# **Summer Day Camp**

Welcome to the UCSB Summer Day Camp!

We have assembled this packet in order to provide you with information concerning your child's enrollment in camp.

We have arranged with campus parking services to allow for free 30-minute parking in the 6 spaces located directly in front of the camp gate in parking lot 30. If you already have a UCSB parking pass please choose a different space so that those without can take advantage of this offer.

If you plan on parking for longer than 30 minutes or in a different parking lot you will need to purchase a pass from the automated machines in the parking lot. Plan on visiting campus often this summer? You can buy a 30-day pass (\$56) from Parking Services, their office is also in lot 30 just down from the camp field or go to their website www.tps.ucsb.edu.

Included in this document you will find:

**General Information Sheet** - this outlines several camp policies you need to be aware of.

**Common Questions/Answers** - this is a brief summary of what happens at the Summer Day Camp.

**UCSB Campus Map** - camp is located on Stadium Road adjacent to parking lot #30.

**Medication Permission Form** - please fill out and return this form ONLY IF your child needs to take medication while at camp.

**Liability Waiver** - if you signed up online we will already have it on file and you DO NOT need to turn in another copy. All others (mail in or in person registrants) should return on the first day of camp or mail back to us. We must have this waiver on file before your child may attend camp.

**Consent to Treatment Form** - Please return on the first day of camp or mail back to us. We must have this waiver on file before your child may attend camp. Please note that this is in addition to the Liability Waiver.

Image Release - Please help us spread the word about the great programs UCSB has to offer by signing and returning the 'Release & License to Use Image, Name &/or Voice'. There are many activities and accomplishments that take place at camp that are positive, newsworthy and of interest to the community and other families. We will, from time to time, use still photography or videography for the purpose of highlighting camp activities. Those images may be used in informational newsletters, brochures and other printed material published by the UCSB Department of Recreation. It is possible that those images might be used on university web sites. They may also be submitted to the news media for possible publication.

To add sessions please take advantage of our online registration system at: register.recreation.ucsb.edu

Receipt copies are available online. Visit our website at register.recreation.ucsb.edu and 'Sign In' to your account. We hope that the information contained in this packet will answer any questions you might have regarding camp, if not please feel free to email us at camps@recreation.ucsb.edu or call (805) 893-3913. To reach the field office during camp please call (805) 893-4821.

We look forward to seeing you at camp!

# FAQs & General Info

### What happens FIRST when I drop off my child?

First, your child will be placed with a group of campers of the same age. We will do our best to honor requests to be in the same group as a friend provided the age difference is not substantial. However, this should be pre-arranged by completing that section of the actual application. The counselor to camper ratio is approximately one counselor to every ten children.

### What do children DO at the Camp?

All group daily activities are scheduled beforehand by the head counselors. The UCSB Summer Day Camp strives to provide the widest variety of fun and enriching summer activities for children of all ages.

Arts & Crafts, Beach Days, Carnival, Sports, Group Games, Gymnastics, Movies, Movement, Ropes Adventure Course, Science, Special Events, Swimming Tennis, Ultimate Frisbee, Campus Explorations and much more.

### Are there other activities available such as Swimming Lessons?

Yes. These are very limited and offered through the Recreation Center Aquatics staff. Please see our website or call the aquatic's office for availability 893-2501.

Counselors are only available to walk children to 4:30pm lessons only. Children in 4:30pm lessons are to be picked up at the Rec Cen by 4:55pm.

### Is Camp Open on the Independence Day Holiday?

No! We will be closed on Friday, July 3rd. (Campus Holiday)

### **Disciplinary Procedure**

UCSB is committed to the idea that each camper should have a positive and enjoyable experience at summer camp, and the misbehavior of one camper, or a group of campers, should not be allowed to impact negatively on the experience of others. Please discuss the importance of good behavior before your child arrives at camp. Our discipline procedure is as follows:

Progressive Discipline Steps for Participants

- 1. Counseling: When a discipline incident occurs, the student will be counseled and given a description of the behavior change required.
- 2. Time-Out: If subsequent incidents occur the student may be asked to take a "Time Out". A "Time Out" is a short period of time determined by age that the student spends quietly reflecting on the incident. The child then rejoins the group.
- 3. Parent Contact: If a series of discipline situations occur, the child's parent or guardian will be contacted.
- 4. Suspension: A student who continually disregards instructions will be suspended for 1 day. The parent / guardian will be advised.
- 5. Termination: If the child's behavior remains unacceptable then the parent or guardian will be informed and the child will be dropped from the program. No refund of camp fees will be given for current session, partial refund will be granted for future sessions.

# What is your Tax ID Number?

For those of you who deduct your child care expenses please note our Federal Tax ID Number.

This number belongs to the UC Regents

95-6006-145

# Do you have more questions?

Check out our Frequently Asked Questions "FAQs" page online.

http://recreation.sa.ucsb.edu/youth-programs/summer-day-camp/frequently-asked-questions

# **General Information**

### Camp Location

The Day Camp Headquarters are located next to parking lot #30 on Stadium Road. We are on the playing field between the track and the baseball stadium at UCSB.

Drop-off time is between 7:15am and 8:50am

Pick-up time is between 4:15pm and 5:30pm

### What to Bring

Please generously apply sunscreen on your child before they arrive at camp.

Each child should bring the following items to camp daily:

Lunch

A morning snack
An afternoon snack
Bathing suit & towel
Sunblock
Hat
Water Bottle

And a backpack in which to carry everything

Make sure that all of your child's belongings are marked with his/her name.

Each child should wear comfortable clothes, 'closed toe' athletic shoes (not sandals) and socks. Bring a jacket as well, since foggy mornings at UCSB can be very cold.

Cell phones are NOT to be used during camp except for in an emergency or to speak to parents/guardians. We would prefer children do not bring any electronic devices but understand the security a cell phone may provide. If this is the case, please advise your child before attending camp of our cell phone policy.

#### Lost & Found

The "Lost & Found" is located at the Day Camp Field Headquarters. Unclaimed items will be donated to charity 2 weeks after the end of each session.

#### Check-In & Check-out

Each morning please check your child in at the table by the main gate.

Lower Campers will also check in at the Lower Camp tent. Located inside the camp compound.

If you have any questions about the daily schedule, please refer to the posted schedule next to the check-in tables. If you need to pick-up your child early, let your child's counselor know when you drop-off that morning. A written note would be greatly appreciated. Check the daily schedule for your child's group as it is your responsibility to locate your child and check him/her out with the appropriate group counselor. Activity schedules are available at the camp office at the field.

Please be prepared to show ID at check out and keep your list up to date as to who is allowed to pick up your child.



# Late Pick-up Fee

We understand that problems and disruptions sometimes occur during a parent's day that can throw off schedules. However, in order to compensate our counselors for having to stay late, we assess a \$10.00/quarter hour childcare fee for children picked up after 5:30 p.m. This amount is due upon late pick- up.

# **CANCELLATIONS**

All cancellations must be made in writing (e-mails will be accepted).

Cancel two weeks or more before a session begins and receive a full refund less a \$25 administration fee. plus \$5 per session cancelled. Cancel up to one week (the preceding Monday) before a session begins and receive a refund less a \$25 administration fee, plus \$20 per session cancelled.

There will be no refunds granted if cancellation occurs less than one week before your session begins.

Exceptions may be made in cases of sickness, injury or family emergency.

Refund request exceptions must be made in writing and include supporting documentation (ie. doctor's note).

# Correspondence

If you ever need to reach your child at camp, contact the camp field office at (805) 893-4821. For payment or enrollment inquiries please call (805) 893-3913 or email camps@recreation.ucsb.edu.

# **Camp Rules**



Parents, please review these rules with your children before camp.

- 1. Buddy System. Campers are to have a buddy at all times. This makes it easier to keep track of everyone. If the campers need to leave the group for any reason, they must ask counselor for permission and take a buddy. Bathroom trips at the main field can be taken with a buddy and permission.
- 2. Campers must always stay in view of the counselors unless given permission to leave with a buddy.
- 3. No name calling or foul language.
- 4. No hitting, kicking, or spitting. Keep hands and feet to yourself.
- 5. No picking up sticks, rocks, or branches. No throwing things except equipment used in a game.
- 6. Pick up after yourselves; especially after lunch. Trash goes to the trash cans.
- 7. Everyone must share equipment.
- 8. Always listen to your counselor.
- 9. Leave toys, electronic games, and phones at home.
- 10. Tell a counselor when there is a problem or if something makes you unhappy.
- 11. Treat other campers, counselors and belongings with respect.
- 12. Wait for your counselor to say it is safe then look 'both ways' before crossing bikepaths.
- 13. Always remember the "Golden Rule"! Treat others the way you would like to be treated.

#### **Lunch Time Rules**

- 1. Be sure your lunch is zipped in your backpack until you are ready to eat. The seagulls will take any unguarded food!
- 2. No throwing water, drinks, or food.
- 3. Eat your own food; no sharing unless with a sibling. (Due to food allergies)
- 4. Stay within the boundaries and in sight of a counselor at all times. If you are not sure of the boundaries, please ask your counselors.

#### **Gymnastics Rules**

- 1. Shoes and socks must be taken off and left at door.
- 2. Stay off all equipment until counselor okays its use.
- 3. All campers must stretch together in order to participate in gymnastics activities.

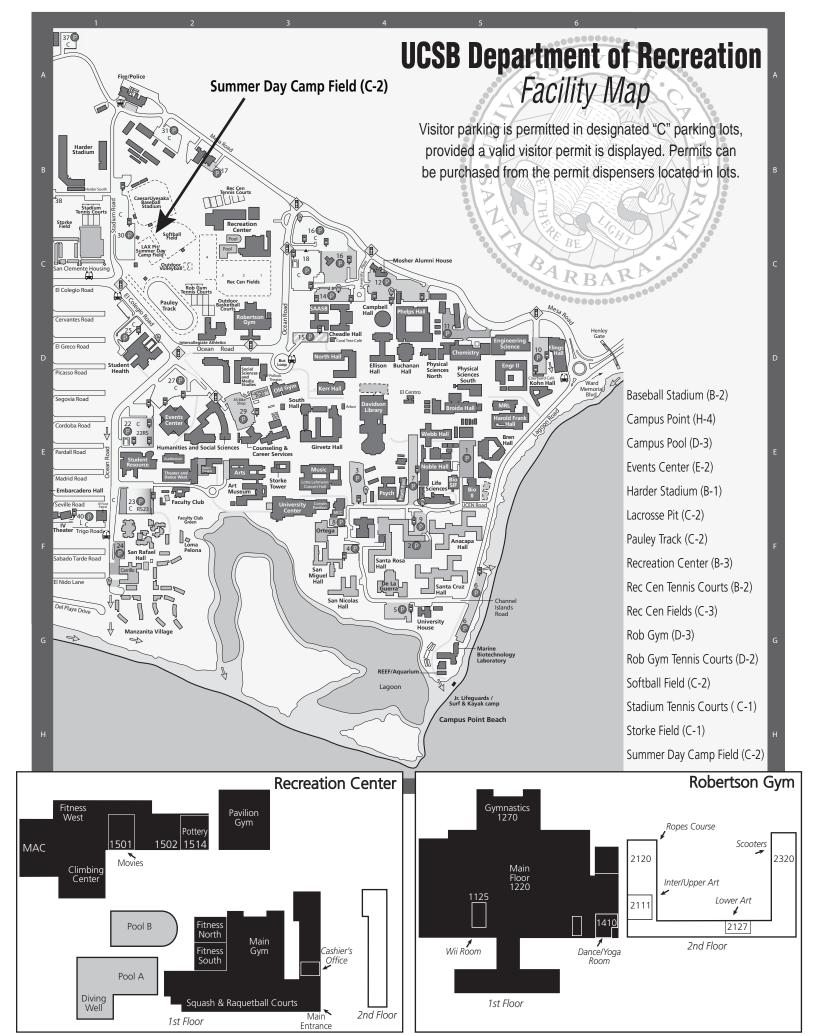
#### Pool Rules

- 1. You may not enter the water until the lifeguard and counselors give an OK.
- 2. No running on deck or in the locker rooms.
- 3. You must take a swim test\* before being allowed in the deep end. If you pass the test you will be issued a wrist band. You must be wearing your wrist band to go in the deep parts of the pools. Never give your wristband to another child.
- 4. There will be a bathroom break every 45 minutes when all children must exit the pool.
- 5. Before you jump off the diving board you must wait for the camper in front of you to swim to the side first.
- 6. You must wait for a counselor before entering and exiting locker rooms.
- 7. There is a shower on the pool deck which campers may use to rinse off before changing. Showers in the lockers rooms are not to be used by campers

\*Swim tests will be administered by the lifeguards at the beginning of each pool visit. We will keep track of each camper that has passed so the test will not have to be repeated for the duration of the summer. If a camper does not pass the test it can be retaken the next day.

The test consists of swimming 25yds using a coordinated stroke which demonstrates the child's ability to put their face in the water as well as treading water for 1 minute.







# University of California, Santa Barbara **Waiver of Liability, Assumption of Risk & Indemnity Agreement**

Elective/Voluntary Activities Waiver

Department	Class/Activity	

Waiver: In consideration of being permitted to participate in any way in

hereinafter called "The Activity", I, for myself, my heirs, personal representative or assigns, **do hereby release**, **waive**, **discharge**, **and covenant not to sue** The Regents of the University of California, its officers, employees, and agents from liability **from any and all claims including the negligence of The Regents of the University of California, its officers, employees and agents, resulting in personal injury, accidents, or illnesses (including death) and property loss arising from, but not limited to, participation in The Activity.** 

**Assumption of Risks:** Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions 3) catastrophic injuries including paralysis and death.

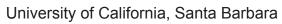
I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Print Name of Participant		Date	Age (if Minor)
Signature of Parent/Guardian of Participant if Minor	Print Name of Parent/Guardian of Participant if Minor	Date	





# **Authorization to Consent to Treatment of Minor**

# Department of Recreation

# **Summer Youth Programs**

(I) (We), the undersigned parent(s)/guardian(s) of do hereby authorize University of California, Santa Barbara sonnel as agent(s) for the undersigned to consent to any X diagnosis or treatment, or hospital care which is deemed a or special supervision of, any physician and/or surgeon lice Act, California Business and Professions Code B2000 et. surgical diagnosis or treatment, or hospital care which is degeneral or special supervision of, any dentist licensed under nia Business and Professions Code 31600 et. seq.	C-ray examination dvisable by, and itensed under the page of the p	Service or attending medical pers, anesthetic, medical or surgical is to be rendered under the general provisions of the Medical Practices examination, anesthetic, dental or by, and is to be rendered under the
It is understood that this authorization is given in advance to provide authority and power on the part of our aforesaid such diagnosis, treatment or hospital care which aforement best judgment, may deem advisable. This authorization is Code B6910.	agent(s) to give s	specific consent to any and all or dentist, in the exercise of his/her
(I) (We) hereby authorize any hospital, which has provided the provisions of California Family Code B6910, to surrend above-named agent(s) upon the completion of treatment. The Health and Safety Code B1283.	ler physical custo	dy of such minor to (my) (our)
These authorizations shall remain effective until	_, 20, unless	sooner revoked in
writing delivered to said agent(s).		Mail this form to: Recreation UCSB Santa Barbara, CA 93106-3025
Program (s) your child is participating in (ie swim lessons, summ	er day camp)	or Turn in to staff on first day of program
Name of Health Insurance Provider	Policy #	
Name of Parent/Guardian (please print)	Phone Number	
Signature of Parent/Guardian		Date

#### MEDICATION AT CAMP PERMISSION FORM

#### Dear Parents/Guardians:

Although the camp has no legal obligation to administer medication, we recognize that in some cases it is in the child 's best interest to allow him / her to receive medication at camp. According to Ed Code Sections 49423, 49407 and Board Policy 4400(d), schools may assist students with the administration of medication. In consideration of school districts agreeing to administer such medication, Ed Code Section 49407 holds the school districts and its employees free from liability for the dispensing of such medication. This same consideration will hold true for the UCSB Summer Day Camp and its employees.

The following items must be completed and /or maintained in order to permit camp personnel to dispense medication:

- 1. A signed order from your physician for the current summer must be on file at our camp office if it is a prescription medicine. (Use form below)
- 2. A written parent request for camp personnel to assist in carrying out the administration of the medication as set forth in the physician's statement must be on file at the camp office. This written request should also be on file for non-prescription medicine. (Use form below)
- 3. Medication must be kept in a bottle from the pharmacy labeled with child's name, dosage, and name of drug. Ask pharmacist for two bottles of medication, one for home and the other for camp. If medicine is not a prescription, the medication must be in its original bottle.
- 4. Changes in medication, dosage, or time must be communicated to the camp by phone or note.
- 5. The camp, with parent consent, may need to communicate with the physician and counsel with camp personnel regarding possible effects of the medication.

Parent's Form				
We (l), the undersigned, who are parents(s) of	request that:			
a) prescription medication be administered to our child in acc	cordance with the enclosed instructions of our physician,			
Physician's Name (Please Print)	rsician's Phone Number			
or				
b) non-prescription medication be administered to our child	in accordance with the enclosed instructions from us, the parents.			
	maintaining the items listed above and that the medication will be			
administered by a member of the camp staff as designated by	the camp director.			
Parent/Guardian Signature	Date			
	cian's Form			
To attending physician:				
has medication to be taken a	t camp. Please complete the information on Rx regiment requested			
below, which is required by Ed Code 49423 before we can adm	ninister any medication at camp.			
MEDICATION NAME	DOSAGE			
ADMINISTRATION: Frequency & Times	METHOD			

Physician's Signature Date



University of California, Santa Barbara

# Release & License to Use Image, Name &/or Voice

Use the Release & License to Use Image, Name &/or Voice to obtain permission from individuals to use their image or visual likeness, their name, and/or their voice in University publications or other productions. If this Release is being granted with respect to a minor, it is necessary to first obtain the prior consent of the minor's parent(s) or legal guardian(s). Contact UCSB Risk Management for additional information.  DEPARTMENT				
Department:				
Class/Activity:	· · · · · · · · · · · · · · · · · · ·			
Describe the possible uses for which the Department may use the individual's image, name	ne, and/or voice:			
RELEASE & LICENSE				
This Release & License is for the following Personal Information: (Initial all Personal Information for which permission to use is being given)  Image/Visual likeness Name Voice				
I, the undersigned, hereby grant the Regents of the University of California ("University") permiss modify, reproduce, distribute, publicly perform and display, in any form now known or later deve likeness, my name and/or my voice (the "Personal Information") as specified in this Release and in the world, by incorporating it or them into publications, catalogues, brochures, books, magazine picture films, internet websites, videotapes, and/or other media (the "Works") or commercial, in advertising, or promotional materials relating thereto.	loped, my image or visual dicated above, throughout es, photo exhibits, motion			
I release, and hereby agree to indemnify, defend, and save harmless University, its agents, e assigns (collectively, "Released Entities") from any and all claims I, or any third party, may have invasion of privacy, right of publicity, copyright infringement, defamation or any other cause of ac exploitation, reproduction, adaptation, distribution, broadcast, performance or display of the Per	re now or in the future for tion arising out of the use,			
I waive any right to inspect or to approve any Works that may be created using the Personal Inclaim with respect to the eventual use to which the Personal Information may be applied. The I be used at the University's sole discretion, with or without my name or with a fictitious name, and biographical material, alone or in conjunction with any other material of any kind or nature excuse the Personal Information for any criminal or illegal purposes or in a manner inconsistent woof decency.	Personal Information may with fictitious or accurate that University will not			
I understand and agree that University is and shall be the exclusive owner of all right, title copyright, in the Works, and any commercial, informational, educational, advertising, or promot the Materials.				
I am of full legal age and have read this release and am fully familiar with its contents. By their sparent(s) or legal guardian(s) indicate, on behalf of their minor child, their full and unqualified concludes the Release & License.				
Name:	Age (if Minor):			
Signature (not required if minor):	Date:			
Name of Parent(s)/Guardian if Minor:				
Signature of Parent/Guardian if Minor:				
Address:	Ph·			