

Gloucester County College

Summer Camp Connections

Registration Forms

Authorization for Pick-Up and Drop-Off

If you need emergency camper pick up, you must send a note or call the camp at 856-415-2217/415-2218 (include the person's name, relationship, and pick-up dates).

Only the people listed below are authorized to drop off and pick up, _____, my child, from the summer camp program at Gloucester County College.

Name	Relationship	Home Telephone	Work Telephone
Name	Relationship	Home Telephone	Work Telephone

Emergency People/Car Pool:

Name	Relationship	Home Telephone	Work Telephone
Name	Relationship	Home Telephone	Work Telephone

If Unavailable in an Emergency Notify: (List Two)

Children will only be released to individuals who are authorized. If you wish to have your child picked up by individuals not on this list, you must provide the camp with a revised authorization list 48 hours before pick-up date.

Name	Relationship	Home Telephone	Work Telephone
Name	Relationship	Home Telephone	Work Telephone

If an emergency illness or injury occurs, I (parent/guardian) hereby authorize Gloucester County College to treat and/or send this person to a physician or hospital and authorize the necessary treatment. I also authorize the physician or hospital to release my child after treatment to a representative of Gloucester County College. All information on this form is complete, true and accurate to the best of my knowledge. In case of evacuation, I give permission for Gloucester County College to relocate my child to a designated safe location.

In addition, I give permission for the above mentioned child to be photographed/video taped during this camp season by a representative of Gloucester County College. I understand that the photographs/videotapes will be used by Gloucester County College for the purpose of publicizing and promoting the College's programs and services, and that no compensation will be offered to the child or the family.

(Signature of Parent/Guardian)

(Date)

THIS PAGE MUST BE INCLUDED WITH EACH REGISTRATION

Gloucester County College EMERGENCY HEALTH/MEDICAL FORM (WAIVER)

This form is required for all participants in Gloucester County College's Summer Camp Connections. PLEASE NOTE: Persons who fail to present completed form with a signature of a parent or guardian and physician prior to Summer Camp will be ineligible to participate in the camp. Please print all information

CAMPER'S NAME _____
Last First MI HOME PHONE

_____ Street Address City State ZIP

CAMPER'S SS# _____ DATE OF BIRTH _____ SEX: Male Female AGE: _____

Which camp(s) is your child registered for:

Parent Name: _____ Daytime Phone: _____ E-mail Address: _____

Parent Name: _____ Daytime Phone: _____ E-mail Address: _____

Family Physician: _____ Phone: _____

Family Dentist: _____ Phone: _____

PLEASE COMPLETE THE FOLLOWING:

Currently under a physician's care for: _____

Current medication(s) being taken: _____

ALL MEDICATIONS, INCLUDING INHALERS & EPI PENS, MUST BE STORED WITH THE HEAD COUNSELOR AND ADMINISTERED BY AUTHORIZED PERSONNEL. ALL MEDICATION MUST BE PRESENTED IN THE ORIGINAL PACKAGE WITH DOSAGE INDICATED. A COMPLETED PRESCRIPTION NOTE FROM THE PHYSICIAN IS REQUIRED.

Were you ever advised not to allow this child to play in any sports? Yes* No

List any malfunction or loss of a paired organ: _____

List any allergies including bee stings, hives, asthma _____

Circle which applies: Child uses epi pen/child uses an inhaler (indicate type) _____

Child can use this independently Yes* No

Has child: (a) had difficulty with sight? Yes* No

(b) had difficulty with hearing? Yes* No

Does child have a history of fainting with exercise? Yes* No

Has child experienced recent loss of family member or close friend? Yes* No

***PLEASE EXPLAIN. SPECIFY ALL KNOWN MENTAL AND PHYSICAL CONDITIONS (ATTACH EXTRA PAGES IF NECESSARY)**

According to state law, all campers must be immunized or submit a statement of religious or philosophical exemption. Please attach a copy of the completed immunization record for your child.

 Physician's signature required

 Date

THIS PAGE MUST BE INCLUDED WITH EACH REGISTRATION

Gloucester County College Summer Camp Connections CAMPER CODE OF CONDUCT AGREEMENT

Camper Name (please print) _____

I will always have the opportunity to meet with the camp director or other camp staff to tell my side of any incident that is being reported to the camp office. I will report any problems that I am having at camp or with any staff member to the camp director.

1. I will remain with my camp program or trip at all times and will not leave without a camp administrator's permission.
2. I will not bring expensive jewelry, electronic games of any kind, and trading cards or comics to camp.
3. I will respect camp property, off-site facilities, and all bus transportation. I will not chew gum at camp. If I willfully destroy property or equipment, monetary reimbursement will be required.
4. I will obey fire drill safety and never pull or play with a fire alarm.
5. I will respect the safety of everyone in a moving vehicle and will obey all bus rules.
6. I will respect personal property of campers and staff and not take anything that doesn't belong to me.
7. I will respect the camp staff and follow instructions. I will not run away from my group or camp counselors. I will move about the corridors in a quiet and orderly fashion and not linger or wander between classes.
8. I will be a good camp friend and not fight or instigate a fight. I will not hurt anyone with unkind words or actions. Any object that may hurt or place another person in fear of his/her safety may be considered a weapon and is cause for serious disciplinary action that could include immediate expulsion from camp. The camp director will investigate and resolve any safety issue immediately.
9. I will show respect for everyone and only use appropriate language and gestures at camp.
10. I will obey Internet safety rules as instructed by my teacher. Failure to obey Internet safety may include immediate expulsion from camp.

Parent/Guardian Signature

Date

Camper Signature

Date

A completed Camper Code of Conduct Agreement, an Authorization for Pick Up, and Health History and Medical Authorization must be submitted with every camp registration.

THIS PAGE MUST BE INCLUDED WITH EACH REGISTRATION

Gloucester County College Summer Camp Connections DISCIPLINARY POLICY

In order to maintain and ensure an orderly and enjoyable camping experience for everyone, it is necessary to adhere to the following discipline policy.

First Offense: Camp director will discuss the problem with the camper. Director will also notify the parent(s)/guardian(s) of the situation by telephone.

Second Offense: Camper will meet with the Head Counselor, Director and the parent to attempt to resolve the situation

Third Offense: Immediate expulsion from the camp. No refund for remaining camp session. Camper would not be allowed to return to any remaining camp session during that year.

NOTE: The College reserves the right to immediately dismiss, without refund, any camper who demonstrates aggressive or violent behavior, such as fighting or destruction of property.

The following are examples of offenses requiring disciplinary action. Including but not limited to the use of:

Obscenities, drugs, aggressive behavior (pushing, shoving, biting), stealing, verbal disruption of activity and a flagrant

Disregard of camp rules.

Other items:

Please discourage your camper from bringing money, games, or toys from home.

The college is not responsible for money lost in vending machines.

Professional level staff is available at all times for medical emergencies.

Please note: We strongly recommend that your child not bring anything valuable to camp. Gloucester County College will not be responsible for any item that is lost or stolen.

*******PLEASE READ BEFORE SIGNING*******

I have read and understand the foregoing discipline policy and agree to all of the terms and conditions.

Camper's Name

Parent/Guardian Signature

Date

Camper Signature

Date

THIS PAGE MUST BE INCLUDED WITH EACH REGISTRATION

Connections Camp Registration

(Feel free to duplicate this form)

Fees: \$285 per 2-week session

Monday – Thursday: 9:00 am–3:00 pm

\$45 per Friday

Field Day Friday

Extended-care Monday – Friday: 8:00 am–5:00 pm

\$340 for session 1 (includes 1 Friday)

\$385 for sessions 2 or 3 (includes 2 Fridays each)

Sports Camp

Fees: \$150 per 1-week session, 9:00 am–12:00 pm

\$250 per 1-week session, 8:00 am–5:00 pm

Police Youth Camp

Fees: \$200 per 2-week session, 8:00 am–4:00 pm

Camper's First/Last Name _____ Birth Date _____

Sessions	Check here for Extended Care	Camp Choices with Code	Cost & Materials Fee
June 29 to July 9			
July 13 to July 23			
July 27 to August 6			
Sports/ Police Youth			
Field Day Friday — Please list Friday Date(s)			
<p>Full payment is due at registration. Costs include all activities and materials. Duplicate this form as needed per child.</p>	Subtotal:		
	Deduct 10% for Early Bird Discount (Register on or before April 10, 2009) <i>(Does not apply to Police Youth Camp)</i>		
	Total Fees:		

Home Phone: _____

Street Address: _____

City/State/ZIP: _____

Mother's Name: _____ Day Phone: _____

Father's Name: _____ Day Phone: _____

E-mail Address: _____

I understand that neither Gloucester County College, Gloucester County Institute of Technology, the Directors, nor anyone connected with the camp will assume any responsibility for accidents, medical, dental or other expenses incurred as a result of accidents sustained during or as a result of any activity/instruction given to the applicant by the camp staff. I hereby authorize the Directors to act on my behalf according to their best judgement in any emergency requiring medical attention.

Signature (Parent sign for children)

Please check here if your child requires medication during camp.

Credit Card Users:

Please fill in the information below. All information must be complete and accurate before we process your registration.

Circle: VISA MasterCard Discover Card American Express

Card# _____

Exp. Date _____

Signature _____

Phone Registrations: 856-415-2217 or 415-2218

Web Registration: <https://conted.gccnj.edu>

Mail-In Registration:

With this application and payment you are registered. Unless notified to the contrary, please report on the first day of the session.

Please mail your registration form, payment to:

Gloucester County College
Division of Continuing Education
Summer Camp Connections
1400 Tanyard Road
Sewell, NJ 08080

Make checks payable to: Gloucester County College

Questions? Call 856-415-2217 or 415-2218

Please include Authorization for Pick-Up, Medical Form, Conduct Agreement and Disciplinary Policy with registration.