



**KidVenture
Community Day Camp
Memorial Park, Brookville PA
July 8-10
9am-2pm**

Sponsored by- Holy Trinity
Episcopal Church and
Brookville Presbyterian
Church

KidVenture Community Day Camp Participant Registration and Waivers and Informed Consent Form for the KidVenture Community Day Camp must be completed and returned to the address provided by June 14. Due to limited space registrations will be taken on a first come, first served basis. Children who have completed Kindergarten through Grade 5 are eligible to participate.

Pick-up and Drop-Off Procedures: Children need to arrive between 8:45-9:00 am and must be picked between 2:00-2:15 pm. Parent/guardian must park their vehicle and walk their child into the Camp and sign the child into the Camp. At check-in the name/names of any person who is permitted to pick the child up that day will be recorded. ID will be requested at time of pick up. The check-in area for the camp will be in the pavilion.

Medical emergency: Camp nurse will administer first aid, CPR, and rescue in the best interest of the child. Parents will be contacted if care is administered.

Medications may be administered if directed in writing by the child's parent or guardian.

Special Circumstances: Parents and guardians are required to inform the Camp Staff in writing of any special circumstances which may affect the child's ability to participate fully and within the guidelines of acceptable behavior, including, but not limited to, any serious behavioral problems or special circumstances regarding psychological, medical, or physical conditions.

Dress Code: Children should dress appropriately for the activities scheduled. We recommend shorts and a light weight shirt or top, and some type of athletic shoe or sneaker in order to participate in recreational or athletic activities. Appropriate rain gear should be worn if needed. Sandals, flip-flops, rubber "cros"-style shoes, and other open-toed shoes are not recommended as acceptable attire for active recreation activities.

Personal Belongings: Please put the child's name on all articles of clothing, snack bags, bags, etc. Children should not bring toys, mobile phones, electronic devices, jewelry, money, or any possession of value with them to any of the programs. Children will be responsible for their belongings.

Sunscreen/Insect Repellent: Please apply sunscreen and insect repellent prior to the start of each camp session. Children may bring sunscreen and insect repellent but must be able to reapply with staff supervision. Spray or mist sunscreen and/or insect repellent are recommended. Sunscreen and/or insect repellent must be labeled with child's name. Children may not share these items with others. Please note that many of the activities will be held in an open, un-shaded area.

Behavior Management/Discipline Policy: Camp Staff will create a fun and safe environment for participants in the program. Praise and positive reinforcement are used as effective methods of behavior management. Children who do not respond to these methods or who are destructive to others or to property will be dealt with in a professional, positive, and timely manner to correct the behavior.

Severe Weather: In severe weather situations the program will relocate to the Heritage House on Sylvania Street. Heavy rain days the program will relocate to Brookville Presbyterian Church at the corner of Main and White Streets.

NOTE: Immediate dismissal from the program can occur at any time given severe circumstances.

Nutrition/Snacks: Morning snack and lunch will be available for children. Every attempt will be made to provide nutritional choices for the campers. Refer to menu below and indicate on registration form which prepared snacks or lunches your child will eat. If campers choose to not eat the prepared selections the parent/guardian is responsible to provide packed food for the camper. Selections can be made on a day to day basis. Any packed snacks should be in a paper, plastic, or reusable bag clearly labeled with the child's name and contain no glass bottles. Snacks must be peanut-free. Please do not send gum or candy.

Drinking water will be available throughout the day. A refillable water bottle will be provided for each camper.

Cost:

Registration is \$10.00 per camper. Cost includes all meals, snacks and programs.
 Scholarships are available to cover cost. If a scholarship is needed please call 849-2413 Monday-Friday 8am-2pm for information.

Registration Due June 14, 2019**Send to:**

Brookville Presbyterian Church
 *KidVenture Registration
 100 White Street
 Brookville PA 15825

*Registration is limited to the first 40 children.
 A waiting list will be used.
Please register early!*

Questions? Please call 814-849-2413

Menu

Day 1	Day 2	Day 3
Morning snack Granola Bar	Morning snack Pastry	Morning snack Muffin
Lunch Hot Dogs (catsup/mustard) Baked beans Fruit Cookie	Lunch Walking Taco's Watermelon chunks Vegetable Sticks Cookie	Lunch Grilled cheese Strawberry/Banana salad Vegetable Sticks Cookie
Water	Water	Water

Daily Schedule

	July 8	July 9	July 10
9:00 am	Arrive	Arrive	Arrive
9:05 am	Energy Snack	Energy Snack	Energy Snack
9:10 am	Opening	Opening	Opening
9:20am	Activity 1	Activity 1	Activity 1
10:20 am	Activity 2	Activity 2	Activity 2
11:20 am	Lunch	Lunch	Lunch
11:50 pm	Activity 3	Activity 3	Activity 3
12:50 pm	Activity 4	Activity 4	Activity 4
1:50 pm	Closing	Closing	Closing
2:00 pm	Pick-up	Pick-up	Pick-up

Activities 1-4 will include:

- Art station, designed and run by CREATE
- Recreation and Games assisted by the Brookville YMCA
- Lesson and Craft
- New Thing each day including Clogging, Soap Making and Labradors

KidVenture Community Day Camp Registration Form

Camper Primary Contact Information

Parent/Guardian

Name(s) (print) _____

Address _____

City: _____ State _____ Zip _____

Email _____

Home Phone _____ Work/Cell Phone _____

Contact info during hours of camp (if other than above) _____

Emergency Contacts

Provide two additional people, not parent/guardian, who could be contacted in the event the primary contact is unavailable.

Name _____ Relationship _____

Home Phone _____ Work/Cell Phone _____

Name _____ Relationship _____

Home Phone _____ Work/Cell Phone _____

Participants

Name _____ Male _____ Female _____

Age _____ Grade completed in 2018 _____

Allergies: Yes _____ No _____ If yes, explain: _____

Medication: Yes _____ No _____ If yes, explain: _____

Special Needs*: Yes _____ No _____ If yes, explain: _____

Snack and Meal Selection

Mark with an x those snacks/lunches your child will eat using the menu provided in the Day Camp Overview presented in the preceding pages.

By not marking the day and meal you are indicating that you will provide and prepare a packed snack/lunch for your child.

Monday Snack _____ Lunch _____

Tuesday Snack _____ Lunch _____

Wednesday Snack _____ Lunch _____

Name _____ Male _____ Female _____

Age _____ Grade completed in 2018 _____

Allergies: Yes _____ No _____ If yes, explain: _____

Medication: Yes _____ No _____ If yes, explain: _____

Special Needs*: Yes _____ No _____ If yes, explain: _____

Snack and Meal Selection

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Monday Snack _____ Lunch _____

Tuesday Snack _____ Lunch _____

Wednesday Snack _____ Lunch _____

Waivers and Informed Consent:

By signing this form, I, as parent/guardian, permit the KIDVENTURE COMMUNITY DAY CAMP Staff to use pictures of my child(ren) as a program participant in promotional literature, videos, and the website. I understand my child(ren)'s name(s) will not be published.

I, as parent/guardian of _____ ("Child"), hereby assume all risks and hazards incidental to the conduct of the activities at KIDVENTURE COMMUNITY DAY CAMP. My Child is fit for the program. I HERELY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS RELEASEES FROM EVERY CLAIM AND ANY LIABILITY THAT I OR MY CHILD MAY ALLEGE AGAINST RELEASEES (including reasonable legal fees and costs) AS A DIRECT OR INDIRECT RESULT OF INJURY OR DEATH TO ME OR MY CHILD BECAUSE OF MY CHILD'S PARTITIPATION IN ANY KIDVENTURE COMMUNITY DAY CAMP PROGRAMS , WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERS TO THE MAXIMUM EXTENT PERMITTED BY LAW. I PROMISE NOT TO SUE RELEASEES ON MY BEHALF OR ON BEHALF OF MY CHILD REGARDING ANY CLAIM ARISING FROM OR RELATED TO MY CHILD'S PARTICIPATION IN ANY DAY CAMP PROGRAM. I ACKNOWLEDGE THAT, BY SIGNING THIS DOCUMENT, I AM RELEASING KIDVENTURE COMMUNITY DAY CAMP, BROOKVILLE PRESBYTERIAN CHURCH and HOLY TRINITY EPISCOPAL CHURCH, AND THEIR REPRESENTATIVES, AGENTS, EMPLOYEES, VOLUNTEERS, MEMBERS, SPONSORS, PROMOTERS, AND AFFILIATES (COLLECTIVELY "RELEASEES") FROM LIABILITY, AND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. THIS SIGN UP AND RELEASE FORM IS A CONTRACT WITH LEGAL AND BINDING CONSEQUENCES AND IT APPLIES TO ALL ACTIVITIES IN WHICH MY CHILD ENGAGES DURING THE KIDVENTURE COMMUNITY DAY CAMP, REGARDLESS OF WHETHER SUCH ACTIVITY IS A PART OF A FORMAL PROGRAM. I HAVE READ THIS RELEASE CAREFULLY BEFORE SIGNING. I UNDERSTAND WHAT THIS RELEASE MEANS AND WHAT I AM AGREEING TO BY SIGNING.

I understand that no insurance coverage for participants in these activities is provided by the KIDVENTURE COMMUNITY DAY CAMP.

Signature: _____ Date: _____

Printed Name: _____

Email: _____ Phone Number: _____

CONSENT TO PHOTOGRAPH, FILM, OR VIDEOTAPE A MINOR FOR NON-PROFIT USE

I hereby consent to the participation in interviews, the use of quotes, and the taking of photographs, movies or video of the minor named above by Holy Trinity Episcopal Church, .

I also grant the right to edit, use, and reuse said products for non-profit purposes including use in print, on the internet, and all other forms of media. I also hereby release Brookville Presbyterian Church and Holy Trinity Episcopal Church and its employees, members, and volunteers from all claims, demands, and liabilities whatsoever in connection with the above.

Signatures of Parent/Guardian: _____

Printed names of Parent/Guardian: _____ Date: _____

Please fill out participant information on following page

Return completed form to:
Brookville Presbyterian Church
KidVenture
100 White Street
Brookville PA 15825