



GARDEN GROVE DAY CAMP HEALTH FORM AND INFORMATION SHEET

1. Camper's Name _____ Gender: M / F D.O.B. _____
2. Address _____ Phone: _____
3. Father/Guardian Name _____ Cell Phone: _____
4. Mother/Guardian Name _____ Cell Phone: _____
5. Siblings: Brothers: _____ Ages: _____ Sisters: _____ Ages: _____
6. Camper's Height: _____ Camper's Weight: _____
7. Any restrictions of activity for medical reasons (i.e. frequent colds, fainting spells, ear troubles, allergies): _____

8. Has he/she been exposed to or had tuberculosis? _____
9. Date of last tetanus shot: _____
10. Is he/she taking any medications: _____ If yes, please indicate medication(s) and special instructions: _____
11. Please give any additional information you care to add: _____

12. In case of emergency, contact and/or release child to:
Name: _____ Relationship: _____
Phone: _____
Name: _____ Relationship: _____
Phone: _____

Parent/ Legal Guardian Signature

Date

*** NOTE: PARENTS WILL BE CONTACTED IMMEDIATELY, IF POSSIBLE. IF FOR ANY REASON YOU CANNOT BE REACHED, THE PERSON(S) ON LINE 12 WILL BE CONTACTED**

CITY OF GARDEN GROVE
Department of Community Services

AUTHORIZATION TO CONSENT TO TREATMENT OF MINOR

(I) (We), the undersigned parent(s) of _____, a minor, do hereby authorize the City of Garden Grove, Community Services Department as agents for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the Medicine Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power on the part of our aforesaid agent to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable.

This authorization shall remain effective until _____, 20____; unless sooner revoked in writing delivered to said agent.

Parent/ Legal Guardian Signature

Date

Telephone No(s). where parent(s) may be reached during camp:



**CITY OF GARDEN GROVE
Community Services Department
Summer Day Camp**

**RELEASE, WAIVER OF LIABILITY, INDEMNITY AGREEMENT & CONSENT TO PHOTOGRAPH & VIDEO
FORM**

IN CONSIDERATION of being permitted to participate or engage in City of Garden Grove ("City") recreation programs, events or activities, or to use City facilities or equipment, the undersigned, on behalf of himself/herself, and on behalf any minors in the legal custody of the undersigned, and on behalf of any personal representatives, heirs, assigns, and next of kin (collectively "Participant"), hereby agrees to the fullest extent permitted by law to release, waive, hold harmless and covenant not to sue the City, its directors, officers, employees, and agents (collectively "Releasees") from any and all suits, claims, damages, losses, injuries (including property damage, bodily injury or death), and any other compensable loss of any type (collectively "Claims") pertaining to, related to, or arising directly or indirectly out of Participant's participation in the programs, events, or activities, or use of City facilities or equipment, even though the Claims may arise out of negligence or carelessness on the part of the Releasees, or out of a dangerous or defective condition of property or equipment of the City. This release does not apply to the extent such Claims are caused by the gross negligence or willful or wanton misconduct of the Releasees. The Participant further agrees to defend and indemnify the Releasees from any Claims directly or indirectly arising out of the acts or omissions of the Participant.

Participant acknowledges that the activities involve known and unanticipated risks which could result in bodily or emotional injury, death and/or property damage and understands that risks of injury or property damage simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity. Participant assumes full responsibility and risk of bodily injury, death, or property damage arising out of or related to the activity and consents to treatment and all medical care deemed necessary resulting from said treatment.

Participant further consents to voluntary participation and grants the City the right to videotape or photograph his/her participation in the activities in which he/she participates and to use the videos or photographs in future City publicity and understands that Participant will not receive any compensation for such.

Participant agrees that the foregoing RELEASE, WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the laws of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Applicable if Participant is a minor: I am the parent/legal guardian of the Participant, and I hereby execute this Release on his/her behalf.

I CERTIFY THAT I HAVE READ, UNDERSTOOD, AND AGREE TO THIS RELEASE, WAIVER OF LIABILITY, INDEMNITY AGREEMENT & CONSENT TO PHOTOGRAPH & VIDEO.

Print Name of Participant

Print Name of Parent/Guardian (for Minors)

Signature of Participant or Parent/Guardian (for Minors)

Date

CITY OF GARDEN GROVE
Community Services Department



TRAVEL PERMIT

I/We, _____, parent/legal guardian of _____, a minor, do hereby grant permission for my child to travel during the week(s) of _____ for Day Camp excursions.

WATER ACTIVITIES

Child's Name _____ Age _____

Please check your child's swimming ability below:

Non-swimmer:

Swimmer:

In accordance with the rules and regulations of the Garden Grove Community Services Department, I _____

Participant's Name

Hereby, understand that while attending a Garden Grove Day Camp excursion, I am under the direction of the Day Camp Director and his/her staff. The abandonment of my group without the permission of the Day Camp Director will forfeit any future involvement with Day Camp activities.

Participant Signature

Date

Parent/Legal Guardian Signature

CITY OF GARDEN GROVE
Community Services Department

GARDEN GROVE DAY CAMP MEDICATION PROCEDURES

- Campers may only bring medication that is prescribed to them specifically by a licensed physician. The medication must be in the original container and prescription label with directions (times per day, quantity, method of administration) placed in a Ziploc bag with the camper's name written on the outside, along with the authorization form below.
- Medication will be kept in an area not accessible to campers (e.g., locked box in the office).
- All medication will NOT be stored overnight. It must be picked up daily by parent/legal guardian.
- The camp staff is to initial the medication sign-out sheet, indicating the date and time the camper self-administers the medication.
- Campers may not keep their medication with them throughout the day.
- During excursions, the camp staff is responsible for keeping the medication. It will be kept in a secure place that is not accessible to campers.
- Parents will need to administer all prescribed medication unless authorization by the parent/legal guardian to self-administer medication indicated below.



PERMISSION FOR CHILD TO SELF-ADMINISTER MEDICATION

I/We _____, authorize my child
_____ to self-administer prescribed
medication

Medication name _____
Prescription number _____

Parent/Legal Guardian Signature

Date



CITY OF GARDEN GROVE
Community Services Department

GARDEN GROVE DAY CAMP GUIDELINES

It is the goal of Garden Grove Day Camp to provide a safe, healthy, and nurturing environment for campers of all ages. Abiding by the following behavior expectations, which are rooted in the Six Pillars of Character, the camp environment will be enjoyable for everyone.

1. **CARING:** Be kind to others. Never insult or hurt others. Always be ready to forgive.
2. **RESPECT:** Respect yourself, other campers and the counselors. Never disrespect others with bad language or by physically injuring them. Always be considerate.
3. **RESPONSIBILITY:** Be a responsible camper by always doing your best. Work hard and show others you can use self-control at all times.
4. **FAIRNESS:** Always play by the rules, even if the situation is not going your way. Learn to listen to others and to compromise.
5. **TRUSTWORTHINESS:** Be a trustworthy camper by being honest and truthful at all times.
6. **CITIZENSHIP:** Be a camper who exhibits good citizenship by listening to the counselors at all times, and treating others how you would like to be treated.

I have read the Garden Grove Day Camp Guidelines listed above, discussed them with my camper, and agree to encourage my camper to follow the Six Pillars of Character.

Camper Name (Print)

Camper Signature

Parent/Legal Guardian (Print)

Date

Parent/Legal Guardian Signature

****FILL OUT ONLY IF CIT****



**CITY OF GARDEN GROVE
Community Services Department
COUNSELOR-IN-TRAINING
STANDARDS AND BEHAVIOR CONTRACT**

As a Counselor-in-Training (CIT) for the City of Garden Grove Day Camp program, the campers in the program perceive you as a role model. Therefore, you are expected to do an effective job and act in an appropriate manner.

The following behaviors are expected of every CIT in the Day Camp Program:

1. You are to be at Day Camp every day that you are assigned. If you are unable to make it on any day, it is your responsibility to call the Director and inform him/her of your absence for that day.
2. You are to assist your assigned counselor in organizing and conducting crafts, games, and other activities.
3. You are to help campers play and act in an appropriate and fair-minded way.
4. You are to take responsibility for your own actions, and always act appropriately because your actions, both physical and verbal, represent the City of Garden Grove.
5. You are required to wear a day camp T-shirt every day.
6. You, along with all the other CITs, are responsible to plan and conduct games for 45 minutes after lunch every day.

While you are encouraged to have fun, keep in mind that Day Camp is for campers. The following behaviors are unacceptable and may result in dismissal from the program:

1. Verbally or physically abusing a camper or City staff.
2. Threatening bodily harm to a camper or City staff.
3. Using profane language.
4. Possession or consumption of cigarettes, drugs, or alcoholic substances.
5. Possession or use of any weapon.

If you think any behavior or action may be unacceptable, it probably is. When in doubt, talk to your parents, a counselor, or the Day Camp Director.

I/We read the above information regarding standards and behavior as set for the Summer Day Camp Counselor-in-Training Program, and I/We agree to abide by the above guidelines.

Counselor-in-Training Signature

Date

Parent/Legal Guardian Signature

Date