

Reg # _____

Date/Time Received _____

Staff Initial _____

EMCC Little Lions Making Strides Summer Day Camp
June 4, 2019-June 5, 2019, 8:00 a.m.-4:00 p.m.
Summer 2019 Registration Form

Dear Parent(s) or Legal Guardian(s):

Thank you for having an interest in East Mississippi Community College's (EMCC) Little Lions Summer Day Camp. Below you will find basic information that will help you prepare your child for camp. In order for your child to participate, you need to:

1. Fill out the attached enrollment form;
2. Sign the attached youth release of liability form;
3. Submit the registration packet no later than Friday, May 17, 2019 @ 12:00 noon in the Wellness Center on the EMCC campus.

Registration

Once you submit your child's application you will be called by an EMCC Wellness Center staff member no later than Tuesday, May 21, 2019 to confirm your child's registration status. ***Reminder: Registration for this camp is on a first come first serve basis.*** The first twenty-five (25) applicants will be accepted upon approval. All other applicants will be placed on a waiting list and notified if a spot becomes available.

There WILL BE NO DAY-OF or ON-SITE REGISTRATION and NO EXCEPTIONS will be considered. You must pre-register and enroll your child prior to Friday, May 17 @ 12:00 noon. The first twenty-five (25) participants to meet eligibility requirements will be admitted.

Daily Schedule

- Camp will operate from 8:00 a.m. until 4:00 p.m., Tuesday and Wednesday. Participant drop-off will be from 7:30 a.m. -8:00 a.m. at the EMCC Wellness Center on the EMCC Campus.
- Pick-up will begin at 4:00 p.m. and last until 4:30 p.m.
- Parents/ Guardians are required to walk the camper into the Wellness Center and sign the camper in and out.
- In general, the day will include a healthy breakfast, lunch, and an afternoon snack as well as a fun combination of nutrition education and fitness activities. A more detailed schedule will be available on the first day of camp. Water will also be provided for campers throughout the day.

Attire

Children will need to wear an athletic shirt, shorts, and shoes. There will be activities that will require running and kicking. **NO sandals, flip-flops, or similar shoes are permitted.** Unfortunately, your child will not be allowed to participate if they do not have on appropriate shoes. Since most of the camp will be conducted outdoors, **children should also arrive with sunscreen on. We recommend that campers bring their own sunscreen to reapply throughout the day.**

Cathy B. Castleberry, Camp Director
662-476-5035
ccastleberry@eastms.edu

Frequently Asked Questions

1. How much does this camp cost? The EMCC Healthy Kids Camp cost is **free**.
2. How old does my child have to be to attend camp? Campers must be between the **ages of 6 and 9**.
3. When will drop-off and pick-up be?
 - Drop-off will be from 7:30 a.m.-8:00 a.m. at the EMCC Wellness Center
 - Pick-up will be from 4:00 p.m.-4:30 p.m. at the EMCC Wellness Center
4. What types of food will be served for lunch?
 - Healthy food options may include grilled chicken tenders, fresh fruits and vegetables, baked chips, and a lower calorie dessert.
5. What types of activities will my child participate in?
 - Organized sports such as sand volleyball, badminton, tennis, and soccer. Recreational sports such as broomball, relay races, and hop ball among other fun activities.
6. What are the behavioral expectations?
 - Since this is a structured and educational recreation camp, youth are expected to treat each other, staff, camp equipment, and the public with respect. Our goal is to provide campers with a physically and emotionally safe atmosphere. Inappropriate behavior will not be tolerated. Physical bullying (i.e. pushing, hitting, fighting) and emotional bullying (i.e. name calling, teasing, put-downs, racial/ethnic slurs) will not be tolerated. Remarks or physical contact of a sexual nature will not be tolerated. Behavior mentioned above will be grounds for immediate dismissal from the camp, whether it is directed towards other campers, camp staff, or the public. Campers that are the target of such behavior **must inform camp staff of the incident immediately**. Behavioral guidelines are to be followed at all times regardless of the location of the activities. **If a child is expelled from the camp, the child may not return for the remainder of camp**. In cases where there are major behavioral issues, the below sequences of events will take place:

Major Behavioral Consequences_{st}

1st Offense – Warning

2nd Offense – Time Out

3rd Offense – Expulsion (Parent Pick-Up)

7. How do I enroll a child? Submit a registration packet no later than Friday, May 17th @ 12:00 noon in the Wellness Center on the EMCC campus. Once you submit your child's application you will be called by an EMCC Wellness Center staff member no later than Tuesday, May 21, 2019 to confirm your child's registration status. *****Reminder: Registration for this camp is on a first come first serve basis.***** The first twenty-five (25) applicants will be accepted upon approval. All other applicants will be placed on a waiting list and notified if a spot becomes available.

Registration Form – EMCC Little Lions Making Strides Summer Camp – Summer 2019

Parent/Guardian Name _____

Parent/Guardian Address _____

City _____ State _____ Zip _____

Phone Numbers: (Home) _____ (Cell) _____ (Work) _____

Email(s): _____

(1) Child Name _____ Gender: F ____ M ____

Age during Camp _____ Date of Birth _____

Child 1: T-Shirt Size (please circle **one**); Youth Size S M L Adult Size S M L XL

(2) Child Name _____ Gender: F ____ M ____

Age during Camp _____ Date of Birth _____

Child 2: T-Shirt Size (please circle **one**); Youth Size S M L Adult Size S M L XL

(3) Child Name _____ Gender: F ____ M ____

Age during Camp _____ Date of Birth _____

Child 3: T-Shirt Size (please circle **one**); Youth Size S M L Adult Size S M L XL

(4) Child Name _____ Gender: F ____ M ____

Age during Camp _____ Date of Birth _____

Child 4: T-Shirt Size (please circle **one**); Youth Size S M L Adult Size S M L XL

Continued on the next page

THE EMERGENCY CONTACT

THIS PERSON SHOULD BE SOMEONE WHO HAS THE LEGAL AUTHORITY TO MAKE A DECISION FOR YOUR CHILD
IN THE EVENT ON AN EMERGENCY

Emergency Contact: _____
Relationship: _____
Emergency Contact Cell () _____ Work () _____ Home () _____
Family Physician: _____
Health Insurance Carrier: _____
Health Insurance Phone Number: _____ **Policy #** _____
Name of Insured Please print policy number

Please list any special services your child may require including:

*** Please ask for an additional sheet if you're listing information for more than child***

Medications: _____
(Include what, when to take, how to take, symptoms, and how to manage medication)

Prescriptions: _____
(Include name of medicine, when to use, how to use, and how to store meds)

Known Behavioral Concerns: _____
(Include any diagnosed behavior syndromes, illnesses, or issues, how to deal with these, and any prescribed modification techniques currently used)

Food Allergies: _____
(Include name of any and all allergies, how to deal with them and how to handle an emergency)

Other: _____

As a parent/guardian, I agree to all of the below. Please initial each line and sign below.

_____ I understand that if my child misbehaves, immediate dismissal will occur, and I will be required to pick up my child immediately and not receive a refund in any manner.

_____ I also understand that this camp is a service provided by East Mississippi Community College in cooperation with the Healthy Campus/Community Initiative and the Blue Cross and Blue Shield of Mississippi Foundation in an attempt to provide Kemper County area children an opportunity to develop lifelong recreation skills and physical activity levels.

_____ I understand that action photographs will be taken at camp which my child may be in while participating in camp activities.

_____ I further give permission and consent that all such photographs may be published and used by the EMCC Little Lions Making Strides Summer Day Camp and East Mississippi Community College and BC/BS and affiliates, to illustrate and promote the camp experience, Little Lions Making Strides Summer Day Camp and East Mississippi Community College.

_____ By NOT signing this confirmation of understanding and all above initiated areas, I fully understand that my child WILL NOT participate in the Little Lions Making Strides Summer Day Camp. _____

Signed: _____ Date: _____
(Parent/Guardian)

Please see waiver on the following page

East Mississippi Community College
Department of Student Affairs
Wellness Center/Intramural Sports/Summer Camps
Assumption of Risk and Release

In consideration of receiving permission to participate in the Wellness Center/Intramural Sports/ Summer Camp activities at East Mississippi Community College, I hereby release, waive, discharge and covenant not to sue, the Community College, the Board of Trustees of East Mississippi Community College, and all other officers, servants agents, or employees, from all liability, claims, demands, actions, and causes of action what so ever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, even if caused by the negligence of East Mississippi Community College, while participating in such activity, or while in, on or upon the premises where the activity takes place.

- A. To the best of my knowledge, I am in good physical condition and fully able to participate in Wellness Center/Intramural Sports/Summer Camp activities. I am fully aware of risks and hazards connected with events associated with these activities, including the risk of physical injury or even death, and I hereby elect to voluntarily participate, knowing that the activity may be hazardous to me and my property. I acknowledge that I have been advised to consult my physician and undergo a health evaluation to determine my fitness for strenuous activity before participating. I voluntarily assume full responsibility for any risks of loss, property, or personal injury, including death, which may be sustained by me, or any loss or damage to property owned by me, as a result of participating in such activity.
- B. I further hereby agree to indemnify and hold harmless East Mississippi Community College from any loss, liability, damage or costs, including court cost and attorney's fees that they may incur due to my participation in said activity, even if caused by negligence of the College.
- C. It is my express intent that this Release shall bind the members of my family and spouse, as well as my heirs, assigns, and personal representative. I further agree that this Release shall be constructed in accordance with the laws of the State of Mississippi.

In signing the Release, I acknowledge and represent that I have read it, understand it, and sign it voluntarily as my own free act and deed; now oral representations, statements or inducements, apart from the Release have been made. I am at least eighteen (18) years of age and fully competent or, if less that eighteen (18), my parent(s) or legal guardian must also execute this Release; and I (we) execute this Release for full, adequate, and complete consideration fully intending to be bound to it.

ALL INFORMATION BELOW MUST BE COMPLETE AND LEGIBLE

I, _____ as the PARENT/GUARDIAN Agree to allow:

- (1) _____
(child's full legal name)
- (2) _____
(child's full legal name)
- (3) _____
(child's full legal name)
- (4) _____
(child's full legal name)

to be a willing participant in Little Lions Making Strides Summer Day Camp and ensure my child will act in responsible/safe manner under direction of the Little Lions Camp personnel while at the Little Lions Making Strides Summer Day Camp and while traveling to and from activity sites.

Please initial each line before each paragraph after the paragraph is read and understood.

___ I understand that my child may be exposed to risks and hazards inherent to the aforementioned activity and that there are dangers involved that cannot be fully foreseen or controlled by East Mississippi Community College and the Wellness Center Department. I acknowledge that no one can warn me of all of the dangers associated with the aforementioned activity and that the responsibility is upon me to investigate any activity, hazard, or thing which may be dangerous or that I do not understand. By signing below, I agree that my child will follow all instructions and guidelines at all times for everyone's safety, and willingly assume the risks and responsibilities that are involved in order to participate in this activity.

___ I agree that my signature denotes my child's affirmation to abide by all state, local and federal laws as well as the EMCC Code of Student Conduct, EMCC policies and procedures, and any applicable rules, regulations, policies and procedures of the host agents/agencies.

___ I understand that I am solely responsible for assessing whether my child's skills, equipment and level of physical and mental fitness are adequate for participation for this activity. I represent that I have full knowledge of my child's skills, equipment and level of physical fitness necessary for participation on this trip and that I meet or exceed these requirements.

___ I understand the outdoor recreation activities may be **physically and emotionally challenging. I assume the risks of my child's personal injury, vehicle accidents traveling to and from the activity sites, accidents and/or illness, including but not limited to sprains, strains, torn muscles and/or ligaments; fractured or broken bones; eye damage; cuts, wounds, scrapes, abrasions and/or contusions; dehydration, drowning and/or oxygen shortage; exposure or weather-related conditions; heat and cold injuries; head, neck and/or spinal injuries; bite or attack by animal, insect, or marine life; allergic reaction; shock, myocardial infarctions, paralysis or death; and serious injury or impairment to other aspects of my body and general health and wellbeing. I understand that equipment may fail, and such failure could contribute to my injury or death. I understand that the aforementioned list of possible hazards and risks is not inclusive. My participation in this camp is completely voluntary and is undertaken in spite of the hazards and risks involved.**

___ I give permission for the activity leaders to seek emergency medical, rescue or evacuation services for me should my child become injured or ill with the understanding that I am responsible for any expenses incurred. I fully understand that East Mississippi Community College and the EMCC Wellness Center does not provide any medical insurance coverage for my child while participating in this activity. I also realize that my child/children will be attended to by the activity leaders until medical care is available. I understand and agree that Releasees will not have medical personnel available during the activity. I understand and agree that Releasees, including East Mississippi Community College personnel and representatives, are granted permission to authorize emergency medical treatment, if necessary, and that such action by Releasees shall be subject to the terms of this Agreement. I understand and agree that Releasees assume no responsibility for any costs, expenses, injury or damage which might arise out of or in connection with such authorized emergency medical treatment.

___ It is my express intent that this release and hold harmless agreement shall bind the members of my family and spouse, if I am alive, and my estate, family, heirs, administrators, personal representatives, or assigns, if I am deceased, and above-named Releasees. I further agree to save and hold harmless, indemnify, and defend Releasees from any claim by me or my family, arising out of my participation in this Camp.

___ In signing this Release, I acknowledge and represent that I have fully informed myself of the content of the foregoing waiver of liability and hold harmless agreement by reading it before I sign it, and I understand that I sign this document as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written statement, have been made. I understand that East Mississippi Community College does not require me to participate in this activity but I want to do so, despite the possible dangers and risks and despite this Release. I further state that I am at least eighteen (18) years of age and fully competent to sign this Agreement; and that I execute this release for full, adequate, and complete consideration fully intending to be bound by the same. I

further state that there are health-related reasons or problems which preclude or restrict my participation in this activity and that I have adequate health insurance necessary to provide for and pay for any medical costs that may be attendant as a result of sickness or injury to me and that Releasees shall have no responsibility for the payment of same. I further agree that this Release shall be construed in accordance with the laws of the State of Mississippi. If any term or provision of this Release shall be held illegal, unenforceable, or in conflict with any law governing this Release the validity of the remaining portions shall not be affected thereby.

Signed: _____ Date: _____
(Parent/Guardian)

Print Full Legal Name _____

Date of Birth ____ / ____ / ____ Drivers ID# _____

- END -