



SUMMER DAY CAMP 2024



Mashpee Recreation
Department



IMPORTANT INFO

What will my child need to bring to camp ?

- A bathing suit and towel every day
- A "kid safe" brand of sun screen
- Children **MUST** wear sneakers daily, no "flip-flops" allowed except at the beach
- An extra set of clothing
- Baseball style caps are helpful
- Please mark clothing with child's name

What Medical/Health forms are required ?

- A copy of their physical examination and immunization record within the last 18 months signed by a health care provider
- A written health history which includes any allergies, required medications and any health conditions which may affect your child's activities while attending camp.
- **Signed Individual Health Plan from your Pediatrician should your child require any medications, EPI Pen and/or an Inhaler while at camp**

Are snacks provided ?

- No. All children attending Camp need to bring snacks and drinks from home. We also recommend children have a refillable water bottle. Please pack (2) snacks in an insulated box or bag

Is Lunch Provided ?

- No, All children will need to bring a packed lunch, snacks and drinks each day. Every Friday we have a cookout. Children will **not** need to bring a LUNCH on Fridays but will still need 2 snacks and a water bottle

What time does camp start and end ?

- Camp begins at 8:30 am and ends promptly at 4:30 pm

Do you offer extended day hours ?

- Extended day hours are offered from 7:30am-5:30pm for a fee of \$35 per week, this covers both before and after care
- Late pick up/drop off fees will be applied at \$10 for the first 5 minutes and \$1 per minute thereafter

Is financial aid available ?

- Limited financial aid may be available. Please fill out our financial aid form (found on www.mashpeerec.com, click on forms & applications) & return it to Mashpee Recreation Dept. with all required documents and a completed camp registration form by April 26th, 2024.

Additional Information:

- Open to children entering Gr. 1st through 8th
- Minimum Staff Ratio of 10:1
- All field trips are included in the cost
- Swimming 2 times per week (weather permitting) Lunch provided once a week on Friday. (Children will still need 2 snacks and a water bottle)
- Deposits and payments are NON-REFUNDABLE

Camp Philosophy, History and Staff

Our summer day camp provides a safe environment for children to learn valuable skills and make new friends through programs that are challenging, educational and fun. Our goal is to create a space for young people to learn how to work together as a team while gaining confidence in their unique abilities as individuals and to encourage an awareness of the environment and an appreciation of nature. Through games, sports, field trips, nature hikes, special events, swimming, arts & crafts and water activities campers are given the opportunity to learn, explore and develop the sense of wonder and adventure that create memories for a lifetime.

We comply with the regulations set by the Massachusetts Department of Public Health and are permitted by the Mashpee Board of Health.

Mashpee Recreation Summer Camp has been in existence for over 20 years. Each counselor is certified in CPR and First Aid and must successfully pass a comprehensive background check including fingerprinting, CORI and SORI checks prior to employment. We have our own lifeguard dedicated to just our campers and a low counselor/camper ratio of 1:10.

How to Register :

Registrations are accepted at the Mashpee Recreation Office located at 520 Main Street, Mashpee. Registrations must be complete and must include the \$50/week deposit.

Cost for campers (Gr. 1 - 6) \$185/week or \$220/week to include Extended Day hours and (Gr. 7-8) is \$220/week or \$255/week to include Extended Day hours. This covers both AM & PM, (starting at 7:30am and ending at 5:30pm).

Deposit of \$50 (non-refundable) is required for each week your child is registered and will be applied towards the remaining balance.

Refunds - are given only if a child's camp spot can be filled by another child from the waitlist. Please make every attempt to give us as much notice as possible if you plan to cancel a week.

Registration Fee— There will be a \$35 registration fee

The Credit Card on file must be Valid upon registration and is NOT considered an "autopay" unless otherwise indicated on the auto pay form included in this packet. If payment has not been received the card provided will be charged.

All camp payments MUST be paid in full by June 14, 2024 for weeks 1 - 5 and July 19, 2024 for weeks 6 - 8. Children will not be on the roster and will not be able to attend camp if payment is not acquired.

Camp will meet everyday unless a weather emergency is called. Please check your email, call our office or logon to our website www.mashpeerec.com to check for cancellations.



Mashpee Recreation

2024 Summer Camp Program



Child's Name: _____ Date of Birth: _____ Grade: _____

(As of 7/1/24)

Address: _____

(Number & street)

(Town)

(State)

(Zip Code)

Parent/Guardian's Name (s): _____ Home Phone: _____

Cell Phone: _____ Carrier: _____ Email: _____

(For text notification use only)

Program Cost for Grades 1 - 6 : Reg. Day \$185 (8:30 am – 4:30 pm) / Ext. Day \$220 (7:30 am - 5:30 pm)

Grades 7+8 : Reg. Day \$220 (8:30 am -4:30 pm) / Ext. Day \$255 (7:30am - 5:30 pm)

✓	Date	Theme/Field Trip	M	T	W	TH	F	Cost	Deposit	Balance
1	Splash into Summer June 24th–June 28th	All–Water Wizz Adventure– The Lanes	6/24	6/25	6/26	6/27	6/28	\$185 Reg. /\$220 Ext. (Gr. 1-6) \$220 Reg./\$255 Ext. (Gr. 7-8)	\$50.00	
2	Arrr Matey! July 1st–July 5th	All– Battleship Cove Navigators–The Lanes	7/1	7/2	7/3	/	7/5	\$150 Reg. /\$185 Ext. (Gr. 1-6) \$185 Reg./\$220 Ext. (Gr. 7-8)	\$50.00	
3	Jump Around July 8th–July 12th	All– Funz Navigators– United Skates	7/8	7/9	7/10	7/11	7/12	\$185 Reg. /\$220 Ext. (Gr. 1-6) \$220 Reg./\$255 Ext. (Gr. 7-8)	\$50.00	
4	Heroes & Villains July 15th–July 19th	Adventurers– Dave and Busters Explorer– Boston MoS	7/15	7/16	7/17	7/18	7/19	\$185 Reg. /\$220 Ext. (Gr. 1-6) \$220 Reg./\$255 Ext. (Gr. 7-8)	\$50.00	
5	Strike up the Fun July 22nd–July 26th	Navigators– Codzillia Adventurers– Boston MoS Navigators– Dave & Busters	7/22	7/23	7/24	7/25	7/26	\$185 Reg. /\$220 Ext. (Gr. 1-6) \$220 Reg./\$255 Ext. (Gr. 7-8)	\$50.00	
6	Spy Kids July 29th– Aug 2nd	Voyagers & Navigators– Boston MoS Adventurers– Pinz Explorers– Dave & Busters	7/29	7/30	7/31	8/1	8/2	\$185 Reg. /\$220 Ext. (Gr. 1-6) \$220 Reg./\$255 Ext. (Gr. 7-8)	\$50.00	
7	Animals Aug 5th–Aug 9th	All– Franklin Park Zoo Navigators– Main St. Grille	8/5	8/6	8/7	8/8	8/9	\$185 Reg. /\$220 Ext. (Gr. 1-6) \$220 Reg./\$255 Ext. (Gr. 7-8)	\$50.00	
8	The Last Hoorah! Aug 12– Aug 16	Voyagers & Adventure– Water Wizz Explorer & Navigator– Canobie Lake	8/12	8/13	8/14	8/15	8/16	\$185 Reg. /\$220 Ext. (Gr. 1-6) \$220 Reg./\$255 Ext. (Gr. 7-8)	\$50.00	

Parent/Guardian Checklist

Current Photo

Physical and Immunization Record

Payment

Registrations will NOT be accepted without these accompanying documents

Please note: Our office does not keep any child's physical and immunizations records on file from previous programs

Make Checks payable to: Town of Mashpee

Registrations are accepted at The Mashpee Recreation Department Office located at 520 Main Street, Mashpee



___ Wks. x \$50 \$ _____ Deposit

Due Now: \$

Camp Total: \$

Minus Deposit \$ -

Balance: \$

Medical & Emergency Information

List at least two persons to contact in case of emergency – Someone who will be available to pick up your child

ONLY THOSE LISTED ON THIS FORM WILL BE AUTHORIZED TO PICK UP YOUR CHILD IN YOUR ABSENCE WITHOUT PRIOR WRITTEN NOTIFICATION FROM YOU. A valid I.D. will be required at pick up

Name	Phone	Address	Relationship to child

Medical Information

The Mashpee Recreation Department is committed to providing a safe and accessible program for all children. Persons with disabilities, limitations or conditions that require special accommodations are welcome to participate in all programs that are compatible with their interests and abilities. Every effort will be made to accommodate participants however, the availability of the Mashpee Recreation Summer Camp Program’s resources may limit one on one support. It is the responsibility of parents and guardians to notify us of any needs and/or special modifications that may be necessary for their child's safety, success and well being

***All requests for ADA accommodations must be discussed in advance with both the Recreation Director and Summer Camp Program Coordinator**

Will your child require one on one support? Y or N: Explain _____

Does your child have any condition (e.g. mental, physical, emotional or medical) which might affect their health and well-being, the well-being of others, or affect their ability to engage in any activities? (If so, please describe including any adaptations or modifications that may be necessary)

Does your child have an IEP ? Y__ N__ if yes, do we have your permission to obtain a copy and/or discuss this information with the school ?

Please Describe: _____

Does your child have any type of allergy ? _____

Does your child use an inhaler or EPI pen ? _____

(If yes, you and your Physician will need to supply one along with an Individual Health Plan BEFORE starting camp

Please check the medications that may be given to your child if needed:

___ Tylenol ___ Advil ___ Benadryl ___ Insect Sting Wipes ___ External Ointment (i.e. Neosporin) ___ Antacid (i.e. Tums)

Initial: _____

Rules and Policies

Age Range and Behavior Expectations

The Mashpee Recreation Summer Camp Program is open to children that have **completed** Kindergarten through 9th Grade. Your child is expected to participate in all activities and conduct themselves in an appropriate manner **at all times**. The focus of this program is ACTIVE recreation and there will be minimal time spent indoors.

Participants who are unable to meet the following guidelines will be removed from the program without refund

All program participants MUST:

- Meet all prerequisites for the program and follow policies outlined on this registration form.
- Cooperate with other participants/staff and participate in group activities
- Respect others and maintain self-control, respect our facilities and equipment
(Listening, following directions, keep hands and feet to self and use appropriate language at all times)
- Behave in an appropriate and respectful manner and stay with their group at all times
- Be able to maintain personal care without the support of the Rec. Program Staff
(unless previously discussed with the Recreation Director and Program Coordinator)

Initial: _____

Attendance & Illness Policy

Children should be kept home unless well enough to participate in the days activities. Parents will be notified to pick up their child if the child is unable to participate in scheduled activities due to illness.

Before returning to camp children must be:

Fever: (100 degrees or higher) Fever free for 24 hours without the aid of medication

Antibiotics: Must be on antibiotics for a full 24 hour dose

Vomiting/Diarrhea: Must be symptom free for 24 hours

Cold symptoms: free of yellow/green runny eyes, nasal discharge, fever and persistent cough

Initial: _____

All payments are **FINAL and NON REFUNDABLE.**

Issues with extenuating circumstances will be referred to the Recreation Director for review

Please notify us in advance if your child will be late or picked up early.

Initial: _____

Late Pick-up Policy

The Recreation Summer Camp program ends at 4:30 pm. Extended Care ends at 5:30 pm.

Prior registration is required for the extended care program

Please ensure that the authorized person picking up your child does so promptly at the specified time and has proper I.D.

If for any reason your child is not picked up on time, you **WILL** be charged a late fee.

All late pickup fees must be paid in full before your child may return to the program

Repeated late pickups may result in removal from the program

I understand The Mashpee Recreation Summer Camp Programs late pick up policy and I agree to pick up my child at the scheduled time and/or pay any applicable fees according to the charges listed below.

Initial: _____

1st Offense:

Within 15 minutes - Written Warning
More than 15 minutes late - \$10/first minutes and \$1/ minute

Subsequent Offense:

Immediate \$10 and \$1 per minute thereafter

Field Trips

All field trips are **included** in the cost of registration. Children **ARE NOT** allowed to bring "spending" money with them to camp under any circumstance.

Attendance is suggested on field trip days. Transportation will be provided by a licensed transportation company, Mashpee Recreation Van, or via supervised walking. I agree to allow my child to participate in offsite activities (ex: field trips) and be transported as necessary. Field trips may include the public library, police/fire station, South Cape Beach, John's Pond, Sandwich Boardwalk, Goodwill Park and others.

Initial: _____

Food and Beverage Policies

Please send your child to camp each day with 1 morning snack, 1 afternoon snack, a lunch, drink and bottled water. Lunch "Cook Out" will be provided once a week (Fridays). Children **will still need** snacks and water on this day.

My Child has a food allergy : Yes - No (Specify : _____)

Initial: _____

Publicity Waiver

Mashpee Recreation may take pictures/videos of your children for advertising purposes. **We will never post your child's name or identifying information along with these photos/videos.** I give my consent for Mashpee Recreation and the Town of Mashpee to use and publish photos or videos of my child in print, on their website or social media outlets. I understand that no monetary or other compensation will be given for use of these pictures/videos.

Yes _____ No _____

Initial: _____

Swimming Policies

In accordance with Christian's Law (MLG Ch. 111, 127A ½) we will categorize your Child's swimming ability to Identify "Non-Swimmers" and /or "At-Risk-Swimmers" to ensure everyone's safety. In addition, Coast Guard approved PFD's. (Personal Flotation Devices "Lifejackets") may be used by any program participant and are available via our program if desired . Our summer camp program employs it's very own certified lifeguard (s) to ensure the safety of all our campers. *PLEASE NOTE: Mashpee Town Beaches **DO NOT** allow other flotation devices (water wings, noodle, etc.) other than Coast Guard approved devices.

Initial: _____

Sunscreen Policy

We require **ALL** children to wear sunscreen rates SPF30 or higher. Sunscreen should be applied in the morning before your child arrives. In addition, sunscreen should be re-applied each afternoon with a reminder and minimal assistance from staff. **Please send your child with their own bottle of sunscreen.** (label with your child's name)
I have read the Sunscreen policy and give permission to Mashpee Recreation Summer camp staff to help reapply sunscreen to my child if necessary.

Initial: _____

What to Bring: (Every day including the very FIRST day of camp)

- **SUNSCREEN!!**
- Sneakers/closed toe shoes appropriate for outdoor play
- Bathing Suit & Towel, flip flops for **BEACH ONLY**
- An extra set of clothes
- A refillable water bottle
- 2 snacks, lunch and a drink
- Please make sure all items are marked with your child's first initial and last name

Children should refrain from bringing electronic devices to camp. We will not held be responsible for any devices that have been lost, stolen or broken.

We understand that there can be extenuating circumstances. Devices used for communication purposes are acceptable but should be stored and only used in cases of emergency.

Initial: _____

Final Agreement

I have provided Mashpee Recreation with a current copy of my child's physical and immunization records and current photograph of my child for identification purposes only

Initial: _____

PG Movie Permission

_____ Give my permission for my child to view PG movies

Initial: _____

_____ I DO NOT give my permission for my child to watch PG movies

Mashpee Recreation requires all registrants leave a credit card on file. Camp balances are **DUE June 14, 2024 for weeks 1 - 5 and July 19, 2024 for weeks 6 - 8.** Children will not be on the roster and will not be allowed to attend camp if payment is not acquired.

If you have any questions please call the Recreation office at 508-539-1416.

Any unpaid balances will be charged to the required credit card on file. This is **NOT** an enrollment form for automatic deductions. For Auto pay, please see Autopay form included in this packet.

MC/Visa # _____ Exp. Date _____ / _____ Security Code _____

Signature _____

Initial: _____

Parent / Child Information Sheet

Summer Camp 2024

Your Child's Name: _____ D.O.B. ___/___/___

Age: _____ Grade: _____ Shoe Size: _____
(Fall of 2024)

Allergies: _____

Special Accommodations:

MY CHILD IS

CIRCLE ONE

VOYAGER - Entering Gr. 1 + 2

ADVENTURER - Entering Gr. 3 + 4

EXPLORER - Entering Gr. 5 + 6

NAVIGATOR - Entering Gr. 7 + 8

Counselor in Training - Entering 8 + 9

T-Shirt Size

Youth - S M L XL

Adult - S M L XL

(Circle one)

ATTACH
A
COLOR PHOTO
HERE

Mother/Guardian

NAME: _____

Father/Guardian

NAME: _____

Address

Address

Home phone

Home phone

Cellular phone

Cellular phone

E-mail address

E-mail address

Birthday (MM/DD/YYYY)

Birthday (MM/DD/YYYY)

Work phone

Work phone

Emergency Contact Information (other than yourself)

#1 Emergency Contact

Name: _____ Cell Phone: _____

#2 Emergency Contact

Name: _____ Cell Phone: _____

I GIVE PERMISSION FOR MY CHILDS PICTURE/VIDEOS TO BE TAKEN :
YES NO (circle)

STAFF NOTES

AUTHORIZATION FOR EMERGENCY MEDICAL CARE : I AUTHORIZE STAFF IN THE MASHPEE RECREATION SUMMER CAMP PROGRAM WHO ARE TRAINED IN THE BASICS OF FIRST AID AND CPR, TO GIVE MY CHILD _____ FIRST AID AND/OR CPR WHEN APPROPRIATE. I UNDERSTAND THAT EVERY EFFORT WILL BE MADE TO CONTACT ME IN THE EVENT OF AN EMERGENCY REQUIRING MEDICAL ATTENTION FOR MY CHILD. HOWEVER, IF I CANNOT BE REACHED, I HEREBY AUTHORIZE THE PROGRAM TO TRANSPORT MY CHILD TO THE NEAREST MEDICAL CARE FACILITY AND/OR TO _____ HOSPITAL AND TO SECURE NECESSARY MEDICAL TREATMENT FOR MY CHILD.

HEALTH INSURANCE COMPANY _____ POLICY # _____ Physician Name _____

Parent / Guardian Signature: _____ Date: _____ Physician number _____

HOLD HARMLESS CLAUSE: I, the undersigned parent/guardian or participant, do hereby consent to my/their participation in voluntary athletic, recreation, or community education programs of the Town/City, or Public School of Mashpee. I also agree to forever release the Town/City of Mashpee, the School Committee, and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic, recreation, or community education programs of the Town/City or Public Schools ("the Releases") from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child's participation in the Town or Public School of Mashpee voluntary athletic, recreation, or community education programs.

I also promise, to indemnify, defend, and hold harmless the Releases against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my participation, or my child's participation in the Town/City or Public School of Mashpee voluntary athletic, recreation, or community education programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my participation, or my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this form, I affirm that I have decided to allow my participation, or my child's participation in the Town/City or Public School's athletic, recreation, or community education programs with full knowledge that the Releases will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary Town/City or Public School athletic, recreation, or community education programs.

Name (Print) : _____

Signature: _____ Date _____

AUTOMATIC PAYMENT PLAN

****Please complete this form if you would like autopay****

Mashpee Recreation Department offers an automatic payment plan for our Summer Camp Programs. If you wish to participate please fill in your information below, sign and return to the Mashpee Recreation Department. Any changes must be made in writing and require a 30 day notice.

Date: _____

I give Mashpee Recreation Department permission to charge my credit card on the first of each month for my child's:

_____ **June 14th** - Weeks 1-5, Summer Camp

_____ **July 19th** - Weeks 6, 7, 8, Summer Camp

MC/VISA _____ EX. ____/____

Three Digit Security Code on back of card _____

Print Name on Card _____

Authorized signature _____

Please sign & print

Child's name (please print) _____

Program _____

_____ Please notify me when payment is made on my charge card by:

_____ Phone _____

_____ Email _____

_____ I do not need to be notified when payment is made on my charge card

Mashpee Recreation Special Events

Memorial Day Ceremony

Monday, May 27th
Mashpee Community Park
and
Veterans Memorial Garden

Super Swim

Saturday, June 8th

Fishing Derby

Saturday, June 1st

Rhiannon McCuish Woodland Run

Sunday, May 26th (Tentative)

Family Picnic & Fireworks

Friday, June 28th (rain date 6/29)

Mashpee Community Park Summer Concert Series

July 9th thru August 27th every Tuesday evening from 6:00 p.m. - 7:30 p.m.

Mashpee Veterans Park and Memorial Garden

Sponsored by The Mashpee Recreation Department

Town of Mashpee

Recreation Department

520 Main Street , Rte. 130

Mashpee, MA 02649

508-539-1416

508-419-1161 (fax)

To:

For more information on these events go to www.mashpeerec.com or call 508-539-1416