



## Town of Greenfield Recreation Department

20 Sanderson Street Greenfield, MA 01301

Phone (413) 772-1553 FAX (413) 773-0115



March 24, 2011



Hello Campers and Parents!

After a long, cold, and snowy winter, spring is finally here, and summer is soon to follow. It is now time to start thinking about your child's summer plans. This summer has many new and exciting themes and activities planned, as well as all of the traditional camp favorites! We hope your child can join us for one or all of our eight weeks of summer fun for 2011.

Enclosed is an information and registration packet that must be completed before attending camp. Please mail or drop off these forms to the Recreation Department at 20 Sanderson Street in Greenfield, right across from the middle school! There is also a drop box that forms can be left in, right outside the main door. You may also drop them off at Town Hall Monday-Friday between 8:30 AM and 5:00 PM at the Citizen Service Center.

We have already planned field trips to the Pawtucket Red Sox, The Charlemont Inn for a theatrical performance, and the Brattleboro Recreation Park and Pool. We will also be hosting a lunch for the Senior Citizens during our "Full of Character" week. Lots of other fun activities and guests are planned throughout the summer. Check out our summer brochure for a listing and description of our eight sessions.

Please call if you have any questions or suggestions! Also sign up now for your Season Swim Passes or any other summer program. For up-to-date program information, follow us on Facebook!

Sincerely,

Christy Moore  
Recreation Director  
772-1553  
ChristyM@greenfield-ma.gov



## GREENFIELD RECREATION SUMMER CAMP INFORMATION 2011

Dear Parents:

*Welcome* to our 2011 Discovery and Sizzlers Camps. We are looking forward to meeting you and your child. We hope to create summer memories that your child will retain for years to come. With regard to that, the summer staff will spend several days in Staff Training and orientation planning events and activities for the eight weeks of our programs. We look forward to the upcoming weeks and hope that you will join us in our enthusiasm. Our staff will lead a variety of activities to keep your children happy, healthy and safe!

Please read the following important information and go over it with your child and anyone who may be caring for your child before or after the camp day, and keep it for handy reference.

**TIMES:** Our regular program is from 9:00 AM to 4:00 PM, Monday through Friday. Please do not drop your child off early or pick him/her up late. These are the times our staff members are on duty for supervision. *Exception: by pre-registration; you may drop off between 8 and 9 AM each morning (\$10.00 additional each week) or pickup by 5:30 PM (\$15.00 additional each week).* As these programs are self-supporting, we cannot pay staff for extra time unless you are registered.

**SIGN IN / OUT:** Parent / Caregivers need to sign campers in and out each day for their safety. Please park in parking lot and walk your child to the pavilion. Camp staff are under the pavilion with rosters for signing in and out. If anyone other than those approved on your registration form for pick-up will be picking up camper, staff must have a signed note from parents/guardians prior to pick up. The person will be asked to show their ID. A season pass is not required for entry to the park if you are just dropping off and picking up campers.

**TYPICAL DAY:** While we are waiting for everyone to arrive, children play games and have time to talk to friends. Then we engage in a morning gathering, after which we have scheduled activities, including sports, arts and crafts, music etc. A morning snack is provided by the camp. Swim time will be offered to the children daily as weather allows, in the late morning. After lunch there is time for more swimming and more fun games and activities. Snack time occurs around 3:30 PM, followed by more activity until pick up. Each week has activities and events related to a specific theme.

**FOOD:** You may opt to send LUNCH with your child or take advantage of the State-funded School Department free lunch program. ***(provided by the Greenfield School Food Service)*** We do not have the capacity to store perishable items, so SEND ONLY NON-PERISHABLE FOOD & BEVERAGES. No **glass** containers for anything! Our concession stand is available to purchase snacks and drinks. Lunch may not be purchased from the Snack Shack.

**SNACKS:** Snacks are an important part of a child's day. Morning snack will be provided. Please send an afternoon snack including a drink. The food concession stand will be open for your children to purchase snacks.

**WATER:** Water is very **IMPORTANT** during the summer. Water breaks are given frequently! **Please send your child** with a water bottle **that can be refilled**. We will assist children in refilling them as often as needed. If your child requires more water, instruct him or her to tell a counselor!

**RAINY DAYS:** In the event of bad weather, we meet at the Community Youth Center, 20 Sanderson Street. A message will be posted on the Recreation answering machine at 772-1553 by 7:30 A.M. A staff member will be at the Swim Area in case you do not hear of a change. During “Iffy”, drizzly days, we stay at the swim area. You may also call Kelly Terault, the Camp Director at 413-313-3920 after 7:30 AM.

If, during the day, an unexpected heavy rain starts and does not let up, we have made arrangements with the Kuzmeskus Bus Company to pick children up and transport them to the Community Youth Center, 20 Sanderson Street. You may call the office or Kelly to determine if this has been done. Camp will then stay at the Youth Center for the remainder of the day where you will need to pick up your camper at the regularly scheduled time. **If severe weather occurs past 3:00PM, parents will be called for an early, emergency pick-up at the Swim Area.**

**HURRICANE OR OTHER WARNINGS:** **Pick your child(ren) up immediately.** Please listen to local forecasts. Children will be transported to the Youth Center in case of emergency.

**TRANSPORTATION:** If we plan a field trip other than walking or hiking, we will hire a licensed bus company. Parents must sign the trip permission form for their child to attend. Most field trip fees are included with the registration however an extra field trip fee may be required during certain weeks.

**SAFETY:** Is important to us all! **YOU MUST INFORM US IN WRITING, ON A DATED PAPER,** if someone other than the usual person **will be picking your** child up or if your child is allowed to walk or bike home on his/her own, **AND IF THERE IS A CHANGE** in your daily phone number or your alternate **emergency contact. WE MUST BE INFORMED FOR THE SAFETY AND WELL-BEING OF YOUR CHILD.** It is YOUR responsibility.

**STAFF:** All staff members have background checks, CPR and first aid training, participate in staff training, and have experience working with children and many special skills to offer your camper.

**CLOTHING:** **Bring daily: sneakers, bathing suit, towel, snack, water bottle, sunscreen, bug repellent, and hat.** It is recommended you label your child’s belongings. Please send children with extra clothing in case of change in the weather. Play is healthy and necessary for all of us! A child should feel free to participate in activities without having to worry about getting dirty, spilling paint, or on a hot day maybe getting wet. Please dress your child for play, with clothing he or she can get dirty or wet. If you wish, you can send a spare, larger tee shirt to put on over other clothing for this.

**PROTECTION FROM THE SUN:** You need to **apply** sunscreen to your child in the morning. If s/he plans to swim, we recommend you use a waterproof product. Staff can only apply **spray** sunscreen throughout the day. However, campers can assist one another in applying sunscreen before and after swimming (**please provide your child with sunscreen with his or her name on it**). Provide your child with a “swimming” shirt and hat if you feel that extra protection is necessary.

**TIE SHOES AND SOCKS ARE REQUIRED:** Socks and sneakers are required for safety and for protection. **DO NOT SEND YOUR CHILD WITH** sandals, clogs, flip flops, slip-on shoes that may come off or may cause a child to trip during activity. This is very important. The only place bare feet are permitted: the beach.

**SWIMMING:** Swimming is scheduled at the Swim Area, weather and conditions permitting. Lifeguards are on duty any time our program participants are in the water. Children can wear their suits under clothing, and bring a set of underwear if you'd like them to change after swimming. Don't forget a **towel!** **PLEASE INFORM A STAFF MEMBER IF YOUR CHILD CANNOT SWIM.** Campers will be tested and placed in appropriate levels for supervision during morning and afternoon swim.

**ABSENCE:** If your child will not attend for any reason, please call 772-1537 or 772-1553 by 9 AM. Or inform staff onsite of any schedule change. Children who are registered and fail to arrive for a given days activities shall be marked absent. If a child is expected to arrive on his/her own and does not by 9:30A.M., staff will call home and/or their listed contacts.

**HEALTH RECORDS:** Certain health records are required by the Board of Health for both campers and staff. The camper's parent must turn in these (forms are provided) before the child may attend camp.

**MEDICATION NOTE:** If your child needs medication during the program day you will have to make prior arrangements. Also, staff cannot apply sunscreen (only spray) to your child, so please apply before you drop them off each morning. **\*All medications need to be in the original container with prescription, dosage listed, to be stored in a locked box at camp.** You must also complete a medication form. If an allergy is suspected, the parent shall be informed and advised to have the child checked by his/her physician.

**BEE ALLERGIES:** We spend our days outside. If your child is allergic to bees, inform the staff in writing. If an epi-pen is required, you must supply it with instructions.

**MILDLY ILL CHILDREN:** Mildly ill children may remain at camp if they are not contagious and they can participate in the daily program. If the child's condition worsens or if it is determined that the child poses a threat to the health of the other children, or if the staff cannot care for the child, the Camp Director will contact the child's parent. The parent will be asked to pick up the child. The child will be cared for in a quiet area by a qualified staff member until the parent arrives to take the child home.

**EMERGENCY, ILLNESS, INJURY:** Staff members are certified in First Aid and CPR and will take care of very basic first aid. Every effort will be made to contact you if there is an emergency, injury or illness. If they cannot reach you, they will then try to call the person you listed on the registration form as the emergency contact. **IT IS IMPERATIVE THAT YOU INSTRUCT THIS PERSON IN HOW YOU WOULD LIKE THESE SITUATIONS HANDLED AND THAT THEY KNOW YOU HAVE LISTED THEM AS A CONTACT.** We hope never to have to call an ambulance, but all such fees will be your responsibility. We will always try to contact you and have you pick up your child. This is YOUR RESPONSIBILITY, to have someone *always available*.

**COMMUNICATION:** Please encourage your children to talk to a staff member if he or she has a need, a question, a problem, doesn't feel well, etc. Parents please instruct our staff, on paper, in writing of things we need to know. The staff cannot help if he or she is not informed. Parents can consult staff to schedule a time needed to discuss any issues.

### **EMERGENCY PROCEDURES:**

In the event of an emergency, the following procedure will be followed:

1. Situation and needs will be assessed.
2. Staff will call 911 first and parents second if the situation is severe or life threatening.
3. Staff will call parents first if the situation is not considered severe or life threatening. In the event that the parents or emergency contacts cannot be reached, staff will call an ambulance. Staff will not transport children to the hospital or doctor's office.
4. If staffing allows, a staff person will accompany the child in the ambulance to the hospital until the parents arrive.

**BEHAVIOR AND DISCIPLINE:** We, the campers and parents, expect and demand good and courteous behavior, and respect for all others. We do not allow the use of improper language, teasing that may hurt someone, bullying, and any kind of physical or verbal abuse. A child who exhibits this kind of behavior will be spoken to by the staff. If the staff are unable to reach a satisfactory resolution, you will be contacted.

### **BEHAVIOR MANAGEMENT:**

1. Staff will provide guidelines for the children concerning appropriate behavior and rules to be followed. Staff will encourage positive behavior by giving positive reinforcement and close supervision.
2. Children will be redirected into another activity if infrequent, minor behavior problems occur. Continued or more severe behavioral problems will be dealt with using a "cool down" where the child will be asked to sit out of the activity for a few minutes until he/she is ready to return to the activity.
3. At no time will a child be disciplined in an inappropriate, demoralizing, humiliating, or abusive manner.
4. Parental input may be asked to curb inappropriate behaviors. Parents may be asked to attend a conference if necessary.
5. Incident Reports are completed and filed when the following occurs:
  - Inappropriate behavior is displayed on a consistent basis.
  - Inability of a child to adjust to the routine and/or requirements of our program.
  - A child physically or verbally harms another child or a staff person.
  - A child purposely damages Town property or the property of another individual.
  - A child uses foul language.
  - A child refuses to follow a staff person's instructions.
  - Any other instance deemed necessary that are not listed in this handbook.

**SUSPENSION & TERMINATION POLICY:** Suspension or permanent termination may be deemed necessary under certain situations. The Camp Director will make the final decision to suspend or terminate a child. All cases will be reviewed by the Recreation Director.

Suspension or termination could result in the following instances:

- If a child receives 3 incident reports during the summer.
- If physical or emotional harm is brought to another child or staff person.
- In other extreme instances not listed in this handbook.

**IDENTIFYING AND REPORTING ABUSE AND NEGLECT:** All children enrolled in our Camp Program shall be protected from abuse and neglect. Suspected cases of abuse or neglect will be reported to the Recreation Director in writing with all factual information and observations of the child in question immediately. The report will be signed, dated and true to the best of the staff person's knowledge. All Camp staff are mandated reporters and must report any suspicions of abuse or neglect to the Director who will report the suspected case immediately to the Department of Children & Families.

Any staff person under investigation will be removed from direct care responsibilities until the Department of Children & Families investigation is complete. If the investigation proves the complaint is valid, the staff member will be dismissed immediately.

***These camps must comply with regulations of the Massachusetts Department of Public Health and be licensed by the local Board of Health.***

Thank you in advance for your cooperation. If you have any questions please speak with the camp staff at your child's site or call Recreation Director, Christy Moore at 772-1553 anytime.

**GREENFIELD RECREATION DEPARTMENT  
DISCOVERY/SIZZLERS CAMP CONTACT FORM 2011**

Child's Name \_\_\_\_\_ Nickname \_\_\_\_\_ Gender \_\_\_\_\_

Birth date \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ Home # \_\_\_\_\_

**FAMILY INFORMATION**

Parent/Guardian \_\_\_\_\_ Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ Cell \_\_\_\_\_ Phone # \_\_\_\_\_ Cell \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Work # \_\_\_\_\_ Work # \_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

Who is the **PRIMARY** contact for this child? \_\_\_\_\_

**PERSONS AUTHORIZED TO PICK UP CHILD & AS EMERGENCY CONTACTS**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

**HEALTH INFORMATION**

• Insurance Company \_\_\_\_\_

• Policy Number \_\_\_\_\_ Insurer \_\_\_\_\_

• Allergies or food allergies/restrictions? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain \_\_\_\_\_

What actions need to be taken \_\_\_\_\_

• Does your child have a chronic illness? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain \_\_\_\_\_

• Name and phone # of Physician? \_\_\_\_\_

• Does your child take any medications? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain \_\_\_\_\_

What actions need to be taken \_\_\_\_\_

• Other information that our staff should be aware of? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain \_\_\_\_\_

What actions need to be taken \_\_\_\_\_

This Program complies with regulations of the Massachusetts Department of Public Health (105CMR430) and is licensed by the Greenfield Board of Health. Information on these regulations can be obtained at (617) 983-6761.

**Greenfield Recreation Department  
Summer Recreation Program  
HEALTH MAINTENANCE FORM**

**This form must be received by the Greenfield Recreation Department  
BEFORE your child may attend the program**

Name: \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

**Physical Exam Findings:**

BP \_\_\_\_\_ / \_\_\_\_\_ P \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Physical Development: \_\_\_\_\_ WNL \_\_\_\_\_ AB

Nutritional Status: \_\_\_\_\_ WNL \_\_\_\_\_ AB

Skin: _____ WNL _____ AB	Eyes: _____ WNL _____ AB
Ears: _____ WNL _____ AB	Nose: _____ WNL _____ AB
Mouth: _____ WNL _____ AB	Teeth: _____ WNL _____ AB
Neck: _____ WNL _____ AB	Throat: _____ WNL _____ AB
Heart: _____ WNL _____ AB	Spine: _____ WNL _____ AB
Abdomen: _____ WNL _____ AB	

**ACUTE / CHRONIC MEDICAL CONDITIONS:** \_\_\_\_\_

**ALLERGIES:** \_\_\_\_\_

**DAILY / PRN MEDICATIONS:** \_\_\_\_\_

**IMMUNIZATIONS:**

DTP1 \_\_\_\_\_ DPT2 \_\_\_\_\_ DPT3 \_\_\_\_\_ DPT4 \_\_\_\_\_ DPT5 \_\_\_\_\_ TD \_\_\_\_\_  
MMRI1 \_\_\_\_\_ MMRI2 \_\_\_\_\_ HEPB1 \_\_\_\_\_ HEPB2 \_\_\_\_\_ HEPB3 \_\_\_\_\_  
OPV1 \_\_\_\_\_ OPV2 \_\_\_\_\_ OPV3 \_\_\_\_\_ OPV4 \_\_\_\_\_

\_\_\_\_\_  
MD Signature

\_\_\_\_\_  
Date

**Return this, or a similar Doctor's Form to:**  
Greenfield Recreation Department  
20 Sanderson Street  
Greenfield, MA 01301

# Greenfield Recreation Department Camper Survey 2011

Camper's Name: \_\_\_\_\_ Camper's Age: \_\_\_\_\_

*Please take the time to fill out and return this camper questionnaire with your camper's registration. This will help us to best accommodate your camper's needs and interests.*

1. Camper's favorite subject(s) in school are?
2. What activities does your camper enjoy doing while he or she is at home?
3. What activities or themes from years past did you camper enjoy the most?
4. What activities or themes mentioned in the camp information packet is your camper looking forward to the most?
5. What activities that are not mentioned in the camp information packet would your camper like to do?
6. Does your camper enjoy physical or quiet activities? Explain.
7. Does your camper enjoy group-oriented or individual activities? Explain.
8. Is there anything else you would like us to know about your camper that would enable us to make his or her experience as enjoyable as possible?