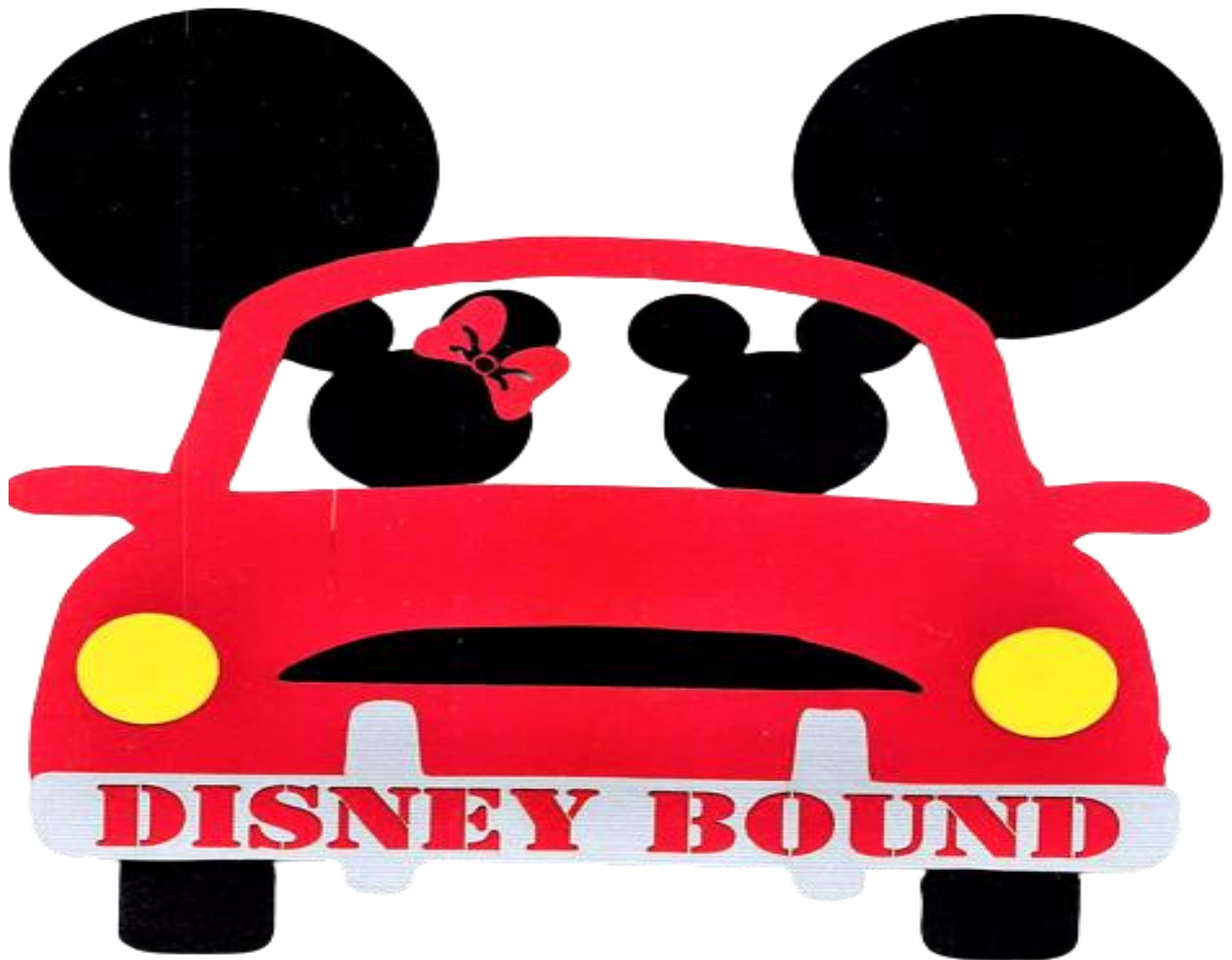


ASTORIA PARK ELEMENTARY SCHOOL

EDEP SUMMER CAMP 2022



KEURAH (KEKE) POOLE. DIRECTOR

850-488-3481

ELC CERTIFICATES ACCEPTED

SUMMER CAMP PROGRAM POLICIES AND PROCEDURES

REGISTRATION

There is a one-time registration fee of \$50.00 for the first child and \$35.00 for additional siblings. This fee is **non-refundable** and is required at the time you submit your registration forms. The registration fee includes 1 camp shirt, 1 camp bag, and 1 camp reusable water bottle.

- 🐻 Early Learning Coalition participants please see the Director for camp fees.
- 🐻 21st Century & Read Academy participants please see the Director for camp fees.

ENROLLMENT ELIGIBILITY

Summer Camp participants are PK-5th grade. Pre-K students must meet basic entry-level criteria in all areas of self-care, communication, mobility, and social-emotional development.

🐻 ARRIVAL & DEPARTURE

For the safety and well-being of all participants, a parent or guardian must sign each child in and out every day. No child will be released to a person not authorized by the custodial parent.

COVID-19 PROTOCOLS

Due to Covid-19, children and staff have the option of wearing a mask. However, for certain field trips mask may be required.

SUMMER CAMP FEE DUE DATES: There is no camp the week of July 4th

Week 1	\$120.00	Due Wednesday, 6/1/2022
Week 2	\$120.00	Due Friday, 6/10/2022
Week 3	\$120.00	Due Friday, 6/17/2022
Week 4	\$120.00	Due Friday, 6/24/2022
Week 5	\$120.00	Due Friday, 7/1/2022
Week 6	\$120.00	Due Friday, 7/15/2022
Week 7	\$120.00	Due, Friday, 7/22/2022

- 🐻 **Late fee of \$10.00** will be assessed for fees not paid by due date. Camp fees can be paid by debit, credit card online or by money orders. Make money orders payable to Leon County Schools.
- 🐻 Money Orders must be signed and include your child's first name.
- 🐻 **Refunds are not given** except for cases of prolonged illness (two weeks or longer) or family relocation.
- 🐻 Parent must request the refund in writing.

LATE PICK-UP FEES

Summer camp ends at 6:00 P.M. Parents who are late picking up their child will be assessed a late fee, **\$1.00 per minute beginning at 6:01p.m.** After two non-emergency late fees, the director will notify the parents that a third non-emergency late fee will result in dismissal from the program.

LUNCH & SNACKS

Breakfast, lunch and snacks provided daily.

DISCIPLINE POLICIES AND PROCEDURES

The Summer Camp staff will utilize positive discipline. These practices are consistent and align with our school's discipline policy, found in the Leon County School's Student Code of Conduct.

Astoria Park Elementary
EDEP Behavior Alert
Yellow Alert

Student Name: _____ Date: _____

I have repeatedly not followed some rules in EDEP today. I will do better next time.

- Unacceptable language
- Not following directions
- Disturbing the Class/Activity
- Not keeping my hands to myself
- Disrespectable to other students
- Disrespectable to staff
- Other: _____

Consequences:

- Verbal warning
- Chill Out Zone
- Unable to participate in activity
- Conference with Director

Comments: _____

Warnings: #1 #2 #3

Parent Signature: _____

Director Signature: _____

Astoria Park Elementary
EDEP Behavior Alert
RED ALERT

Student Name: _____ Date: _____

This Behavior Alert signifies that the above student has demonstrated behavior that is not tolerate in the EDEP. A conference will be requested by the Program Director to discuss further actions.

Previous Warnings:

Warning #	Date	Notes

Details of Incident: _____

Consequence: _____

Parent Signature: _____ Date: _____

Director Signature: _____ Date: _____

FORMAL CONSEQUENCES

- 🐻 1st Offense Verbal Warning, Logged in Behavior Book
- 🐻 2nd Offense Yellow Alert, Loss of Privileges, Conference with Parent
- 🐻 3rd Offense Red Alert-1 Day Suspension
- 🐻 Any Offense thereafter could result in dismissal from the program.

Parents will be notified when formal consequences are applied. Any violence toward students or staff members will result in **Immediate Dismissal from Program**. The director reserves the right to bypass any steps in the discipline policy depending upon the severity of the situation/incident.

INSURANCE

Summer Camp does not offer accident insurance for participants. It is the parent's responsibility to provide adequate accidental insurance. Such a policy is available through Leon County Schools. Check with the school secretary for an application.

ILLNESS

A parent/guardian must pick up children who become ill during Summer Camp, if your child has a temperature they cannot return until they have been temperature free for 48 hours.

MEDICATION

Doctor prescribed medication will be administered according to the label. **Children cannot transport medication.** If your child needs to have medication administered during the time they are in the Summer Camp Program, a medication form must be completed. The medication must be in its original container and administered by the dosage on the bottle.

SUMMER CAMP REGISTRATION FORMS 2022

Student Name: _____ Age _____ T-Shirt Size _____

Parent/ Guardian: _____ Relationship _____

Work#: _____ Home #: _____ Cell #: _____

Check all that apply.

_____ My child attends or is registered for public school next year (2022-2023).

_____ My child attends private school and I have provided the Summer Camp with a copy of my child's immunization records.

_____ My child lives outside of Tallahassee during the school year. I have provided a copy of my child's immunization records for the Summer Camp.

_____ My child is currently taking medication that need administering during the time he/she is in the summer camp program.

Please list all medications, times for medication and dosage amount (if needed during the time of summer camp): _____

My child has the following allergies or limitations: _____

Insurance Provider: _____ Policy Number: _____ Doctor/Physician Name: _____

Office #: _____ Preferred Hospital: _____

Please check the requested camp:

EDEP "Full Time": _____

21st Century or Reading Academy "Part Time": _____

****Please check the weeks your child will attend camp****

____ Week 1 (June 6-10)

____ Week 4 (June 27-July 1)

____ Week 2 (June 13-17)

____ Week 5 (July 11-15)

____ Week 3 (June 20-24)

____ Week 6 (July 18-22)

____ Week 7 (July 25 – 29)

In addition to the parent's name provided above the following individuals **CAN** pick up my child:

Name: _____ Primary #: _____ Relationship: _____

Name: _____ Primary #: _____ Relationship: _____

Name: _____ Primary #: _____ Relationship: _____

Name: _____ Primary #: _____ Relationship: _____

SUMMER PARENT PERMISSION FORM 2022

Student Name: _____

Movie Permission

My child has permission to view any G or PG rated movies shown during the Summer Camp Program.

Parent/ Guardian Signature _____ Date: _____

Water/Pool Activities Permission

My child has permission to participate in water activities and swim at local pools as part of the Summer Camp Program.

My child **can** swim

My child **cannot** swim

Parent/ Guardian Signature: _____ Date: _____

Photo Release

I will allow my child to be photographed for displays, promotions, video productions that will only be used by Astoria Park Summer Camp / Extended Day Enrichment Program

Parent/ Guardian Signature: _____ Date: _____

Instagram Release

I will allow my child to be posted on the Astoria Park Extended Day Instagram Page.

Parent/ Guardian Signature: _____ Date: _____

Computer Permission

My child has permission to use computers, and get on the internet during the summer camp program.

Parent/ Guardian Signature: _____ Date: _____

Policy Acknowledgement

I have read and fully understand the policies outlined in the Policy Statement of the Summer Camp Program.

Parent/ Guardian Signature: _____ Date: _____

By completing registration for my child, I understand and agree that:

- ♥ I understand the registration fee is non-refundable. Registration fee of \$50.00 is due at the time of registration in order to reserve your child's spot.
- ♥ I understand that there is a \$10 late fee for payments received after due date.
- ♥ I understand that I will be assessed a late fee of \$1.00 per minute beginning at 6:01 p.m.
- ♥ I understand if I am late picking up my child **three times**, barring an emergency, my child will be dismissed from summer camp.
- ♥ I understand the method of payments are debit/credit card or money order. No cash.

I have read and understand the above payment contract and I agree.

Parent/ Guardian Signature: _____ Date: _____