

CITY OF MERCED PARKS AND RECREATON



INTO THE WILD SUMMER WILDERNESS CAMP 2024

Summer Camp Session	: (Check all	weeks attending)				
Week 1: June 10 th - 14 th			☐ Week 5: July 8 th − 12 th *			
 Week 2: June 17th - 21th * No Program June 19th Week 3: June 24th − 28th Week 4: July 1st - 5th * No Program July 4th 			☐ Week 6: July 15 th - 19 th			
			Week 7: July 22 nd – 26 th			
			☐ Week 8: July 29 th – Aug 2 nd			
Program Site: Applegate Park Rossotti 1045 W. 25 th Street, Mero Monday- Friday 8:00am	ced, CA 953					
Participant's Name			_Gender: M	F DOB:	Grade:	(in the fall
Street Address				_ City	Zip _	
Parent/Legal Guardian N	ame			_ Home Phone: _		
E-Mail:			C	ell/Work Phone: _		
Emergency Contacts: (Of	ther than par	rent, an attempt will	be made to contact a	parent first)		
Name:		Phone:		Relationship: _		
		Relationship:				
Name:		Phone:	: Relationship:			
Name:		Phone:		Relationship: _		
Is child allowed to walk h			-			
MEDICAL INFORMATIO		•				
Participant's Physician: _					NO	
<u>HEALTH HISTORY</u>	YES	NO	<u>ALLERGIES</u>	YES	NO	
Asthma			Bees			
Diabetic			Food			
Epileptic			Penicillin			
Operations/Injuries			Other			
If yes to any of above, ple	ease explain					
Please list any program r	estrictions a	nd/ or any medication	on taken at time of pro	gram:		

Policies & Procedures

Staff

Staff are experienced working with children and will act as group Summer Wilderness Camp counselors. We will always have CPR and First-Aid certified staff on-site. Counselors have passed a background check in addition to participation in staff trainings. Please note we are required by law to report suspected child-abuse. If a staff member suspects abuse, the Merced Police Department will be notified, and a report will be made to the California Department of Social Services.

Consent to Treat Minor

In the event of sudden illness, accident or injury which may occur while said minor is engaged in an activity supervised by City of Merced employees, when neither of the parents or guardians can be contacted, I hereby give my consent for emergency medical treatment as shall be necessary under the circumstances by any physician licensed under the laws of the State of California. I further understand that I shall be solely responsible for all costs associated with the emergency medical treatment provided.

No Personal Items/ Electronic Devices

Campers are NOT permitted to bring any personal items from home. This often increases the likelihood of them getting lost, stolen, or damaged. In addition, participants shall not borrow, lend, or trade items while at camp. Cell phones are NOT permitted at camp. The camp staff reserves the right to confiscate all personal items as issues arise. Confiscated items will be returned to the parent at the end of the day.

Field Trips/Transportation

Field trips provide a fun, interesting change of pace for participants and are not optional, as they are a part of the structured activities of camp. As a result, no alternate activities are planned. Parents that do not wish their children to participate must make personal arrangements for care that day; no adjustment in program fees will be made. Transportation for trips may include public transit, chartered bus, city, or county owned vehicles, walking or any combination therein. Due to transportation schedules, all times are approximate. I consent to all field trips offsite as defined by the City of Merced Summer Wilderness Camp.

Late Pickup

Child protective services may be notified if participants remain more than half hour without contact from a parent or legal guardian. Habitual tardiness could result in dismissal from the program

Lost Items

The City of Merced is NOT responsible for any personal items that may have been lost, stolen, or gone missing during the program.

Photography Waiver

I permit the City of Merced to use and publish photographs and/or videotapes of me, my child, or my ward for purposes of promoting recreation activities to the community through any media channels. If there is an issue with this, please see the office and provide written exclusions regarding the use of the photos/videos.

Rights for Removal

City Staff will do their very best to train and instruct participants who are first time learners. Given that Summer Wilderness Camp is very fundamental, youth are expected to learn these basic motor skills and progress with the group. If staff finds that any youth are having issues progressing with the group, parents will be notified. If staff finds out if participants are underage, this will result to removal of the program.

Snacks & Lunch

Children must bring their own snacks (morning) daily. Sharing/exchanging of food is not allowed. Children must bring their own water.

Dress Code

Participants should wear comfortable clothes that will allow them free range of motion to participate in recreational and athletic activities. Unacceptable Attire: sandals, flip-flops, open-toed shoes, revealing clothing, apparel that displays/promotes drugs, alcohol, tobacco, or gang references and excessively loose or baggy pants. Prior to drop-off, please apply sunscreen if necessary.

Participant's Name: (please print)	
Parent/Guardian Name: (please print)	
Parent/Guardian Signature:	

CITY OF MERCED

RECREATIONAL PARTICIPANT EXPRESS ASSUMPTION OF THE RISK, RELEASE, WAIVER, AND INDEMNITY AGREEMENT

PROGRAM: City of Merced Summer Wilderness Camp

No PARTICIPANT may participate with the Program unless and until this form is initialed & signed by the PARTICIPANT (or the PARTICIPANT's parent/legal guardian if applicable)

EXPRESS ASSUMPTIONS OF RISK AND WAIVER OF LIABILITY

Recreational sports and activities INVOLVE INHERENT RISKS OF INJURY, DEATH, OR PROPERTY DAMAGE that no amount of care, caution, instruction, or expertise can eliminate. Participation in recreational sports and activities ALSO EXPOSES ONE TO ADDITIONAL RISKS, whether inherent or not, caused by things such as conditions of property, equipment provided or conduct of others, including other participants, spectators, or employees/agents/independent contractors of the City of Merced. These risks can be encountered whether participating in the recreational sport or activity. PARTICIPANT FREELY ASSUMES ALL RISKS WHETHER OR NOT SPECIFICALLY DELINEATED. (Initial)

RELEASE AND WAIVER OF LIABILITY

In consideration for permission to participate in the program, the undersigned agrees to FOREVER RELEASE, DISCHARGE, AND WAIVE ANY AND ALL LIABILITY CLAIMS OR DEMANDS AGAINST THE CITY OF MERCED or their employees/agents/independent contractors/volunteers ("Releasees") that the UNDERSIGNED, HIS OR HER PERSONAL REPRESENTATIVE(S), SUCCESSOR(S) IN INTEREST, ASSIGN(S), HEIR(S), OR DEPENDENT(S) has or might have against Releasees, whether or not caused by the negligence of Releasees or any other person or entity, arising out of participation in the program. (Initial)

INDEMNITY

In consideration for permission to participate in the program, the UNDERSIGNED, HIS OR HER PERSONAL REPRESENTATIVE(S), SUCCESSOR(S) IN INTEREST, ASSIGN(S), HEIR(S), or DEPENDANT(S) AGREE TO INDEMNIFY, HOLD HARMLESS AND DEFEND Releasees from any legal obligation or liability, whether caused by the negligence of Releasees or any other person or entity, arising out of participation in the program. The duty to defend exists independently of any duty to indemnify. (Initial)

ACKNOWLEDGEMENT

By signing the THIS EXPRESS ASSUMPTION OF THE RISK, RELEASE, WAIVER, AND INDEMNITY AGREEMENT ("AGREEMENT"), the undersigned acknowledge(s) that: (1) participation in recreational sports and activities is voluntary and does not involve public interests; (2) that the AGREEMENT has been read and understood; and (3) that the AGREEMENT is a contract that EXTINGUISHES CERTAIN LEGAL RIGHTS AND IMPOSES OTHER LEGAL OBLIGATIONS. Failure to initial were indicated above does not invalidate the AGREEMENT. Additionally, if the Participant is a minor his or her custodial parent or legal guardian must read and execute this AGREEMENT and by signing agrees to be bound by the AGREEMENT and agrees to bind the minor to the AGREEMENT. (Initial)

COVID-19 POLICIES AND PROCEDURES

I certify, to the best of my knowledge, that my child is not experiencing symptoms, and/or have not been exposed to COVID-19 or its variants. _____(Initial)

Please complete all sections below for the waiver to be considered complete. Thank you.

Participant's Name (Print):	DOB:
Parent/Legal Guardian Name (Print):	Relationship
Signature of Parent/Legal Guardian:	Date:

Into the Wild Summer Wilderness Camp Rules & Regulations

- Participants must always remain in designated areas.
- Participants are expected to treat staff respectfully and to always follow their instructions.
- Participants must respect others and their property and keep their hands, feet, and objects to themselves.
- Use of profanity and/or inappropriate language is strictly prohibited.
- The City has a zero-tolerance policy for violence, threats of violence, teasing, name-calling, harassing, antagonizing, taunting and/or bullying. Violation of this policy will result in immediate suspension.
- Participants are expected to clean up after themselves and keep their workspace tidy.
- Shirts and closed-toe shoes must be always worn by Participants.
- Neither the City of Merced nor its staff are responsible for any lost or stolen items.
- All disciplinary actions will be at the discretion of the program supervisor, depending upon the severity of the infraction.
- Staff reserves the right to refuse entrance to any individual for any reason.

I have read and agree to the above Summer Wilderness Camp Rules and Regulations.

Parent Signature	•	Date		
Participant Signa	ature	 Date		
Disciplinary Ac	<u>tion</u>			
The following are	e disciplinary steps, which are to be taken in dealin	g with children in the programs and facilities offered by The		
City of Merced P	Parks and Community Services.			
1 st Offense	Verbal warning and/or time out.			
2 nd Offense Verbal warning and longer period of time out, possible loss of participation in activities and				
	program (1) day minimum, maximum removal 3	365 days.		
3 rd Offense	Verbal warning, parents will be notified and meet with program supervisor, possible suspension from			
	program or facility (behavior contract). Participa	ants dismissed from programs for two days minimum,		
	maximum removal 365.			
Due to offenses	varying in severity, The City of Merced Parks & Re	ecreation Department staff reserves the right to discipline		
accordingly, to ir	nclude automatic suspension. Severe offenses inc	lude but not limited to the following: violence or fighting,		
sexual miscondu	ıct, vulgar language, disrespect and/or defiance of	program or facility staff, use of drugs or alcohol, etc.		
I have read the	above Disciplinary Policy for The City of Merce	d Parks & Community Services Summer Wilderness		
Camp.				
Parent Signature)	Date		

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Late	Pick	υþ

Late Pick Up Steps:

1st Warning

2nd Warning, two (2) days off from the program

3rd Warning, one (1) week off from the program, parent(s) must meet with the program supervisor

4th Warning, minimum of one (1) month and a maximum of one year

If parent/guardian is 30 minutes late in picking up a child, the Police Protective Services will be notified, and the child will be removed from the program for two (2) days

Date:	
What time was the child picked up?	
Who picked up child?	
When can the child return?	-
Program Leader's Name:	
Date:	
What time was the child picked up?	
Who picked up child?	
When can the child return?	
Program Leader's Name:	
Date:	
What time was the child picked up?	
Who picked up child?	-
When can the child return?	
Program Leader's Name:	

Medical Release Form

I hereby request that the City of Merced Summer Wilderness Camp staff administer medication to my child/ward as prescribed by a physician licensed under the laws of the State of California. All medication and information will be properly secured in the office and only accessible by the necessary camp staff.

Child's Name:			Date	:	
Medication	Dosage	Time	Special Note	Special Notes/Possible Reactions	
Proceeding Physician		I	Pho	00.	
Prescribing Physician			F110	ne:	
Additional Notes for	Program Staff:				
Waiver: I agree to inc	demnify, defend, and hold	harmless the City of Me	erced, a chartered mun	icipal corporation, its officers,	
agents, and employee	es from any injury or expe	nse arising out of or res	sulting from any reactio	n which my child/ward may suffer	
as a result of taking the	ne medication(s) previous	ly indicated. I understa	nd that all medication n	nust be in a prescription bottle with	
the prescribing physic	cian's name, medication w	vill not be accepted in a	ny other container, and	children may not medicate	
themselves. I also ur	nderstand that medication	left after the end of the	season will be properly	disposed of.	
Parent Signature			Dat		
Farent Signature			Dat	c	
Date	Medication	Dosage	Time	Staff Initials	