – 7:30 PM (We Me You)
7:30 – 8:30 PM (1st–4th)

MONDAY, JUNE 5th
7:00 PM (Adv. Camp)
EMERGENCY CONTACTS AND PICKUP AUTHORIZATIONS

In addition to parents, ONLY those on the below list will be allowed to pick up a camper from camp. Please list all additional persons authorized to pick up your child. No child will be released without emergency verbal/written permission. Please make sure that the individuals on this list are aware that they may be called in an emergency to pick up your child. You are welcome to add or to delete from this list at any time; please indicate if a non-custodial parent has limits on visitation or pick up. If a non-custodial parent has been denied visitation or has limited visitation by court order, a copy of the order must be given to the YMCA.

ADDITIONAL AUTHORIZED PICKUP (Guardian, friends, nanny, babysitter, relatives, etc.)

RULES FOR ACCEPTANCE AND PARTICIPATION IN CAMP - are the same for everyone without regard to race, color, national origin, sex, age or disability. It is understood that all campers will be treated as individuals and respect will be shown for differences in tastes, preferences, abilities, and range of behavior patterns. The Y reserves the right to dismiss a child from camp whose special needs are not able to be met or whose conduct is not in the best interest of the total camp — without refund.

DISCIPLINE POLICY – I will review and reinforce the camper conduct and other camp policies with my child prior to the start of camp. Discipline at the Y is handled with much care and thought. Redirection and positive reinforcement are used to help children understand proper behavior. Campers not following the conduct policy may be suspended or expelled from camp with no refund.

FIELD TRIP PERMISSION – My child has permission to attend the field trips as indicated on the camp calendar. I understand that by reading the newsletter, I will be notified of the date and location of the trips and the time of departure and return to camp. I understand that if my child does not wish to attend a field trips, no alternative program has been planned and no refund will be given.

OTHER FEES – a late pick-up fee of $1.00 per minute interval starting from your child’s scheduled pick up time: $35 for returned checks

PERMISSION TO TREAT – INFORMED CONSENT – By signing this agreement, I believe that my child is qualified physically, mentally, and emotionally for camp and understand there is some risk involved in all physical activities. I agree to place my child in the care of the camp staff, subject to its program policies. I give permission for him/her to take part in all camp activities and field trips. In the event the responsible parents/guardians cannot be reached, I give my permission to the medical personnel selected by the camp to transport, hospitalize, secure proper treatment for, and to order injections, x-rays, routine tests, anesthesia or surgery for my child, and to release any records necessary for treatment, referral, billing, and insurance purposes. I have read all of the above information and I am fully aware of all of the terms and principles contained herein. All questions have been answered to my satisfaction. I agree that certain activities at the Y have risks which are inherent to the activity. No insurance has been included in membership or program fees. I further agree to indemnify and not hold the Y responsible for any claims or demands arising out of any such injuries and losses.

Signature ___________________________ Print Name ___________________________ Date ___________________________
HOSPITAL PREFERENCE _________________________________________________________________

Medications that require refrigeration can not be given at camp. If medications need to be taken during the day, you must complete a Medication Authorization Form and submit it to the camp director.

Medications? Please list:
____________________________________________________________________________________________________________________________________________________________________________________

Allergies / dietary restrictions or behavior issues ______________________________________________________________________________________________________________________

Please describe any past medical treatment that this camper has received: ______________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________________________________________

CAMPER HEALTH HISTORY INFORMATION

This section is required for your camper’s care and is mandated by the State of NJ to be completed in full.

Current medical, mental or psychological condition pertinent to routine care of camper including any current treatment/care:

___________________________________________________________________________________________________________________________________________

Please describe any past medical treatment that this camper has received: __________________________________________________________

Allergies / dietary restrictions or behavior issues __________________________________________________________

Medications? Please list: __________________________________________________________

If medications need to be taken during the day, you must complete a Medication Authorization Form and submit it to the camp director. Medications that require refrigeration can not be given at camp.

4 HOSPITAL PREFERENCE _________________________________________________________________
BEHAVIOR
A log will be kept with the camp director documenting any behavior situations. You will be asked to sign this log to confirm notification of any behavior problem. Please note our Discipline Policy below. Parents need to handle problems maturely and rationally away from other children. Please set up a conference if a problem persists.

DISCIPLINE POLICY
We expect that we will have campers who are occupied in creative, physical, and mental activities throughout the day. We are sure this will prevent them from becoming involved in inappropriate behavioral situations. We encourage you, as a parent, to discuss with your child appropriate social behavior to circumvent a discipline problem. We are positive that a situation requiring the director to terminate attendance by a disruptive child will not arise. Fighting, swearing, disrespect to the director, staff, or another child, abusive language, physical abuse, stealing, etc., are actions contrary to proper YMCA behavior goals and will be looked upon as cause for termination with no refund of camp fees.

EXPULSION POLICY
Unfortunately, there are situations when we have to expel a child from camp either on a short term or permanent basis. We will do everything possible to work with the family of the camper in order to prevent this policy from being enforced.

IMMEDIATE CAUSES FOR EXPULSION
• The camper is at risk of causing serious injury to other campers or himself/herself
• Parent threatens physical or intimidating actions toward staff members or other parents/campers
• Parent exhibits verbal abuse to staff or other parents/campers in front of enrolled children

PARENTAL ACTIONS FOR CAMPER EXPULSION
• Failure to pay/habitual lateness in payments
• Failure to complete required forms including camper’s immunization records
• Habitual tardiness when picking up your child
• Verbal abuse to staff
• Other

CAMPER’S ACTIONS FOR EXPULSION
• Failure of camper to adjust after a reasonable amount of time
• Uncontrollable tantrums/angry outbursts
• Ongoing physical or verbal abuse to staff or other campers.
• Excessive biting
• Inappropriate language & inappropriate behavior as determined by staff

SCHEDULE OF EXPULSION
If after the remedial actions above have not worked, the camper’s parent/guardian will be advised verbally and in writing about the camper’s or parent’s behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/guardian may work on the camper’s behavior or to come to an agreement with the camp. The parent/guardian will be informed regarding the length of the expulsion period.

The parent/guardian will be informed about the expected behavioral changes required in order to return to the camp. The parent/guardian will be given a specific expulsion date that allows the parent sufficient time to seek alternate child care (approximately one to two weeks notice depending on risk to other camper’s welfare or safety). Failure of the camper/parent to satisfy the terms of the plan may result in permanent expulsion from camp.

A CAMPER WILL NOT BE EXPELLED
If a camper’s parent(s):
• Reported abuse or neglect occurring at camp.
• Questioned the camp regarding policies and procedures.
• Wasn’t given sufficient time to make other child care arrangements.

In the event of inappropriate actions by a participant at camp, a warning will be issued. If the action continues, the child will sit out of the activity going on. All behavioral situations will be documented in a log set up for each child. Parents will be informed of all entries into this log and will be required to sign indicating that they have been made aware of the entry.

Upon continuation of the problem, the parent will be called and a conference will be set up if the issue cannot be resolved during the phone conversation. Should the problem continue beyond this, the child will be taken off a trip and a continuing problem will be cause for termination from camp.

PROACTIVE ACTIONS THAT CAN BE TAKEN IN ORDER TO PREVENT EXPULSION
• Redirect the camper from negative behavior
• Reassess environment, activities, & supervision
• The use of positive language & methods while disciplining
• Praise appropriate behaviors
• Consistently apply consequences if rules are broken
• Camper will be given time to regain control
• Parent/guardian will be given literature of other resources regarding methods of improving behavior
INFORMATION FOR PARENTS

PARENTS TRUST US
Randolph YMCA Summer Day Camp offers campers the chance for new experiences, skill building, a sense of community and lasting friendships. Kids become a community as they learn both how to be more independent and how to contribute to a group as they engage in physical, social and educational activities.

REGISTRATION
• Send in your child’s up to date immunization records with registration.
• Our camp is a 9-week program that runs from June 26 – August 25. Campers can sign up for ONE or more weeks.
• 10% discount for additional siblings.
• EXTENDED CARE: AM and/or PM supervision is available.
• All campers will receive a complimentary T-shirt on their first day of camp.

PAYMENT INFORMATION
• If your check has cleared or your credit card has been charged, you may assume your child is fully registered. PHONE NUMBER MUST BE ON CHECKS.

BILLING ADDRESS
RANDOLPH YMCA
ATTN: Deb Popek
14 Dover Chester Road
Randolph, NJ 07869

$__________ TOTAL CAMP FEES

$__________ EXTENDED CARE FEES

$__________ TOTAL FEES PAID AT THIS TIME

$__________ AMOUNT DUE (if applicable)

Camper Name___________________________________________________________

PAYMENT METHOD
I have enclosed a check for $__________
(circle one) Credit / Debit Card (check one) VISA AMEX MasterCard Discover

NAME ON CARD: __________________________________________________________

CARD #: __________________________________________________________________

EXP. DATE: ______________ CVV: ______________

SIGNATURE: __________________________________________________________________ DATE: ______________

QUESTIONS?
If you have any program questions, please contact the appropriate person below:

WE, ME, YOU CLUB, CAMP WIDE HORIZONS OR CIT
Lynn Molitoris (973) 366-1120 x16 or lynn@randolphymca.org

YOUTH ADVENTURE CAMP
Jenn Patrick (973) 366-1120 x18

For billing questions, call accountant, Debbie Popek at (973) 366-1120 ext. 13 or email debbie@randolphymca.org

SIGNING UP IS EASY!
✓ General camper information
✓ Emergency pickup and authorization
✓ Registration with health history and immunizations
✓ Camp payment-check or credit card information
✓ Camp option
✓ Extended care selection
✓ Sign agreement
✓ Send in your child’s up to date immunization records with registration

SCHEDULE CHANGES, CREDITS & REFUNDS
No refunds of camp fees will be given. All changes must be received in writing.

WHAT DOES MY CHILD NEED FOR CAMP?
Campers need to bring the following items labeled with their name:

Lunch
Drinks
Water bottle
Snacks
Sunscreen
Swim Suit

Campers spend the day outdoors. Children must wear appropriate clothing and footwear. Sunscreen should be applied before camp and brought to camp.

$25 LATE FEE ADDED TO ANY NEW OR ADDITIONAL REGISTRATIONS AFTER JUNE 16

Payment Plan Available Please contact Debbie x13 for more information
MEDICATION ADMINISTRATION POLICY

GUIDING PRINCIPLES

- Parents/guardians must have completed a Health Screening Form for their child(ren) under 18.
- All minor children under the age of 18 enrolled in a YMCA summer camp must have all Randolph YMCA medical forms and individual medical condition completed and on file with the YMCA prior to the child(ren) participation in the program.
- All medical information on file with the YMCA will be kept on a confidential, “need to know” basis. Under no circumstances are employees to discuss the medical information of any child(ren) or with anyone other than their supervisor, the parent/guardian of the child(ren) and their healthcare provider.
- It is the parent/guardian’s responsibility to keep the YMCA informed of any changes to their child(ren) medical situation.
- It is the parent/guardian’s responsibility to ensure that all medications are not expired.
- If a YMCA employee is informed by a child’s parent/guardian of a condition requiring medication, that employee must then contact their supervisor. Employees are not to dispense any medication to a camper in their camp without a signed “Permission to Give Medication” form.
- Training in the administration of medication, such as EpiPen Administration, will be given to YMCA employees who work with children in compliance with all guidelines of the training agency approved by the State of New Jersey and the Randolph YMCA.

This policy was written to encourage communication between the parent, the child’s health care provider and the YMCA to assure maximum safety when giving medication to a child during the time the child is attending the Randolph YMCA camp in the absence of a parent/guardian.

Assuring the health and safety of all children at our YMCA camp is a team effort by the staff, family and health care provider. This is particularly true when medication is necessary during the child’s participation in camp. Therefore, an understanding of each of our responsibilities, policies and procedures concerning medication administration is critical to meeting that goal.

The YMCA staff will not be able to treat all individuals with a particular impairment in an identical manner. Within the program, there may be a basis for distinguishing among individuals, and it will be the YMCA’s duty to determine the needs of each individual, its impact upon others in regard to health or safety, or if it would result in an undue burden that is of significant difficulty or expense.

PROCEDURES

In the event that it is necessary to administer medication to a child, the following guidelines and procedures shall be followed:

1. Whenever possible, it is best that medication be given at home. Dosing of medication can frequently be done so that the child receives medication prior to going to the YMCA, and again when returning home and/or at bedtime. The parent/guardian is encouraged to discuss this possibility with the child’s health care provider.

2. The first dose of any medication should always be given at home and with sufficient time before the child returns to the YMCA camp to observe the child’s response to the medication given. When a child is ill due to a communicable disease that requires medication as treatment, the health care provider may require that the child be on a particular medication for 24 hours before returning to child care/program. This is for the protection of the child who is ill, as well as the other campers in camp.

3. Medication will only be given when medically necessary and ordered by the child’s health care provider and with written consent of the child’s parent/legal guardian. "Permission to Give Medication" form is an Appendix to this policy and will hereafter be referred to as Permission Form. All information on the Permission Form must be completed before the medication can be given. Only originals of Permission Form with parent/guardian signature will be acceptable. A signed original Permission Form must be on file for each medication that is to be dispensed to the child. Copies of the blank Permission Form can be duplicated or requested from the YMCA.

4. Medications given in any YMCA camp will be administered by a staff member designated by the applicable Camp Director. It is the responsibility of the Camp Director to inform the designated staff member of the child’s health needs related to the medication and ensure that they have had training in the safe administration of medication. All medication dispensed must be documented. A single staff person per shift should be allowed to dispense the medicine at each location. [There may be confusion about dispersal if more than one person is providing the medication.] The designated staff person must be certified in First Aid and CPR for the Professional Rescuer including AED.

PRESCRIPTION MEDICATIONS

Any prescription medication brought to the YMCA must be specific to the child who is to receive the medication, in its original container, have a child-resistant safety cap, and be labeled with the appropriate information as follows:

- Prescription medication must have the original pharmacist label that includes the pharmacists phone number, the child’s full name, name of the health care provider prescribing the medication, name and expiration date of the medication, the date it was prescribed or updated, and dosage, route, frequency, and any special instructions for its administration and/or storage. It is suggested that the parent/guardian ask the pharmacist to provide the medication in two containers, one for home and one for use at the site.
- In the case of a child requiring an EpiPen for allergies, two EpiPens in their original containers must be supplied by parent/guardian for storage at the site.
- Inhalers must be kept on the child’s person or in a designated location as determined by YMCA staff and must be self administered.

STAY AT HOME POLICY

The Randolph YMCA follows the NJ Department of Health and Senior Services guidelines for all staff and program participants who are ill. These guidelines are:

- Parents are asked to keep their children home, and staff members should remain home if they are sick. Anyone with flu-like illness should stay at home for 7 days or 24 hours after symptoms resolve, whichever is longer.
- Flu-like symptoms are fever of 100 degrees or more, a sore throat, or cough.
OVER-THE-COUNTER MEDICATIONS

Over-the-counter (OTC) medications will only be given when medically necessary and ordered by the child’s health care provider OR with written consent of the child’s parent/legal guardian. A “Permission to Give Medication” form must be completed before medication can be given.

1. OTC medications must have the child’s full name on the container, and the manufacturer’s original label with dosage, route, frequency and any special instructions for administration and storage, and expiration date must be clearly visible.

   Examples of OTC medications that may be given include:

   Antihistamines, Decongestants, Non-aspirin fever reducers pain relievers, & Cough suppressants

2. All medications will be stored:
   - Inaccessible to children
   - In a separate container labeled that it is Medicine Storage
   - Separate from staff medications and first aid supplies
   - In cases where immediate use may be necessary for medication to be carried on the child’s person, i.e. EpiPen and/or inhaler, written documentation of this medical need must be provided by the health care provider including written documentation that the child is capable of self-medication (up to age 18).

IF IT IS NECESSARY TO ADMINISTER MEDICATION TO A CHILD IN THE EVENT OF A LIFE THREATENING EMERGENCY, THE FOLLOWING PROCEDURES SHALL BE FOLLOWED

The Randolph YMCA Allergy Action Plan is in place for all children with allergies necessitating the administration of epinephrine (EpiPen or EpiPen Junior). In all instances of administration of epinephrine, EMS will be called immediately. The parent/guardian will also be notified immediately following the call to EMS.

The Randolph YMCA follows the YMCA of the USA’s recommendation for all program participants to self-manage and self-administer medication for diabetes. Local legislation restricts such services to the parent or a medical professional.

Unused or expired medication will be returned to the parent/guardian when it is no longer needed or be able to be used by the child. EpiPens will be returned to the parent/guardian upon the camper leaving the program at the end of camp. EpiPens will not be kept by the YMCA for longer than one year. At the end of one year, new medical forms including prescription(s) from the health care provider must be provided to the YMCA.

A “Permission to Give Medication” form is included as an appendix to this policy.

Information exchange between the parent/guardian and YMCA staff about medication that a child is receiving should be shared when the child is brought to and picked-up from the YMCA. Parents/guardians should share with the staff any problems, observations, or suggestions that they may have in giving medication to their child at home, and likewise with the staff from the YMCA to the parent/guardian.

Confidentiality related to medications and their administration will be safeguarded by the YMCA Camp Director and staff.

Parent/guardian will read and have an opportunity to discuss the content of this policy with the Program Director. The parent signature on this policy is an indication that the parent accepts the guidelines and procedures listed in this policy, and will follow them to safeguard the health and safety of their child. Parent/guardian will receive a copy of the signed policy.

PROTOCOL IS AS FOLLOWS

- EpiPen will be with the child’s counselor and will be self-administered
- If necessary, YMCA staff will assist the child with EpiPen administration.
- In the event the child is unable to, trained YMCA staff will administer.

Randolph YMCA “PERMISSION TO GIVE” MEDICATION

Part 1: To be completed by the parent/guardian

I hereby request and authorize Randolph YMCA personnel to administer medication as directed by your physician. I agree to release and hold harmless the Randolph YMCA and any of their officers, staff members, or agents from lawsuit, claim, demand or action etc. against them for administering prescribed medication.

Participant ____________________________ Date of Birth __________

Parent/Guardian Signature ____________________________ Date __________

Phone # ____________________________ Name of Medication ____________________________ Date __________

Reason for Medication ____________________________ Times to be taken ____________________________

Dosage (must be consistent with product label) ____________________________ Given how? ____________________________

Special instructions ____________________________ Adverse effects of medication ____________________________

For the safety of all participants, medication will be kept in a secure location and dispensed by designated staff only, including over-the-counter medication. The only exceptions to this rule are inhalers and EpiPens.

Part 2: FOR STAFF ONLY

☐ Signed copy of Randolph YMCA “Permission to Give Medication” on file
☐ Prescription medication is properly labeled and its original packaging by pharmacist
☐ OTC Medication is in its original container with manufacturer’s dosage clearly visible
☐ Part 1 of this form is complete including signatures
☐ Medication to be given and physician order are consistent

Randolph YMCA Camp Director’s Signature ____________________________ Date __________

This form must be submitted on the first day of camp with the medication.