

# Summer Glen Farm/Sandy Point Beach Camp Application

New to Summer camp 2018/Best of Both

Camp will meet:

Monday, Wednesday, Friday @ Sandy Point Beach

Tuesday and Thursday @ Glen Farm

\*\*\*\*\*

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent/Parents Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contacts in addition to parents /name & phone: \_\_\_\_\_

Those authorized to pick up child/name & phone. Please have those authorized bring a valid ID. *WE WILL NOT RELEASE YOUR CHILD TO ANYONE NOT ON THIS LIST.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Camp Weeks, please check desired weeks. Camp begins @ 8:30am and ends at 4:30pm.

If you are not registering for a full week, please specify day. Check off full week or specific days.

\_\_\_\_\_Session 1    June 25 - June 29    FULL WEEK: \_\_\_\_\_ OR M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ T\_\_\_\_\_ F\_\_\_\_\_

\_\_\_\_\_Session 2    July 2- July 6    FULL WEEK: \_\_\_\_\_ OR M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ T\_\_\_\_\_ F\_\_\_\_\_

\_\_\_\_\_Session 3    July 9 - July 13    FULL WEEK: \_\_\_\_\_ OR M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ T\_\_\_\_\_ F\_\_\_\_\_

\_\_\_\_\_Session 4    July 16 - July 20    FULL WEEK: \_\_\_\_\_ OR M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ T\_\_\_\_\_ F\_\_\_\_\_

\_\_\_\_\_Session 5    July 23 - July 27    FULL WEEK: \_\_\_\_\_ OR M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ T\_\_\_\_\_ F\_\_\_\_\_

\_\_\_\_\_Session 6    July 30 - August 3    FULL WEEK: \_\_\_\_\_ OR M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ T\_\_\_\_\_ F\_\_\_\_\_

\_\_\_\_\_Session 7    August 6 - August 10    FULL WEEK: \_\_\_\_\_ OR M\_\_\_\_\_ T\_\_\_\_\_ W\_\_\_\_\_ T\_\_\_\_\_ F\_\_\_\_\_

**MEDICAL EMERGENCY/INJURIES/FIRST AID**

Our Camp staff is certified in CPR and First Aid. Our staff members are well informed of the policies and procedures to follow in case of an injury or illness.

If your child is injured/medical situation arises, the staff will take the necessary steps to obtain emergency care. These steps include, but are not limited to:

If the injury or illness is serious we will call 911/ Portsmouth Fire and EMT immediately. Staff will attend to the child while another staff member will attempt to contact a parent/guardian. If the parent/guardian is not available staff will attempt to contact a parent/guardian through any of the persons listed on the emergency information form you completed at the time of registration.

Newport Hospital will be used in most instances unless otherwise requested. Please be sure to update any medical info., health concerns and/or illness, insurance, medical contacts, etc. with staff if anything changes.

**Medical Information:**

Allergies or medical conditions:-----  
-----

Family Doctor and phone: \_\_\_\_\_

Health Insurance Co and policy number:  
-----

Other important information: \_\_\_\_\_  
-----

**Behavior Policy**

Good behavior is expected at Glen Farm Camp. We know that sometimes negative behaviors surface. Here at Glen Farm Camp we advocate positive guidance with an emphasis on positive reinforcement, redirection, prevention, and the development of self-discipline. Our staff reminds campers that camp rules are established for safety and to ensure that we have a common standard of behavior so that all campers feel safe and happy.

Corrective discipline is done in a creative, caring effort on the part of the camp staff, and it must be such by the camper. Our staff always suggests positive alternatives to negative behavior before it gets out of control. If behavior does get out of control we will schedule a conference with director and parents to identify the issue and come up with a solution.

**Permission to treat:**

All activities involve risks. By signing the application, you give us permission to treat your child in an emergency with the information below. Furthermore, you agree to not hold the Town of Portsmouth, its employees or agents liable for any incidents that may arise from your child’s participation.

**I have read and understood the above policies and procedures.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please tell us about your child... likes, dislikes, fears, anxious, behavioral etc. Any parent concerns, as well:

---



---



---



---

**Camp Fees:**

One-time registration fee:

\$20 for Portsmouth Residents

\$30 Non-residents

The registration fee will reserve your child/children’s place at camp.

Weekly Fee: \$200 per week or \$45 per day.

Siblings Discount \$35 per day, \$150 per week.

Extended Day Options:

Scheduled Daily:	\$5/30min -pick up 5:00pm	\$10/hour pick up 5:30pm
Scheduled Full Week:	\$10/30min -pick up 5:00pm	\$20/ hour pick up 5:30pm

\*\*\*If not scheduled \$1 per minute

Fees should be paid the week before each weekly camp your child is registered for.  
Additional fees may apply for field trips, etc.

PLEASE SEND APPLICATION TO:

[wbulk@portsmouthri.com](mailto:wbulk@portsmouthri.com)

Payment options:

For your convenience we now offer:



Or

You may send the application in with initial payment /registration fee to:

Town of Portsmouth(make checks payable to)

2200 East Main Road

Portsmouth, RI 02871

Attention: Director of Recreation

If you have any questions or concerns, please contact Wendy Bulk,

Director of Recreation @ 401-787-0281 or [wbulk@portsmouthri.com](mailto:wbulk@portsmouthri.com)