

# SUMMER CAMPS 2021 REGISTRATION FORM

## DEPARTMENT OF SPORTS, PARKS & RECREATION

PLEASE PRINT IN INK AND FILL OUT COMPLETELY

The Department's Liability Waiver must be completed, signed and returned before the camp start date or participation will not be allowed. Thank you for your cooperation.

### PRIMARY ADULT CONTACT

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ ISLAND \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ WK PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

\_\_\_\_\_ Check here if you prefer not to receive our electronic mailings

EMERGENCY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

### ACTIVITY REGISTRATION

NO.	PARTICIPANT'S NAME	DATE OF BIRTH	M/F	T-SHIRT SIZE	SCHOOL	GRADE	FEE
1.							
2.							
3.							
4.							

<input type="checkbox"/> Baseball Camp	No. _____	<input type="checkbox"/> Golf Camp	No. _____	<input type="checkbox"/> Tennis Camp	No. _____
<input type="checkbox"/> Mcbean Sports Camp	No. _____	<input type="checkbox"/> Winston Raymo Cultural	No. _____		
<input type="checkbox"/> St. John Outdoor Adventure	No. _____	<input type="checkbox"/> Soccer Camp	No. _____	<input type="checkbox"/> Cheer, Gymnastics & Dance	No. _____

### PHOTOGRAPHIC RELEASE

I permit the Department of Sports, Parks & Recreation to use and publish photographs and/or videotapes of my child or children for purposes of presenting recreation activities to the community and to promote the recreation program to prospective clients and/or participants. I also give permission to release such photographs and/or videotapes to the news media in support of the program.

SIGNATURE OF PARENT /GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

*The U.S Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment based on race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities). If you wish to be to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9991 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 10250- 410, by fax (101) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). Individuals who are deaf, hard of hearing, or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).*

Department Use Only	
Amount Received: _____	Date Received: _____
( ) Cash	( ) Check
	( ) Money Order
Check No. _____	Money Order No. _____
Employee Signature: _____	

## DEPARTMENT OF SPORTS, PARKS & RECREATION

### Medical Emergency Release

In the event of sudden illness, accident, or injury which may occur while said minor is engaged in a program/activity supervised by the Department of Sports, Parks & Recreation's representatives, agents, or assignees, when neither the parents, guardian, or designated family physician can be contacted, I hereby give my consent for emergency treatment as shall be necessary under circumstances by any physician licensed under the Laws of the Virgin Islands Government in consideration of my child or children participation in this program, I hereby release and discharge the VI Government (which includes its officers, employees, agents, and elected and appointed officials) from any and all claims for personal injury.

SIGNATURE OF PARENT / GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone \_\_\_\_\_  
Insurance Company \_\_\_\_\_ Policy Group # \_\_\_\_\_  
Pertinent medical history information (Epilepsy, Diabetes, allergies, etc.)  Yes  No. If yes, explain:

Parent Emergency Phone # \_\_\_\_\_ In case of emergency (if parent cannot be contacted) please notify:  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Phone \_\_\_\_\_

### Other Health -Related Information

Is the child allergic to medications? Specify?  
Is the child allergic to insect stings? If yes, what actions should be taken?  
Does the child have any food allergies or dietary restrictions? Specify:  
Does the child have any other significant health or behavioral Specify?  
problems significant to camp personnel?  
Does the child require medication while at camp  
If yes, please note that we cannot dispense  
Medication without:  
\_ A completed *Medication Consent Form* and  
\_ A physician's written and signed authorization  
Please check that you have turned in both the above items  
May camp staff apply sunscreen on your child?  Yes, I give my permission for staff to apply

### Code of Conduct Release

The Department of Sports, Parks, and Recreation encourages a safe and healthy atmosphere by supporting an environment free from Drugs or Alcohol, Violence, Intimidation, or Harassment, Gambling or Solicitation, Profanity, or Abusive Language, Vandalism, or Property Damage. This code of conduct applies to all participants, spectators, visitors, facility users, organizations or groups, staff, and volunteers in any and all Department of Sports, Parks and Recreation Activities, Programs, Field, and Facility Use.

Violation of this Code of Conduct may result in disciplinary action up to and including immediate and permanent expulsion from Department of Sports, Parks and Recreation programs, cancellation of any facilities or field reservations, forfeiture of any and all fees, and financial or other restitution for any damage. Acts conducted by a minor are the responsibility of the parent or guardian. I have read and agree to abide by the Department of Sports, Parks and Recreation Code of Conduct and accept responsibility for any acts on behalf of my child in violation of this code.

\_\_\_\_\_ Please Initial

### Authorization to Walk, Ride, or Be Picked Up

My Child has permission to: \_\_\_\_\_ Walk to and from program  
\_\_\_\_\_ Ride a bicycle to and from program  
\_\_\_\_\_ Be picked up by the following people listed below

1. \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

# DEPARTMENT OF SPORTS, PARKS & RECREATION

## **MEDICATION PRESCRIBER / PARENT AUTHORIZATION**

Camp Name: \_\_\_\_\_

Date(s): \_\_\_\_\_ Time (s): \_\_\_\_\_

### **CAMPER INFORMATION**

Camper's Name \_\_\_\_\_ Parent/Legal Guardian Name \_\_\_\_\_

Physical Address \_\_\_\_\_ Island \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender M \_\_\_\_\_ F \_\_\_\_\_

\_\_\_\_\_ **No, my child does not need to take any prescription medication while at Camp.**

\_\_\_\_\_ **Yes, my child will need to take prescription medication while at Camp.**

**This form must be completed fully for campers to administer the required medication to themselves. A new medication administration form must be completed for each camp attended by the camper, for each medication, and each time there is a change in dosage or time of administration of medication. Requires licensed health care authorization and signature, and parent signature.**

- Prescription medication must be in its original container labeled by the pharmacist or prescriber. The label must include the name, address, and phone number of the pharmacist or prescriber.
- Containers must hold only the amount required for the time the camper will be attending the Camp.
- All prescription medications, including medications for conditions such as food, drug, or insect allergies; diabetes; asthma; or epilepsy may be brought to Camp under the condition that the camper can self-manage care and delivery of medication with written authorization to do so at camp by a licensed health care provider.

### **PRESCRIBER AUTHORIZATION FOR SELF-ADMINISTRATION OF PRESCRIPTION MEDICATION**

Medication Name: \_\_\_\_\_ Dose: \_\_\_\_\_

Condition for which medication is being administered: \_\_\_\_\_

Specific Directions (e.g. on empty stomach/with water, etc.): \_\_\_\_\_

Time/ frequency of administration: \_\_\_\_\_

If PRN, frequency: \_\_\_\_\_

If PRN for what symptoms: \_\_\_\_\_

Relevant side effects: \_\_\_\_\_

Medication shall be administered from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Special Storage Requirements: \_\_\_\_\_

Is the camper capable of self-managed care? Yes \_\_\_\_\_ No \_\_\_\_\_

Prescriber's Name/Title: \_\_\_\_\_ Prescriber's Place of Employment: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**I hereby affirm this individual has been instructed in the proper self-administration of the prescribed medication (s).**

Prescriber's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

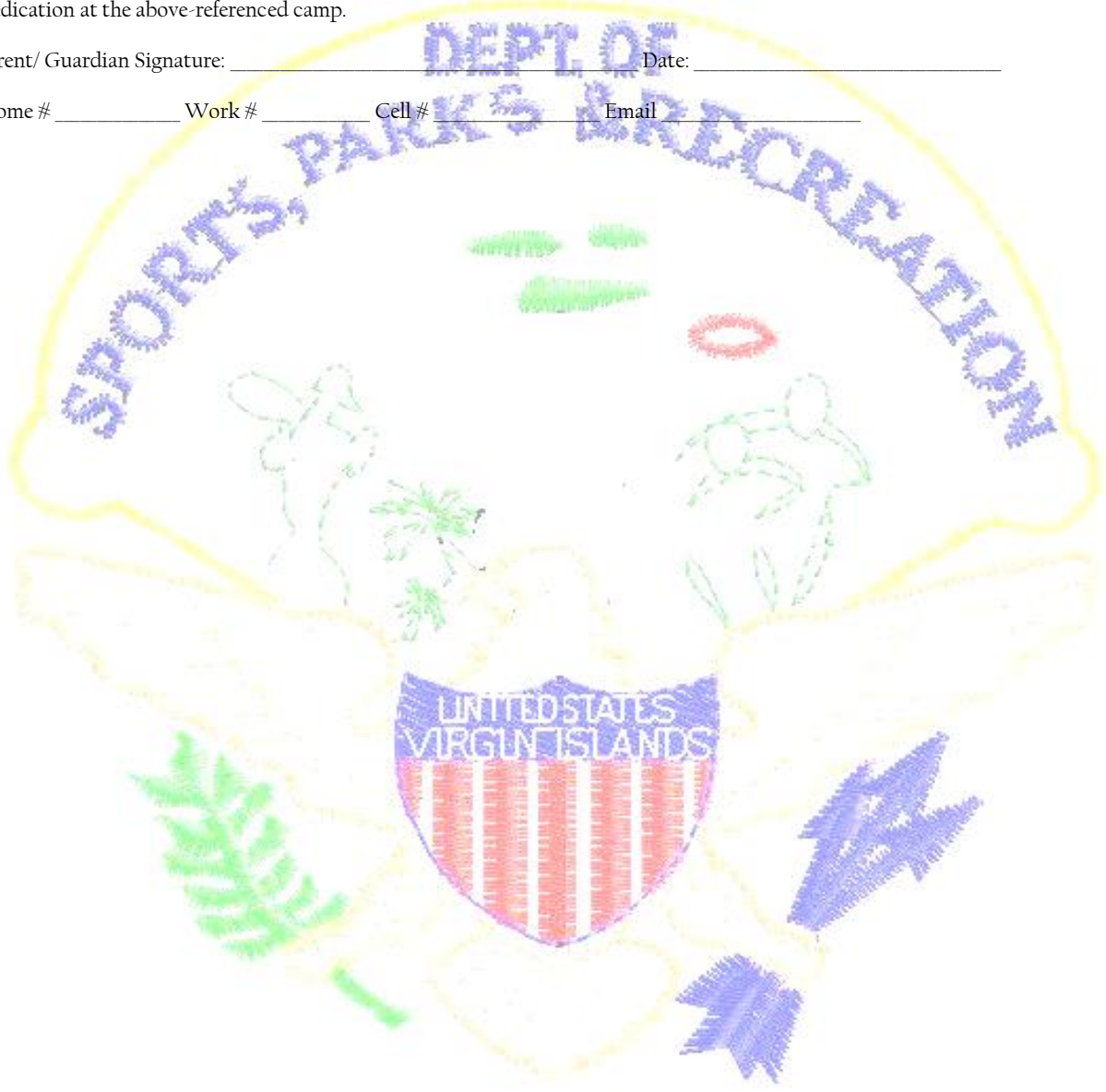
**PARENT/GUARDIAN AUTHORIZATION, WAIVER, AND CONSENT FOR SELF-ADMINISTRATION OF PRESCRIPTION MEDICATION**

I authorize and recommend self-medication by my child for the above medication. I also affirm that he/ she has been instructed in the proper self-administration of the prescribed medication by his/her attending physician. I shall indemnify and hold harmless the Department of Sports, Parks, and Recreation, its staff, and all other officers, directors, employees, and agents against any claims that may arise relating to my child's self-administration of prescribed medication(s).

I/We have the legal authority to consent to medical treatment for the camper named above, including the administration of medication at the above-referenced camp.

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_ Email \_\_\_\_\_



## GENERAL WAIVER & RELEASE – IMPORTANT INFORMATION

The Department of Sports, Parks, and Recreation (DSPR) is committed to conducting its recreation programs and activities safely and holds the safety of participants in high regard. The Department of Sports, Parks, and Recreation continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities. You are solely responsible for determining if your minor child is physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is disabled in any way, or recently suffered an illness, injury, or impairment, to consult a physician before undertaking any physical activity.

### WARNING OF RISK

Despite careful and proper preparation, instruction, medical advice, conditioning, and equipment, there is still a risk of serious injury when participating in any recreational activity/program. Understandably, not all hazards and dangers can be foreseen. Participants must understand that certain risks, dangers, and injuries due to acts of God, inclement weather, slipping, falling, equipment failure, premises defects, and all other circumstances inherent to recreational activities/programs exist. In this regard, it must be recognized that the Department of Sports, Parks, and Recreation can't guarantee absolute safety.

### WAIVER & RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages, or loss which your minor child might sustain as a result of participating in any activities connected with and associated with this program /activity (including transportation services, when provided). I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages, or loss, regardless of severity, that my minor child may sustain as a result of said participation. In the event of an emergency, I authorize the Department officials to secure from any licensed hospital physician, and /or medical personnel any treatment deemed necessary for my minor child's immediate care. Parents/guardians of minor participants are solely responsible for any and all expenses associated with emergency medical treatment, including but not limited to, transportation services to the nearest available medical facility/provider or an alternative medical facility/provider requested by the participant or parent/guardian. I further agree to waive and relinquish all claims I or my minor child may have (or accrue to me or my child) as a result of participating in this program/activity against the Department of Sports, Parks, and Recreation, including its officials, agents, volunteers, and employees (hereinafter collectively referred to as the Department of Sports, Parks, and Recreation). I do hereby fully release and forever discharge the Department of Sports, Parks & Recreation from any and all claims for injuries, damages, or loss that my minor child/ or I may have or which may accrue to me or my minor child, arising out of, connected with, or in any way associated with this program/ activity.

I have read and fully understand the above important information, warning of risk, assumption of risk, and waiver and release of all claims. I further attest that I have read the above to my minor child.

Parent / Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

## DEPARTMENT OF SPORTS, PARKS & RECREATION

### **CAMPER SAFETY AGREEMENT**

#### Department of Sports, Parks & Recreation (DSPR) Summer Camp Disciplinary Procedures

DHPR is committed to the idea that each camper should have an 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. Most camps are short, so prompt action is required when problems occur. Parents and campers should be aware of the disciplinary policy.

**First Offense:** Campers failing to adhere to camp rules, or exhibiting behavior intended to annoy or endanger other campers, will be privately and formally warned by the Camp Coordinator and informed that subsequent misbehavior will result in formal counseling by the Director of Sports and Recreation.

**Second Offense:** Subsequent misconduct will result in counseling by the Camp Coordinator and a warning that further misconduct will result in removal from camp. At this point, the Camp Coordinator will contact the parent or guardian to advise him/her of the situation and the possible need for picking the child up from camp if there is further misconduct.

**Third Offense:** Any further inappropriate behavior will result in counseling by the Director of Sports and Recreation and expulsion from camp.

**[NOTE: EVERY EFFORT IS MADE BY DSPR TO SEE THAT EACH CHILD IS SUCCESSFUL IN CAMP. ANY STEPS OUTLINED ABOVE MAY BE SKIPPED OR REPEATED AT THE DISCRETION OF CAMP STAFF. CAMPER'S DISMISSED FROM CAMP FOR DISCIPLINARY REASONS WILL NOT RECEIVE A REFUND OF ANY FEES PAID TO ATTEND CAMP.]**

It should be understood this procedure is intended to provide a reasonable and consistent method for dealing with the type of behavior that can be disruptive to a camp but is not so egregious as to warrant immediate dismissal from camp. It is no way precludes immediate dismissal from camp for more serious disciplinary problems or violations of campus or camp regulations. A serious disciplinary problem is defined as one in which the camp staff determines that a child is engaging in inappropriate behavior that includes, but is limited to the following: actions which put the camper, other campers, or camp staff member's safety in jeopardy; inflicting physical or emotional harm on self or others, vandalism or destruction of camp property; theft of camp property or the property of another camper; consistently disrupting the program; possession of alcohol, drugs, or weapons; fighting; sexual harassment; or behavior that is serious enough to warrant a third offense.

#### **Parent and Student Pledge:**

**I/we understand the disciplinary procedures described above. I/we understand failure to demonstrate proper conduct during camp may result in early dismissal from camp without any refund of fees paid to attend. We pledge to abide by all camp rules and to exercise good behavior and proper respect for others.**

STUDENT SIGNATURE \_\_\_\_\_

PARENT / GUARDIAN SIGNATURE \_\_\_\_\_

CAMP \_\_\_\_\_ DATES: \_\_\_\_\_



# GOVERNMENT OF THE UNITED STATES VIRGIN ISLANDS



DEPARTMENT OF SPORTS, PARKS & RECREATION  
#8201 SUBBASE, SUITE 206  
St. Thomas, VI 00802  
Telephone: (340) 774-0255

Dear Parents:

Welcome to the Department of Sports, Parks, and Recreation 2019 Summer Day Camps. We are excited to have you and your child involved in our camp. Our goal is to provide you with a fun, safe, and enriching experience. Please read through this handbook carefully. It will provide information about typical questions you may have regarding camp.

**ARRIVAL:** 8:00 A.M.

Please arrive at camp no sooner than 30 minutes before camp times. Staff will be preparing for the day's activities and will not be able to supervise campers who arrive earlier. Children are welcome to ride their bikes to camp, provided that the staff is aware of your child's transportation arrangements noted on our Summer Camp Registration Forms. Please be sure that bikes have a lock, as we cannot assume responsibility for them.

**DEPARTURE:** 5:00 P.M.

Children must be picked up no later than 5:30 pm. To pick up your child as **"late"** is defined as **10 minutes or more after the program has ended.** Please, in case of an emergency and if at all possible, phone and let the staff know you will be late. We understand that unavoidable circumstances do occur on occasion; however, if the problem becomes a habit, the parent will be assessed a \$5.00 late fee for the first 10 minutes and \$5.00 for every 5 minutes thereafter.

**LATE POLICY:**

- |                    |  |
|--------------------|--|
| First Occurrence:  | Reminder to parent/guardian of the late fee policy for the program.  |
| Second Occurrence: | Late fee will be charged accordingly and the Territorial Director of Sports and Recreation will be informed.   |
| Third Occurrence:  | Late fee will be charged accordingly. Parent / Guardian will be informed that the child will be dropped from the program unless the problem is resolved immediately and there are no more repeat occurrences. A written confirmation of the dismissal action will follow from the Territorial Director of Sports and Recreation. |

### **SIGN IN & OUT PROCEDURE:**

A staff person will sign in all children as they arrive. Staff members review the sign-in sheet to ensure the whereabouts of all children who have arrived at the program. The Department of Sports, Parks, and Recreation cannot be responsible for children until they arrive at the campsite. If a child arrives late, a notice will be sent home noting the tardiness. A notice will not be sent home if the Department of Sports, Parks, and Recreation was previously informed by a parent/guardian that the child would be late. Camp staff will not allow a child to leave the program site unless accompanied by a parent or an authorized person. At the end of each day, parents/guardians will be required to sign each child out with the time and a full, legal signature.

### **EARLY PICK UP:**

If your child is to leave camp early for any reason, please inform the staff that morning with a written note identifying the person he/she is to leave with and the time he/she is to leave. If we are off-site, special arrangements may have to be made, so this information is important.

### **INSURANCE:**

All participants in the Summer Day Camps programs are covered by the Department of Sports, Parks and Recreation Basic Accident Insurance Program. All claims must be filed within 12 months of the incident.

### **FINANCIAL ASSISTANCE:**

Financial assistance is available by application through the Department of Sports, Parks, and Recreation. The amount and duration of assistance depending on the funds available.

### **RULES OF CONDUCT AND DISCIPLINE PROCEDURES:**

Any child that the staff feels cannot be controlled and may pose a safety problem to either himself/herself or others may be immediately dismissed from the program. The general discipline procedure of the Department of Sports, Parks, and Recreation is:

#### **First Occurrence:**

Campers failing to adhere to camp rules, or exhibiting behavior intended to annoy or endanger other campers, will be privately and formally warned by the Camp Coordinator and informed that subsequent misbehavior will result in formal counseling by the DSPR staff or other youth development professionals.

#### **Second Occurrence:**

Subsequent misconduct will result in counseling by the Camp Coordinator and a warning that further misconduct will result in removal from camp. At this point, the Camp Coordinator will contact the parent or guardian to advise him/her of the situation and the possible need for picking the child up from camp if there is further misconduct.

#### **Third Occurrence:**

Any further inappropriate behavior will result in counseling by the Director of Sports and Recreation and expulsion from camp.

Examples of unacceptable behaviors include: disrupting the program; endangering the health and safety of other participants and staff; continuous refusal to follow program rules; use of verbal harassment, profanity, vulgarity, obscenity, or racial slurs; theft or damage of private or program property; leaving the site without permission; fighting or arguing; possession of weapons or threatening to bring weapons.



### **PARENTAL RESPONSIBILITY:**

It is the responsibility of the parent or guardian to notify and inform the Department at the time of registration, of any medical condition or disability that may require special consideration by the Department staff. Our goal is to serve your child in the most effective manner possible. Your confidentiality will be respected.

### **DRESS AND PERSONAL ITEMS:**

Campers should wear comfortable, old, durable play clothes, appropriate for the camp and weather conditions. Children must wear gym shoes. Please do not send your child in sandals, flip-flops, crocs, or other types of unsuitable footwear.

Each camper will receive one camp T-shirt for the summer, which will be passed out on the first day of camp. These camp T-shirts MUST be worn on all field trips.

All personal items (backpacks, lunch boxes, etc.) must be clearly labeled with your child's name. Please do not allow your child to bring items that may be broken or lost. We strongly recommend and encourage that your child does not bring a cell phone, I-pod, or Game Boy to camp. If an electronic device is brought to camp, the camper will be asked to turn the device off and store it in their backpack. Campers are not allowed to use cell phones, I-pods, or Game Boys for recreational purposes.

### **LOST & FOUND:**

Each year we accumulate many pieces of lost clothing, towels, lunch boxes, etc. Please be sure that your camper leaves with everything they have brought to camp! We suggest that everything is marked with the camper's name, so there is the ease in returning lost items. If your camper loses something, please check with the counselors. A lost and found box is located at your child's campsite for misplaced items. After camp ends any unclaimed items will be donated to charity.

### **LUNCH:**

Lunch will be provided by the Department of Education's Summer School Lunch Program. Campers that choose to bring their lunch are encouraged to bring their labeled lunch in a reusable container. Lunches must remain in the camper's backpack until lunchtime. Refrigeration is **NOT** available.

### **MEDICATION:**

If a child needs to receive medication at camp, a written form is required and medication must be in the original prescription container. Please fill out the medication form. Return it on the first day of camp at the campsite itself and discuss any special instructions with the Camp Site Coordinator.

### **FIRST AID, ILLNESS, & MEDICAL EMERGENCIES:**

Staff will administer first aid to a child on a limited basis for small accidents such as minor cuts, scrapes, and bloody noses. Your consent for the staff to administer first aid to your child is part of your registration agreement.

If your child is ill or has a fever, we discourage their participation. The Coordinator reserves the right to not accept a child due to illness. In the event, a child becomes ill during camp, a parent will be notified and requested to pick up their child. If you are not available, we will call the first person listed as an emergency contact on your child's information form. Your child must be fever-free for 24 hours before returning to the program.

In the event of a medical emergency or an accident, we will call 911 for immediate emergency care and then contact the parents of the child. Should emergency treatment be required, the child will be taken to the Juan Luis Hospital. Your authorization for the Department of Housing, Parks, and Recreation to secure emergency medical care for your child is part of your registration agreement.

**ABSENCES:**

In the event your child will not be attending camp, please let us know so that we do not expect your camper that day. Please note; any day (s) of camp missed due to illness, vacation, etc. cannot be made up by attending camp on a different day. In addition, we are unable to refund any missed days of camp. **Switching days of camp is not permitted. Missed days/weeks of camp cannot be made up and are non-refundable.**

To report an absence, please call the Subbase Main Office at (340)774-0255. Please do not leave absence messages with the Camp Counselors, Maintenance Staff, or with the summer Staff, as messages may not get to the Camp Coordinators.

**FIELD TRIPS:**

To increase the amount of summer fun, exciting field trips have been planned for your camper. Campers will travel on a bus to a field trip each week. On field trip days, we leave first thing in the morning. **Your child must arrive on time to camp on field trip days, so that we may depart without delay.** We are unable to wait for late campers because we often have reserved arrival times for outings, performances, etc. Please note that field trips are subject to change. Watch out for weekly schedules your child will bring home which will have a detailed outline of what has been planned for that particular week. Camp T-shirts **must** be worn on field trip days.

Occasionally, we may return a few minutes late from some particular field trips since we do travel to different remote locations throughout the Island. Please look for notices in our weekly schedule or call the Main Office on the day of the field trip.

**CAMPER SAFETY AGREEMENT:**

Attached is a Camper Safety Agreement. **The Camper Safety Agreement must be completed and turned in to the Camp Site Coordinator on the first day of camp. Your child will be unable to participate until the Camper Safety Agreement is completed and turned in.**

**OTHER IMPORTANT INFORMATION:**

Camp Phone Numbers:

Subbase Main Office

(340) 774-0255

Assistant Director of Sports & Recreation

(340) 774-0255

If you have any questions, please feel free to contact me. Thanks for joining us this summer and we are looking forward to new experiences with your child each day!

Sincerely,

Vincent Roberts  
Assistant Commissioner

## OTHER RULES CAMPERS & PARENTS NEED TO KNOW

1. Participants are to remain at the campsite for the duration of the program unless program activities require otherwise. If a camper needs to leave camp for some reason, we must receive prior written permission from the parent or guardian.
2. Camp regulations prohibit the use of alcohol and other illegal substances. Campers may not possess, use, distribute, or sell alcoholic beverages, drugs, firearms, weapons, or fireworks.
3. Participants must attend all planned social or recreational activities. Full participation is the only way a camper can gain real value from the camp.
4. Participants must never misuse internet privileges. Attempting to access unauthorized sites is strictly prohibited.
5. Participants must abide by rules and guidelines set by the instructors for each camp.
6. Any individual found tampering with any fire equipment (i.e. fire extinguishers, fire alarms, smoke detectors, etc.) will be dismissed from camp immediately. Campers may not interfere with any security system or tamper with door locks at the camp facility.
7. Vandalism and pranks will not be permitted. Any damages caused by your child will be charged to the responsible party. Replacement cost will be charged to anyone who removes or damages camp property.
8. Neither the DSPR nor the camp staff is responsible for lost or stolen items. Leave excessive money and valuables at home. Valuables, including jewelry, radios, cd players, iPods, etc., are not allowed at camp.