Spring Break/Summer Camp

The cost of Camp Vamonos! spring break or summer camp is \$240 per week. The cost does not include food; parents provide a healthy lunch and four snacks per child per day.

** Deposit of 50% is due upon registration. **

** Please turn in the <u>remaining balance</u> by the first day your child attends. **

** Make checks payable to Megan Baker. **

In the past I have spoken Spanish to the campers who come to Camp Vamonos!, but have been moving away from it due to the resistance it often meets. Realistically, children can gain some comprehension if hearing Spanish for a good chunk of the summer, but those coming for just a few weeks will likely not benefit much, especially as they are here to play and socialize, not talk with me most of the day.

Going forward, I will be happy to speak Spanish to campers whose parents request it and who are not resistant. Feel free to mention your needs in this department and I will accommodate them the best I can!

Thank You!

Emergency Contacts

Child's full name:	
Child's date of admission (child's first day of attended)	dance at Camp Vamonos!):
Age:	Birthdate:
Name of parent(s)/guardian(s):	
Address, City, State & Zip:	
	uring camp hours: _ Work phone(s) _ Email address(es):
Address, City, State & Zip:	_Relationship:
Daytime phone number: List someone the child can be released to in the e Name: Address, City, State & Zip: Daytime phone number:	vent the parent cannot pick the child up: _Relationship:
Physician/healthcare provider:Address:	Phone number:
In case of emergency, which medical facility would	
Address:	
Insurance provider: Policy number:	
Please list any known allergies to foods, drugs, et	o.:
Please list any existing health conditions, illnesses	s, or issues:
Please list previous serious illness or injury, hospi medications taken for continuous, long-term use:	
Is there anything else we should know?	

Release Form and Emergency Care Authorization

I am the parent legal guardian (check one) I give permission for my child to attend Camp Vamonos!) of (child).
In case of accident or sudden illness involving my child, a phone in a safe and reasonable time, I authorize a repres or provide any and all emergency medical treatment dee a licensed physician or authorized medical technician.	sentative of Camp Vamonos! to consent
I understand and agree to be responsible for all costs an in connection with any medical or treatment services ren	
Signature:	Date:
I give my permission that my child can participate in sui including swimming and bike riding, provided by Megan E and staff of Camp Vamonos!	·
My child has my permission to participate in field trips Vamonos! My child has my permission to use prival designated representative of Camp Vamonos!, public to commuter rail), or walking in the pursuit of these and other	te transportation that is operated by a transportation (Capital Metro buses and
••	
Signature:	Date:
I unconditionally waive and release Camp Vamonos! and and hold these persons harmless from any and all claims asserted against Camp Vamonos!, its owners, employed result of any injuries, expenses, or loss of compensation indirect result of the use of services, facilities, instruction direct or indirect result of my child's participation, or frow Vamonos!, including any act or failure to act.	d its owners, employees and counselors, s, rights or causes of action which may be es and counselors by any person as the suffered by my child or me, as a direct or or premises of Camp Vamonos!, or as a
I unconditionally waive and release Camp Vamonos! and hold these persons harmless from any and all claims asserted against Camp Vamonos!, its owners, employeresult of any injuries, expenses, or loss of compensation indirect result of the use of services, facilities, instruction direct or indirect result of my child's participation, or from	d its owners, employees and counselors, s, rights or causes of action which may be es and counselors by any person as the suffered by my child or me, as a direct or or premises of Camp Vamonos!, or as a om any negligence on the part of Camp is any member of my family covered by, rve to compensate members of my family on or any other damage of any kind which ct or indirect result of the use of services,
I unconditionally waive and release Camp Vamonos! and and hold these persons harmless from any and all claims asserted against Camp Vamonos!, its owners, employeresult of any injuries, expenses, or loss of compensation indirect result of the use of services, facilities, instruction direct or indirect result of my child's participation, or frowamonos!, including any act or failure to act. I am aware that Camp Vamonos! does not provide, nor any policy of liability insurance which would otherwise se in the event of an injury, expense, or loss of compensation of any member of my family may experience as a direct facilities, instruction or premises of Megan Baker, Marchael and the services and the services of the services and the services and the services of the services and the services are directly the services and the services are services.	d its owners, employees and counselors, s, rights or causes of action which may be es and counselors by any person as the suffered by my child or me, as a direct or or premises of Camp Vamonos!, or as a om any negligence on the part of Camp is any member of my family covered by, rve to compensate members of my family on or any other damage of any kind which of or indirect result of the use of services, argarito Hernandez or Camp Vamonos!, spouse, heirs, assigns, dependents, his agreement is also binding upon my
I unconditionally waive and release Camp Vamonos! and and hold these persons harmless from any and all claims asserted against Camp Vamonos!, its owners, employed result of any injuries, expenses, or loss of compensation indirect result of the use of services, facilities, instruction direct or indirect result of my child's participation, or frowamonos!, including any act or failure to act. I am aware that Camp Vamonos! does not provide, nor any policy of liability insurance which would otherwise see in the event of an injury, expense, or loss of compensation or any member of my family may experience as a direct facilities, instruction or premises of Megan Baker, Maincluding any act or failure to act. This agreement is binding upon me and upon my personal representatives, attorneys and my estate. The	d its owners, employees and counselors, s, rights or causes of action which may be es and counselors by any person as the suffered by my child or me, as a direct or or premises of Camp Vamonos!, or as a om any negligence on the part of Camp is any member of my family covered by, rve to compensate members of my family on or any other damage of any kind which ct or indirect result of the use of services, argarito Hernandez or Camp Vamonos!, spouse, heirs, assigns, dependents, his agreement is also binding upon my upon any legal guardian.
I unconditionally waive and release Camp Vamonos! and and hold these persons harmless from any and all claims asserted against Camp Vamonos!, its owners, employed result of any injuries, expenses, or loss of compensation indirect result of the use of services, facilities, instruction direct or indirect result of my child's participation, or frow Vamonos!, including any act or failure to act. I am aware that Camp Vamonos! does not provide, nor any policy of liability insurance which would otherwise see in the event of an injury, expense, or loss of compensation or any member of my family may experience as a direct facilities, instruction or premises of Megan Baker, Maincluding any act or failure to act. This agreement is binding upon me and upon my personal representatives, attorneys and my estate. The child or children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on whose behalf it is executed and the children on the children on whose behalf it is executed and the children on the childr	d its owners, employees and counselors, s, rights or causes of action which may be es and counselors by any person as the suffered by my child or me, as a direct or or premises of Camp Vamonos!, or as a om any negligence on the part of Camp is any member of my family covered by, rive to compensate members of my family on or any other damage of any kind which cot or indirect result of the use of services, argarito Hernandez or Camp Vamonos!, spouse, heirs, assigns, dependents, his agreement is also binding upon my upon any legal guardian.

Photo / Video Release

I hereby give permission to Megan Baker and Camp Vamonos! to take photos and video of my child in the course of my child's participation in camp activities. I understand that these photos and video may appear on the Camp Vamonos! website or in other camp advertising.

Child's Name:	-
Parent's Signature:	
Parent's Printed Name:	•
Date:	
How did you hear about CAMP VAMONOS!?	
☐ Friend or colleague (name):	
☐ Ad in paper or newsletter (name):	
□ Website	
П. Other (please specify):	

Operational Policies of Camp Vamonos!

The following constitute the operational policies of Camp Vamonos! By reviewing and signing below, I attest that I have been made aware of these policies and consent to their implementation on the part of Camp Vamonos! and its director and employees while my child is in the care of Camp Vamonos!

- Camp Vamonos! will only release a child in its care to the child's parent or parents, or to someone authorized in writing by the parent to pick up that child. A parent may authorize, by phone, a different person to pick up his or her child, but the child will not be released until that person has shown a photo ID bearing the name given by the parent, as well as allowed the recording of his or her license plate number, if applicable. Camp Vamonos! reserves the right to decline to release any child in its care to any such designated person the child does not appear to be comfortable in the presence of, whether or not that person has clearance to pick up the child.
- Camp Vamonos! reserves the right to disallow attendance by any enrolled child who is sick, has a rash or appears to have lice, or who has had a fever within the previous 24 hours. Camp Vamonos! also reserves the right to exclude any child who has been aggressive toward fellow campers or staff or who has shown obstinacy or uncooperativeness which Camp Vamonos! director or employees deem detrimental to the welfare of fellow campers and the running of the camp. All efforts will be made to address any such problems before exclusion, but Camp Vamonos! reserves the discretion to decide such matters, and to deny a refund to the parenUs of any excluded child, whether the exclusion is temporary or permanent.
- Camp Vamonos! does not dispense medication to any child. Any medication deemed necessary for
 a child in attendance must be administered by a parent or other person authorized to do so by the
 parenUs. The parent or authorized person will be allowed to come to the child at any point in the
 camp day to dispense any medication he or she needs.
- In the event of a medical emergency happening to one of the Camp Vamonos! campers, 911 will be
 called immediately. Any necessary first aid will be administered, and the other campers will be kept
 calm until EMS arrives. If the emergency happens at the house, my son Paulo will be dispatched to
 go to the fire station to ask a firefighter to come help, so as to reduce the time spent waiting for
 professional help.
- Discipline at Camp Vamonos! consists of redirection. Children behaving aggressively or making things difficult for their peers will be encouraged to see the situation from the point of view of the other child/children, and an attempt will be made to find out the reasons for the misbehavior by talking to the child. Any unmet needs of the child that account for the behavior will be addressed as well as possible. Corporal punishment will not be used at any time under any circumstances. If a child cannot be encouraged to behave more peacefully and cooperatively after multiple efforts, the parent or parents of the child will be called upon to offer guidance over the phone and, if need be, to come pick up the child early.
- Campers' parents may visit with their children at any time unannounced, but a call ahead to be sure
 we are at the house will reduce the chance of a wasted trip. Parents are also welcome to visit the
 group while we are on outings but a call ahead will be needed to find out where we are and the best
 wayto meet.
- A copy of the Minimum Standards for Child Care Homes will be available at 6919 Reese Lane, as
 well as the report from the most recent inspection of the home by Child Care Licensing. Parents are
 welcome to see these documents any time they like when they are on the premises; they need only
 ask Megan Baker or Margarito Hernandez.

- Camp parents can contact the local child care licensing office or the DFPS abuse hotline by
 consulting the posted list of phone numbers at the child care home. These will be posted in a
 prominent place in the living room of the home. The address for the website for DFPS will also be
 posted. Parents are welcome to write down any or all of this information at any time.
- In the event of an emergency that renders the house unsafe, the first priority will be to move the children to a designated safe area or alternate shelter, of which all adults in the house, as well as the children, will have been previously apprized. The children will be calmly gathered together and accounted for, then moved as a group to the back of the backyard or, if need be, to the fire station at 7000 Reese Lane, across the street from the child care home. Once in the backyard or at the fire station, the children will be counted multiple times to ensure that all are present. If it is found that one or more of the children or adults present is injured but the house must be exited, the fire station will be the destination of the group, as there is someone on duty there at all times who is trained in emergency response, first aid, etc.
- Camp Vamonos! is in a personal residence where a sweet Great Pyrenees/Lab mix named Greta is a member of our family. She is a medium-sized to large dog, at 66 pounds, and she is only two years-old, but she is very gentle and calm. When she gets tired of attention from young kids she takes herself off to rest and enjoy some quiet. She is by nature non-aggressive but she is curious when she meets people. A gentle redirection usually suffices to get any unwanted attention away from you or your child. She is up to date on all vaccinations and health maintenance.

Communications in the event of an emergency will be by cell phone, number 750-2031. This will be used to call for help if needed, or to contact parents about the situation, after it is clear that all campers are present and safe. 911 will be called if immediate help is needed; parents and DFPS will be called at such time as emergency conditions have subsided. Documentation such as parent contact info, authorizations for emergency medical care and attendance records, will be kept in a small notebook and accessible at the house; unless conditions prohibit it, this notebook will be grabbed in the event of an emergency and taken to the designated safe spot.

Fire drills will take place once a month, and severe weather drills once every three months, to ensure that the children and adults can exit the house calmly in under three minutes. An emergency evacuation and relocation diagram will be on file at the child care home which will include a floor plan indicating two paths from each room of the house, both the backyard and fire station gathering areas and the location inside the house in the event of threatening weather that would require the group to take shelter indoors.

Child's Name:
Parent's Signature:
Parent's Printed Name:
Date:

Health Statement

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named ab	ove,	has	had	а	physical	exam	within	the	past	12	mont	hs	condu	cted	by
									,	who	se pra	actic	e is lo	cated	l at
										The	telep	hon	e num	nber	for
this practice	e is _					I f	urther	attest	that	my	child,	nar	ned al	oove,	, is
healthy and	d able	to pa	articip	ate	in any ar	nd all a	ctivities	that	may I	oe a	oart o	f her	attend	dance	e at
Camp Vam	onos!	! this	sumn	ner											
Parent's Sig	gnatur	e:													
Parent's Pri	nted N	Name	:												
Date:															

Immunization Statement

Name, address and telephone number of	the school the child attends, unless nomeschooled:
My child,	, is a student at
located at	By signing below, I attest that this school has a
copy of my child's immunization record or	state immunization exemption form on file.
The telephone number for the school is _	
Parent's Signature:	
Parent's Printed Name:	
Date:	

Nutrition Statement

As the parent of a child attending Camp Vamonos!, I am aware that I am responsible for providing my child's lunch and snacks while he/she is in attendance. As such, I take full responsibility for my choices in packing my child's food, and do not hold Camp Vamonos! or its staff in any way responsible for the nutritional content thereof. I am also aware that I am to provide a water bottle for my child's use during the camp day, and that Megan Baker will refill the bottle as needed throughout the day.

Child's Name:	
Parent's Signature:	
Parent's Printed Name:	
Date:	

Field Trip Authorization

I, the parent of, hereby give permission to Camp
Vamonos! and its director and counselors to take my child on field trips in the course of his or
her attendance at Camp Vamonos! I give permission for Megan Baker to transport my child on
these trips by walking and using public transit, including the Capital Metro commuter train. I
understand the risk associated with such trips and hereby give permission for my child to
participate in them in the course of his or her participation in camp activities.
Parent's Signature:
Parent's Printed Name:
Date:

Authorization to Obtain Medical Care and to Transport Child for Emergency Treatment

i, the parent of, hereby give permission to
him or her to be treated for any illness or injury that may occur in the course of his or her participation
in the activities of Camp Vamonos! I authorize Megan Baker and any and all employees of Camp
Vamonos! to provide to my child any first aid they deem necessary and to transport my child to a
medical care facility in the event of an injury or serious illness that may occur while my child is ir
attendance at Camp Vamonos! I further authorize a representative of Camp Vamonos! to allow the
treatment of my child for such injury or illness by a licensed physician or authorized medica
technician.
Parent's Signature:
Parent's Printed Name:
Date: