

Registration Information

Welcome to Raleigh Parks and Recreation Department's 2012 summer camps. All camp offerings are included in this booklet to assist in summer planning. Raleigh Parks and Recreation strives to offer diverse, goal-oriented, affordable, and enjoyable opportunities for youth of all ages and abilities. **Age requirements for each camp are determined by age as of August 31, 2012.** Additional requirements or limitations may apply to certain camps. **Please call the camp supervisor for age and program related questions.**

Registration Information

This booklet contains all of the information and materials needed for registration. Please read the following instructions thoroughly before completing the registration form.

1. For Additional Camp Information: Please call the phone number associated with the camp descriptions in this booklet.
2. Payment questions please call 996-4800 or email Camp.Registration@raleighnc.gov

For your convenience, the Raleigh Parks and Recreation Department will accept completed registration materials by mail-in, drop-off, online, or walk-in registration. **Please do not mail or drop off cash.**

Mail-In Registration

Registration forms may be mailed at any time. Processing will begin February 1, 2012. In order for your registration request to be processed you must include required payment with signed and completed registration forms. Please see Payment Options on page 19. We will begin mailing registration confirmations after **February 22, 2012.**

Mailing Address: **Raleigh Parks and Recreation Department**
Attention: Summer Camps Registration
105 Pullen Road PR 6501
Raleigh, NC 27607

Drop-Off Registration

Registration forms will be accepted at any time. Processing will begin February 1, 2012. In order for your registration request to be processed you must include required payment with signed and completed registration forms. For Payment Options see page 19. PLEASE SEAL YOUR DOCUMENTS IN AN ENVELOPE marked Summer Camp Registration. You may drop your envelope at any staffed Raleigh Parks and Recreation facility. No confirmation of registration will be given at time of drop-off. We will begin mailing registration confirmations after February 22, 2012.

Online Registration

Beginning March 27, 2012 online registration will be available through RecLink at parks.raleighnc.gov. Full payment is required with online registration, **be sure to complete Registration Forms after registering.** Participants will not be able to attend camp if these forms are not received by **the Recreation Business Office.** We appreciate your commitment to provide the completed documents.

Mailing Address: **Raleigh Parks and Recreation Department**
Attention: Summer Camps Registration
105 Pullen Road PR 6501
Raleigh, NC 27607

Walk-In Registration

Beginning **March 27, 2012** all walk-in registrations will be processed at the Recreation Business Office located at Pullen Arts Center, 105 Pullen Road, Raleigh, NC, 27607. Camp choices may be limited. Recreation Business Office Hours: 8:30am-6:00pm Monday-Friday.

Raleigh Parks and Recreation Camp Registration Process:

- Each day, fully completed registrations will be processed randomly until all registrations from that day's box are completed or camps are full.

- Confirmations will be mailed to participants on a daily basis beginning **February 22, 2012.**
- **Incomplete registrations WILL NOT be processed. We will attempt to contact you to obtain all the missing information and/or payment. Your registration request will remain in pending until all required information is received.**

Parent/Guardian's Role in Camp Registration:

- Read and follow all registration instructions.
- Complete all registration forms and enclose required payment.
- Submit forms and payment by mail-in, drop-off, online or walk-in.
- Allow time for confirmations to be mailed. We will start mailing registration confirmations **February 22, 2012.**
- Understand that payment is due for all registrations regardless of participation. Withdrawal requests must be received in writing.

Registration Process

- Complete the forms on the following pages. Each participant must have his or her own registration forms. Please make copies as needed for additional children.
- All forms must be received at the Recreation Business Office prior to the start of each camp session.
- **Health Information Section** – The Adventure Program and Specialized Recreation Services will require an additional health form signed by a physician. The Adventure Program form will be mailed to participants after registration. The Specialized Recreation Services physician signature block is located on page 22.
- Any participant requiring medication to be administered at camp must fill out a Permission Form for Assisted Administration of Medication on page 23.

Registration Form Section

1. Enter bar code number, camp name, and location by the week associated with the camp of your choice.
2. Enter a 1st, 2nd and 3rd choice. If your 1st choice is full at time of registration, your 2nd or 3rd choice, if available, will be processed. If all choices are full, we will return registration and payment. Please understand that you do not have to list a 2nd or 3rd choice, but if your 1st choice is full, we will return the registration and payment to you.
3. Pay for 1st choice only and add any fees that are applicable below the (Sub-Total) line.

Payment Instruction

Payment Options include check or money order (payable to City of Raleigh), American Express, Visa or MasterCard. All registrations less than \$400 or submitted after May 10, 2012 must be paid in full. See Payment Options on page 19 for other options. Any special requests must be submitted in writing and may delay processing of your registration. **Please do not mail or drop off cash.**

2012 Camp Policies

Please read all registration information thoroughly. The Participant Information Form on page 22 must be completed, signed and dated before your child can participate in a Raleigh Parks and Recreation Summer Camp.

Camp Payment Options

Participant's Name _____

Option A – Full Payment enclosed with Registration

Full payment is due for all registrations less than \$400 AND registrations received after May 10, 2012. If full payment is not provided with your registration, your forms will not be processed and we will attempt to contact you to obtain payment. Please do not enclose cash.

My full payment is by: Check or Money Order attached (payable to City of Raleigh) American Express MasterCard Visa

Print Name as it appears on card _____

Billing Address _____ City _____ Zip _____

Card Number _____ Expiration Date _____

Authorized Signature _____ Date _____

Option B – Initial Payment and Monthly Payment Schedule

- **If your registration cost is \$400 or more AND you are registering on or before May 10, 2012**, you can complete this section below for a monthly payment plan. **For all payment schedules in Option B you must include your first payment with registration. If your first payment is not provided with your registration, your forms will not be processed and we will try to contact you to obtain payment.** Payment plans are calculated based on the date the registration is received. Payment plans start as early as February 1, 2012 and end June 1, 2012.
- To determine the monthly amount, take the total cost of the registrations (including non-resident fees if applicable) and divide by the number of monthly payments.
 - **For registrations received for processing February 1-10, divide cost into 5 equal monthly payments.**
 - **For registrations received for processing February 11-March 10, divide cost into 4 equal monthly payments.**
 - **For registrations received for processing March 11-April 10, divide cost into 3 equal payments.**
 - **For registrations received for processing April 11-May 10, divide cost into 2 equal monthly payments.**

Final camp payment is due by June 1, 2012.

- All registrations received after May 10, 2012 must be paid in full. See Payment Option A or C.
- If you are delinquent with your payments, Raleigh Parks and Recreation reserves the right to revoke your payment plan privileges.

My first payment is by: Check or Money Order attached (payable to City of Raleigh) American Express MasterCard Visa

Print Name as it appears on card _____

Billing Address _____ City _____ Zip _____

Card Number _____ Expiration Date _____

Authorized Signature _____ Date _____

If you want your remaining payments charged by our office to the same credit card, authorize by signing below:

Authorized Signature _____ Date _____

We will charge your payment the first of each month. **If your payment declines we will contact you. Resolution on declined payments must be completed within 3 business days or your account will be frozen preventing new registrations. If you become one payment past due, your account will be frozen preventing new registration. If your account becomes two payments behind the camp registrations will be withdrawn.**

Sign below if you choose to pay the remaining payments by check or money order. The full monthly amount is due by the first of each month.

Signature _____ Date _____

Option C – Financial Assistance/Payment Plans

Raleigh Parks and Recreation recognizes that some participants may need financial assistance and/or a payment schedule to have the opportunity to participate in our programs. Financial assistance is available only for Traditional and Specialized Recreation camps. Because funds are limited, requests need to be made by June 1, 2012, or as long as funds are available. For more information about eligibility requirements and additional forms that need to be completed with registration please call **996-4800**.

Camp Registration (One form per participant – copy as needed)

Participants's Name _____ *Please be aware all camps are not offered every week.

Please make a copy for your records

Indicate a 1st, 2nd, and 3rd choice for each session. Fill in fees for your 1st choice. If your first choice is full, the second and third choices will be applied. If all choices are full, your registration forms and payment will be mailed back to you.

Weeks of Camp	1st Choice			2nd Choice/Extended Hours for SRS*			3rd Choice/Transporation for SRS*			Fee
	Bar Code	Camp	Location	Bar Code	Camp	Location	Bar Code	Camp	Location	
Jun 11-15										
Jun 18-22										
Jun 25-Jul 29										
Jul 2-6				(No camp on July 4)						
Jul 9-13										
Jul 16-20										
Jul 23-27										
Jul 30-Aug 3										
Aug 6-10										
Aug 13-17										
Aug 20-24		(No Summer X-Press, Teen Extreme, Ranocca Camps)								
Subtotal										
I would like to make a donation to support a child's participation in Raleigh Parks and Recreation programs. (Please specify amount in Fee column)										
Add Non-Resident Fee: \$12 per session – # of sessions x \$12 (Not Applicable for Specialized Recreation Services Programs)										
Total Amount Due										

* SRS Denotes Specialized Recreation Services Camps

Refund Policy

- All refund requests must be received in writing at least 14 or more days in advance of the start date of a program.
- 100% refund/credit/transfer if Department cancels program.
- 100% creditor transfer of fees to another program at time of withdrawal OR 85% refund based on total cost of program.
- Refund/credit/transfer request received less than 14 days prior to start date of a program will not be granted.
- Refunds for medical reasons requested prior to start date of program will be granted at 100% subject to verification.
- A credit may be used by any family member on the same registration account.
- Non-attendance/Non-participation in a program or activity does not entitle a patron to a refund.

Participant Information (One form per participant – Copy as needed)

Last Name _____ First Name _____ Preferred Name _____ Gender _____
Address _____ City _____ State _____ Zip _____ Home Phone _____
Date of Birth _____ Age _____ (As of Aug 31, 2012 this age must match the requirements in the camp description)

Parent/Guardian Information

Mother/Guardian Last Name _____ First Name _____
Address _____ City _____ State _____ Zip _____
Home # _____ Work # _____ Mobile # _____ Email _____

Father/Guardian Last Name _____ First Name _____
Address _____ City _____ State _____ Zip _____
Home # _____ Work # _____ Mobile # _____ Email _____

Emergency Contact and Release Authorization

Please list in order additional names other than the parent/guardian listed above, 16 or older, that are authorized to be contacted in case of an emergency and allowed to pick-up the participant. Authorized individuals will be required to show a picture ID. **Please print all names.**

1) Name _____ Relationship to child _____
Address _____ City _____ State _____ Zip _____
Home # _____ Work # _____ Mobile # _____

Please check the box if you authorize staff to disclose information about the participant's behavior and other activities at camp.

2) Name _____ Relationship to child _____
Address _____ City _____ State _____ Zip _____
Home # _____ Work # _____ Mobile # _____

Please check the box if you authorize staff to disclose information about the participant's behavior and other activities at camp.

3) Name _____ Relationship to child _____
Address _____ City _____ State _____ Zip _____
Home # _____ Work # _____ Mobile # _____

Please check the box if you authorize staff to disclose information about the participant's behavior and other activities at camp.

4) Name _____ Relationship to child _____
Address _____ City _____ State _____ Zip _____
Home # _____ Work # _____ Mobile # _____

Please check the box if you authorize staff to disclose information about the participant's behavior and other activities at camp.

Medical Insurance is required for all participants registered for summer camp. Third Party opportunities may be available upon request.

I confirm that the participant has medical insurance. yes no

By signing below, I acknowledge the following:

- that the City of Raleigh provides no insurance coverage for participants;
- that I have read, understand, and agree to the City of Raleigh Parks and Recreation Summer Camp Program Policies on pages 24-25;
- that I understand I am waiving my legal rights (please refer to camp policies).
- that in the event of a medical emergency, every effort will be made to contact parent(s)/guardian(s). I authorize the City of Raleigh staff to seek appropriate medical care if a parent/guardian cannot be reached;
- that Raleigh Parks and Recreation staff will only allow the parent/guardian whose signature appears on this registration form to make changes to the form and staff will only release information about the participant to those person(s) listed; and
- that I have selected an appropriate program for the interests and abilities of the participant and that the information I have provided on the Participant Information Form is current and accurate.

Signature is required to complete the registration process.

_____	_____	_____
Parent/Guardian Name	Parent/Guardian Signature	Date
_____	_____	_____
Parent/Guardian Name	Parent/Guardian Signature	Date

Participant Information (One form per camper – Copy as needed)

Participant's Name _____

The Raleigh Parks and Recreation Department welcomes the participation of all individuals in our programs, including those with disabilities. We are fully committed to complying with the ADA and providing reasonable accommodations to facilitate participation in our programs. **To ensure that adequate resources are in place, registration should be received at least two weeks prior to the start date of the program.** For information regarding Inclusion Services, please refer to the Inclusion Services Section on page 24.

The City of Raleigh recommends that parents or guardians consult their participant's pediatrician or health care professional to assess their participant's ability to participate in the program. It is requested that parents or guardians provide in writing any additional instructions for the specific condition or special need of their participant.

Health Information

Please indicate YES or NO to ALL items listed. Please use space below to provide additional details on boxes checked Yes.

yes no Autism Spectrum Disorder (Asperger's, Autism, HFA, PDD)

yes no ADHD / ADD (please circle one)

yes no Diabetes

yes no Allergies – Food: _____

yes no Down Syndrome

yes no Allergies – Other: _____

yes no Emotional / Behavioral Disorder (not related to ADHD/ADD)

yes no Asthma _____

yes no Epilepsy / Seizures Disorder

yes no Dietary Restrictions: _____

yes no Intellectual Disability / Developmental Delay

yes no Hearing or Visual Impairment: _____

yes no Motor Impairment (Cerebral Palsy, Partial Paralysis, etc)

yes no Other Condition: _____

Additional detailed information for anything checked yes above (including special instructions for allergic reactions): _____

PLEASE COMPLETE IF REGISTERING FOR SPECIALIZED RECREATION PROGRAMS

Height _____	Weight _____	Pulse _____	Blood Pressure _____	Date of Exam _____
Physician Name _____		Phone _____		
Address _____				
Physician Signature _____				Date _____

Medication Information

Only medications which are medically necessary and cannot be scheduled outside the hours of the recreation program will be given during the program. No program participant should be in possession of non-prescription or prescription medication of ANY kind without the knowledge of the program staff. Any participant who must receive medication during the program must have on file the appropriate signed medication form:

- A. Assisted Administration of Medication: Parks & Recreation staff maintain, provide and monitor consumption of both prescription and non-prescription medication.
- B. Self-Administration of Medication: **(for use in Teen, Adventure and SRS Adult Programs ONLY)** Participant may maintain and consume non-prescription medication, inhalers and/or EPI pen as needed with review from staff.

The Assisted Administration of Medication form is included within the Camp Brochure on page 23. Both forms may also be obtained by contacting the specific camp location or by calling the Raleigh Business Office at 996-4800. Medication forms should be submitted PRIOR to the participant attending camp.

Please list any medication the participant will be taking (during the day at camp and additional information you would like to share): _____

Permission Form for Assisted Administration of Medication

Parks and Recreation employees only administer medication to participants if:

1. The City of Raleigh permission form for assisted administration of medication is completed and in the possession of the Parks and Recreation staff.
2. A Parks & Recreation employee will not give medications unless it is in an original container with appropriate medicine contained within, with a visible label including the name of medication, the date of expiration, clear dosage amount and directions with the participant's name CLEARLY INDICATED on the bottle/box.

The Parent/Guardian is responsible for the following with ALL medication:

1. Complete and sign the portion of the form below and return to the program staff.
2. Provide medication in an original container with visible label including the name of medication, the date of expiration, clear dosage amount and administration directions with the participant's name CLEARLY INDICATED. Note: Inhalers outside the original package must be accompanied by a copy of the original package label noting the above information.
3. Provide new, labeled containers if/when medication changes are made.
4. Parents/guardians must transport medication to program site and give directly to program staff.
5. Parent/guardian must pick up medication at the end of each week/program from program staff. Medications not picked up at the end of 14 business days following the last day of participation in the program will be disposed of by program staff.
6. Recreation program employees will dispose of empty containers (unless otherwise instructed).
7. For prescription medications: The pharmacy label will serve as the physician's authorization for the medication to be administered. Have the pharmacist label two containers: one for home use and one for use in the program, if the participant is to receive medication at both sites.
8. If the medication is an EPI pen or inhaler, it is recommended (not required) that the pharmacist label two containers to keep at the program site. The parent/guardian should check to ensure the medication does not exceed the printed expiration date. Program staff will not accept expired medication.
9. For non-prescription medications: The medication must be administered according to the dosage and administration instructions on the original container.
**A physician's signature will be required as authorization IF medication is requested to be given in an alternate dosage, etc.
10. Parents/guardians should notify program staff as soon as possible if there are any changes to instructions for the administration of medication once this form has been submitted. A new form may be required.

Permission Form for Assisted Administration of Medication

By completing the information below, the Parks & Recreation staff is authorized to administer any medication(s) that are provided as indicated above.

Participants's Name _____

1) Name of medication: _____ Prescription Non-prescription

Dosage: _____ Times: _____

Reason for Medication: _____ Side effects: _____

2) Name of medication: _____ Prescription Non-prescription

Dosage: _____ Times: _____

Reason for Medication: _____ Side effects: _____

****ONLY under special circumstances for Non-Prescription medications (see #9 above).**

Physician Name Physician Signature Date

Parent/Guardian Signature

Parent/Guardian Name Parent/Guardian Signature Date

2012 Camp Policies

Please read carefully and sign Participant Information Form on pages 21-22.

Age Verification

The City of Raleigh Parks and Recreation Department strives to provide age appropriate curriculum and programming for all recreation services delivered. To meet this goal, the age of the participant, as of the cut-off date for the program, is required at the time of registration to appropriately place the participant in our programs. **The Parks and Recreation Department reserves the right to request that the parent/guardian provide a legal document (i.e. birth certificate) verifying the age of the participant, as of August 31.** If legal documentation is requested and not provided within the specified timeframe established by the program supervisor, the program supervisor may offer the parent/guardian a transfer to an age appropriate program if available or dismiss the participant from the program. The parent/guardian will be responsible for any difference in fee if a transfer occurs. No refund will be given if the participant is dismissed from the program.

Behavior Management

We utilize and encourage the practice of praise and positive reinforcement as effective methods of behavior management. We believe that when participants receive positive and understanding interactions, they can develop good self-concept, problem-solving abilities, and self-discipline. The City of Raleigh Parks and Recreation Department supports and practices the following procedures for behavior problems:

1. Initially, participants will be given a quiet reprimand/verbal warning.
2. If behavior persists after verbal warning, a Behavior Action Plan will be implemented to identify specific behaviors and work with the participant and parent/guardian to develop appropriate behavior management solutions.
3. If behavior problems continue after implementation of the Behavior Action Plan, a first Incident Report will be presented to the parent/guardian.
4. Additional behavior problems will constitute a second Incident Report presented to the parent/guardian and a possible two (2) full-day suspension from the program may occur (no refunds will be given for the days suspended). The parent/guardian may be requested to pick up the participant within an hour of the initial contact to the parent/guardian. If a parent/guardian does not pick up the participant within an hour, a late fee may be charged.
5. If a behavior problem persists, a third Incident Report will be presented and the participant may be asked to leave the program. A two (2) full day suspension will be issued to the participant while the Incident Reports are being reviewed.
6. For severe offenses, such as but not limited to: fighting/hitting, theft, vandalism, bullying, possession of weapons or drugs, severe verbal threats, sexual misconduct, or any other safety related behavior, the participant may be suspended or dismissed from the program immediately. Any of the above mentioned behaviors may result in immediate suspension or expulsion from program.
7. Participants will not be disciplined in camp for behavior that occurred outside of camp hours, even at parental requests.
8. Participation in camp activities during program hours is required.

Confidentiality

Raleigh Parks and Recreation staff will not discuss confidential matters or personal information with anyone outside of Raleigh Parks and Recreation or with unauthorized individuals. All participants are encouraged to respect the confidentiality of other participants by not disclosing personal information in public displays such as My Space, Facebook, Twitter, etc. Raleigh Parks and Recreation staff are not permitted to share personal information or pictures about any participants or staff in any public display area such as My Space, Facebook, Twitter, etc. or discuss any personal information about participants outside of the workplace.

Dress Code

Participants should wear cool, comfortable clothing and athletic shoes in order to participate in recreational or athletic activities each day. If appropriate attire is not worn, therefore preventing participation, the parent/guardian may be asked to bring appropriate clothing or will be required to pick up the participant. In general, rubber shoes, "crocs," are not

recommended as acceptable attire for active recreation activities. Certain camps may have additional clothing requirements.

Unacceptable attire: sandals or flip-flops; shirts with spaghetti straps; clothing that displays drugs, alcohol, tobacco, sexual or gang references; two piece bathing suits; excessively loose pants or shirts; revealing clothing; jewelry.

Electronic Devices

Staff reserves the right to confiscate electronic devices if issues arise. Confiscated electronics will be returned to the parent/guardian at the end of the day. Youth Camps: No electronic devices are allowed (examples: cell phones, MP3 players, gaming devices, etc.)

Teen Camps: Cell phones are not allowed. Electronic devices such as MP3 players or gaming devices are allowed during designated "down time" with signed waivers.

Field Trips

Raleigh Parks and Recreation will transport participants offsite in vehicles provided by or contracted by the City of Raleigh. If a program participant arrives at camp after the scheduled departure for a field trip, it is the responsibility of the parent/guardian to either:

- Transport the participant to the field trip location and sign-in the participant with a City of Raleigh camp staff member at the field trip site, or;
- Transport the participant to the camp site once the camp returns from the field trip location and sign-in. Participants cannot be left at a camp location without camp staff present. Refunds will not be awarded if participant misses a field trip. The City of Raleigh Parks and Recreation Department does not accept responsibility for a program participant until they are signed in with program staff.

If a parent/guardian needs to pick up a participant while on a field trip, it is the responsibility of the parent/guardian to pick up the participant at the field trip location. Confirmation of the early release is required prior to participant being released.

Inclusion Services

Inclusion Services supports access to typical programs for participants with special needs by offering reasonable and appropriate resources to the participant. Resources may include, but are not limited to, parent/guardian and/or service provider interviews, supportive materials, program site specific training and/or additional staff support for the group. Participants who indicate a disability or special need on the registration form may be contacted by Inclusion Services to determine if any of the above resources are necessary for participation. Those participants requiring a more intensive level of support may consider having their own care provider at the program. To ensure that adequate resources are in place, registration should be received at least two weeks prior to the start date of the program. Please contact Inclusion Services at 807-5428 for more information.

Illness/Injury

Any participant should remain home from all summer camps if they have had any of the following in the past twenty-four (24) hours:

- Contagious conditions (i.e. fever – 100 degrees or higher without fever reducing medication, diarrhea, vomiting, sore throat, undiagnosed rash, chicken pox, pink eye, ring worm, head lice, etc)
- Physical injury that does not allow the participant to safely participate in the camp program.

If a participant demonstrates any of the above while at camp, the parent/guardian will have one hour to pick up the participant from the camp location. If the participant becomes sick while at camp, he/she will be separated from the other participants while the parent/guardian is called to come and pick them up. After 24 hours, if the participant is symptom free or written documentation has been received from a doctor stating the participant is not contagious or can safely participate, they may return to camp. If you suspect that your child has a contagious condition that may be spread to others, please notify your camp director as soon as possible. Please do not bring the participant back to camp until the camp director has been contacted.

2012 Camp Policies

Late Pick-up

Participants that are picked up after the closing time of camp will be charged a late fee. The fee is as follows: Once the parent/guardian is up to ten minutes late a \$5 fee will be charged per family. An additional \$1 per family will be added for every minute past ten minutes late. Payment is due at the time of late pick-up. Continual late pickups may lead to dismissal from the program in relation to excessive late pick-up policy forms.

Lost/Stolen Items

The City of Raleigh Parks and Recreation Department is not responsible for any personal items lost or stolen at our programs.

Participant Sign Out

The Security Key Tag Identification Process is in place to properly identify individuals that have the parental/legal guardian permission to sign-out a participant from any camp program. Legal guardians and other individuals listed on the participant registration form as an authorized pick up person will be issued a security key tag. Key tags may be obtained from the site on the first day of the camp program. Tags will only be issued to the individual listed on the registration form with a photo ID. A parent/guardian will not be issued multiple key tags to be given to other individuals authorized to pick up the participant. A photo ID may be requested by program staff at any time to verify a person's identity even if the person has a security tag. Parent/Guardians should inform staff of any changes to the pick-up list in writing by contacting the Recreation Business Office (996-4800). Only parents/guardians who signed the registration form may make changes to the names listed as those who are authorized to pick up a participant. Parent/guardian's should inform anyone picking up a participant without a key tag that they will be required to show a picture identification card. Participants will not be released without proper photo identification.

Payment

Please see payment options on page 19. If the required payment is not provided with the completed registration forms, the participant registration will not be processed but we will attempt to contact you to obtain payment.

Personal Care

The City of Raleigh Parks and Recreation Department does not provide personal care for program participants. Raleigh Parks and Recreation staff does not assist in the toileting of any camp participants or help with dressing participants. The Department requires that all program participants are "potty" trained in order to participate. If a toileting accident does occur, a change of clothes must be brought to the program site or the participant must be picked up from the program site within one hour of the incident. If toileting accidents become routine, participants may be dismissed from the program.

Photography/Video Waiver

Pictures or video clips may be taken by the Department of any program participant while involved in City of Raleigh Parks and Recreation activities and may be used for marketing materials or staff training. Photos or video clips may be used in program activities. Participant's names will not be published when photo or video clips are used.

Release and Indemnity Agreement

I understand that participating in the recreational program selected involves risk of injury. These risks include inclement weather, accidents while traveling, equipment problems or failures, contact with and actions of other participants, slips/trips/falls, and musculoskeletal injuries, among others. I choose for myself or for my child to participate in the selected programs despite the risks. By signing the Participant Information Form, I acknowledge all risks of injury, illness, and/or death and affirm that I have assumed all responsibility of injury, illness, and/or death in any way connected with participation in the program. I also agree for myself and for any child participant to follow all rules and procedures of the program and to follow the reasonable instructions of the teachers and supervisors of the program. In return for the opportunity to participate in this program, I agree for myself

and for my heirs, assigns, executors, and administrators to release, waive, and discharge any legal rights I may have to seek payment or relief of any kind from the City, its employees or its agents for injury, illness, and/or death resulting from this program. If I am registering a child for a program, I agree that I am a parent, legal guardian, or am otherwise responsible for the child whose application I am submitting and that I release, waive, and discharge any legal rights that I may assert on behalf of the child's participation in the program. I also agree not to sue the City, its employees, or its agents and agree to indemnify the City for all claims, damages, losses, or expenses, including attorney's fees, if a suit is filed concerning an injury, illness, or death to me or to my child resulting from participation in the program.

Refunds

All refund requests received in writing 14 days or more in advance of the start date of the program/rental/team placement are entitled to:

- 100% refund/credit/transfer if the department cancels program or facility rental, 100% credit or transfer of fees to another program at time of withdrawal or, 85% refund based on total cost of program, 85% credit/transfer/refund of eligible rental fees
- Refund/credit/transfer requests received less than 14 days prior to the start date of a program/rental/team placement will not be granted
- Refunds for medical reasons requested prior to the start date of a program/rental/team placement will be granted at 100%, subject to verification
- A credit may be used by any family member on the same registration account
- Non-attendance/non-participation in a program does not entitle a patron to a refund.

Sunscreen and Insect Repellent

If needed, please apply these products to participants before they come to the program each day. Please supply any sunscreen and/or insect repellent that the participant may need during any program. Staff will provide frequent opportunities for participants to reapply over the course of the day. Staff may assist participants in applying sunscreen only to exposed skin that the participant cannot reach on their own. Spray or mist type sunscreen and/or insect repellent are recommended. These products are not to be shared with other campers.

Swimming Information (for applicable camps)

Raleigh Parks and Recreation staff will conduct swim tests for all program participants and issue lifejackets to non-swimmers. To swim without a lifejacket, a swimmer must be able to swim one length of the pool (approximately 25 yards or 75 feet) on their front and tread water for 30 seconds. All non-swimmers will be required to wear lifejackets. Parent/guardian can request that staff not allow the participant to participate in the swim test and automatically place the participant in a lifejacket. Staff reserves the right to place a participant in a life jacket in the interest of a participant's safety. All participants, regardless of swimming ability, will wear lifejackets when participating in water activities including swimming in lakes, rivers, or the ocean.

Waitlists Notification

If your participant clears the waitlist, you will be notified by the Recreation Business Office staff by telephone. You will have 24 hours to accept and remit payment for the requested camp; the camp registration must be confirmed in writing. If notification is not received within 24 hours you will forfeit your camp placement.

Withdrawal and Transfers

All withdrawals and transfers must be received in writing 14 days or more in advance of the start date of the program. Non-attendance or non-participation in a program does not entitle a patron to a credit of the registration fee.