BEST SUMMER EVER
FREEHOLD BOROUGH YMCA SUMMER CAMP
REGISTRATION & HANDBOOK
REQUIRED PARENT ORIENTATION

The camper’s parents/guardians must attend one mandatory informational orientation meeting prior to the start of camp. Meetings will be held at the Freehold Borough YMCA Community Center, 41 Center Street, Freehold NJ, 07728. To schedule an orientation please contact Jo Ann Rountree, 732-784-6620 or email at jrountree@ymcanj.org.

> Your child will NOT be able to start camp without parent/guardian attendance at a parent orientation meeting.
Please complete and return ALL below forms to the Freehold Borough Y to complete registration.

19. Registration & Contact Information

20. Code of Conduct

21-24. COVID-19 Information & Policies

25-26. Health History

27. Allergen & Nut Safe Policy

28. Statement of Understanding

29. Policy & Procedure

30. Program & Participation Waiver
WELCOME

We welcome your family to the Freehold Borough YMCA Community Center and look forward to a safe and fun-filled summer! Our first priority is to see that you and your children feel at home—this is your Y and you belong. Character development is integral to all Y programs. We are guided by four core values: Caring, Honesty, Respect, and Responsibility.

We ask that all of our campers come to camp without cell phones, iPods, or electronic devices, as we encourage everyone to learn social skills and make new friends! In the gym, at day camp, in our homes, in the community, we strive to develop these character values in our members and ourselves. As we believe that cooperation between parents and staff is essential to the success of our program and your child’s enjoyment this summer, we ask that you read this Parent Handbook and familiarize yourself with our program. If you have any questions concerning the enclosed information, please call David Thomas at 732.784.6626.

One of our goals at the Y is to not turn anyone away because of inability to pay. We offer assistance through our Y Cares Financial Assistance Program, a confidential financial program that helps those needing support to participate in YMCA programs and services. Please visit www.ymcanj.org for further information and/or an application.

The Y takes the prevention of child abuse very seriously.

The Y is committed to taking proactive steps to protect children and is proud to offer support and provide resources to bring awareness to parents, caregivers, and the community. The Y’s Child Protection Plan outlines policies within the four elements of screening and hiring, training, supervision, and feedback systems. The Y sees protecting children as a partnership with the family. We are committed to an open dialogue and we expect all parties to be vigilant in protecting children.

REGISTRATION REQUIREMENTS

1. $50 NON-REFUNDABLE deposit per child
2. Child’s 2019-2020 Academic Report Card (can be from 2nd or 3rd Marking Period)
3. Child’s Immunization Record from Physician
4. Completed Forms (all included in this packet):
   - Report Card (Last Marking Period 2020)
   - Camper Registration
   - Signed Bullying Policy/Code of Conduct Form
   - Signed Sunscreen Acknowledgment Form
   - Signed Allergen Acknowledgment Form
   - COVID-19 Liability Waiver
   - Immunization Record
   - Authorization to Dispense Medication (if needed)
   - Signed Parent Statement of Understanding Form
   - Signed Parking Acknowledgment Form
   - Health Record Forms

CAMP TUITION PAYMENT OPTIONS

All Balances Must Be Paid In Full

The YMCA accepts cash, check, money order, or credit card as forms of payment. If you need to arrange to pay in installments, please contact Jo Ann Rountree, 732-784-6620.
Our modified Summer Camp Program for ages 6–13 years olds is packed with activities including: STEM, games, arts & crafts, literacy and much more! All Y camps are staffed with trained counselors who make sure camp memories of fun & friends will last a lifetime.

>> SUMMER CAMP PRICING

### EXPLORERS AGES 6–7
Freehold Borough Residents Pay: $400

Non-Freehold Borough Residents Pay: $880

(Campers must be 6 years of age and have completed Kindergarten by June 2020)

### RANGERS AGES 8–9
Freehold Borough Residents Pay: $400

Non-Freehold Borough Residents Pay: $880

### VOYAGERS AGES 10–13
Freehold Borough Residents Pay: $400

Non-Freehold Borough Residents Pay: $880

The Prices above are based on a modified camp program due to COVID-19.

$50 non-refundable deposit per child is due at registration.

Freehold Borough residents receive a subsidy from Freehold Borough Municipal Government.

## ROLE MODELS IN TRAINING PROGRAM
$50 Registration Fee.

Our Role Model-in-Training program is designed to offer qualified young people an opportunity to prepare for positions as camp counselors. Emphasis is placed upon developing leadership skills, sensitivity to children, and program skills. Interested applicants will need to complete an application form, submit three references and attend an interview. Applicants must be at least 14 years old at the start of their RMIT session.

## PARTNERS IN GOOD HEALTH

For the safety and well being of campers and staff the YMCA will be following all CDC guidelines and will implement an abundance of safety measures to minimize risk in regard to COVID-19. This includes smaller groups, limited enrollment, temperature checks, social distancing and frequent hand washing. Face coverings are recommended. Some optional activities may require participants to use of non-latex gloves. Field trips and similar camp activities will not be held. Please refer to cdc.gov and nj.gov/health for up-to-date resources and information.

## FINANCIAL ASSISTANCE

Financial assistance through Y Cares is based on income. Applicants currently receiving aid from state or county agencies pre-qualify with documentation. Ask your employer about federal tax breaks and Flexible Savings Account contributions for working parents with children under 13. Contact third party payer options for additional financial support.
YMCA SUMMER CAMP
CAMP ESSENTIALS

WHAT TO BRING TO CAMP. Make sure your camper is well equipped and ready for adventure. Please make sure that all belongings are clearly labeled with your campers first and last name. This will help us cut down on the lost and found piles at the end of the day. Please DO NOT send your camper with toys, electronics, phones, or anything you don’t want to get dirty or wet.

BACKPACK
Be sure to choose a bag large enough to fit the essentials, but small enough to be easily carried by the camper.

FACE COVERING
For the safety of your camper and others, please encourage your camper to wear a mask or face covering during camp.

WATER BOTTLE
It’s important to stay hydrated. Please send your camper with a refillable water bottle.

SNEAKERS/SHOES
For the safety of our campers, please send your child with a pair of close-toed shoes.

LUNCH
Send your camper with a healthy lunch, a healthy snack, and an ice pack each day. An optional is available.
YMCA SUMMER CAMP
DAILY SCHEDULE

CHECK IN, HEALTH SCREENING & OPENING CEREMONY
9:00 - 9:45 AM

6-7
ART
9:45 - 10:30 AM
> K-2

8-9
LITERACY
9:45 - 10:30 AM
> LIBRARY

10-13
JR. ACHIEVEMENT
9:45 - 10:30 AM
> STEAM LAB

洗洗手 / 转换 10:30 - 10:45 AM

9:45 - 10:30 AM
> LIBRARY

10:45 - 11:30 AM
> STEM LAB

LITERACY
10:45 - 11:30 AM
> LIBRARY

洗洗手 / 转换 11:30 - 11:45 AM

LUNCH
11:45 - 12:45 PM

洗洗手 / 转换 12:45 - 1:00 PM

STEM
1:00 - 1:45 PM
> STEM LAB

GAMES
1:00 - 1:45 PM
> REC AREA

1:00 - 1:45 PM
> LIBRARY

洗洗手 / 转换 1:45 - 2:00 PM

GAMES
2:00 - 2:45 AM
> K-2

SEL
2:00 - 2:45 AM
> Rec Area

CLOSING CEREMONY & DISMISSAL
2:45 - 3:00 PM

MONDAY
YMCA SUMMER CAMP
DAILY SCHEDULE

CHECK IN, HEALTH SCREENING & OPENING CEREMONY
9:00 - 9:45 AM

6-7
ART
9:45 - 10:30 AM
> K-2

8-9
LITERACY
9:45 - 10:30 AM
> LIBRARY

10-13
GAMES
9:45 - 10:30 AM
> Rec Area

Wash Hands / Transition 10:30 - 10:45 AM

SEL
10:45 - 11:30 AM
> LIBRARY

ART
10:45 - 11:30 AM
> REC AREA

STEM
10:45 - 11:30 AM
> STEM LAB

Wash Hands / Transition 11:30 - 11:45 AM

LUNCH
11:45 - 12:45 PM

Wash Hands / Transition 12:45 - 1:00 PM

LITERACY
1:00 - 1:45 PM
> K-2

STEM
1:00 - 1:45 PM
> STEM LAB

ART
1:00 - 1:45 PM
> REC AREA

Wash Hands / Transition 1:45 - 2:00 PM

STEM
2:00 - 2:45 AM
> STEM LAB

GAMES
2:00 - 2:45 AM
> REC AREA

LITERACY
2:00 - 2:45 AM
> LIBRARY

2:45 - 3:00 PM

CLOSING CEREMONY & DISMISSAL

ROLE MODELS IN TRAINING (RMIT)
> STEAM LAB
9:30 - 10:45 AM
# YMCA Summer Camp Daily Schedule

**Wednesday**

### Check In, Health Screening & Opening Ceremony
- **9:00 - 9:45 AM**
  - Wash Hands / Transition

<table>
<thead>
<tr>
<th>Time</th>
<th>Group</th>
<th>Activity</th>
<th>Location</th>
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</thead>
<tbody>
<tr>
<td>6-7</td>
<td></td>
<td>Games</td>
<td>9:45 - 10:30 AM</td>
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<td>8-9</td>
<td></td>
<td>SEL</td>
<td>9:45 - 10:30 AM</td>
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<tr>
<td>10-13</td>
<td></td>
<td>Jr. Achievement</td>
<td>9:45 - 10:30 AM</td>
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<tr>
<td></td>
<td>Wash Hands / Transition</td>
<td>10:30 - 10:45 AM</td>
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<td>SEL</td>
<td>10:45 - 11:30 AM</td>
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<td>Wash Hands / Transition</td>
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<td>Lunch</td>
<td>11:45 - 12:45 PM</td>
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<td>Wash Hands / Transition</td>
<td>12:45 - 1:00 PM</td>
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<td>Literacy</td>
<td>1:00 - 1:45 PM</td>
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<td>Wash Hands / Transition</td>
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<td>Art</td>
<td>2:00 - 2:45 AM</td>
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<td></td>
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<td>Games</td>
<td>2:00 - 2:45 AM</td>
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<tr>
<td></td>
<td></td>
<td>Literacy</td>
<td>2:00 - 2:45 AM</td>
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</tbody>
</table>

### Closing Ceremony & Dismissal
- **2:45 - 3:00 PM**

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**Note:**
- Wash Hands / Transition: 10:30 - 10:45 AM
- Wash Hands / Transition: 11:30 - 11:45 AM
- Wash Hands / Transition: 1:45 - 2:00 PM
# YMCA Summer Camp Daily Schedule

**Thursday**

## Check In, Health Screening & Opening Ceremony
9:00 - 9:45 AM

<table>
<thead>
<tr>
<th>6-7</th>
<th>8-9</th>
<th>10-13</th>
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</thead>
<tbody>
<tr>
<td><strong>GAMES</strong></td>
<td><strong>SEL</strong></td>
<td><strong>JR. ACHIEVEMENT</strong></td>
</tr>
<tr>
<td>9:45 - 10:30 AM</td>
<td>9:45 - 10:30 AM</td>
<td>9:45 - 10:30 AM</td>
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<tr>
<td>&gt; K-2</td>
<td>&gt; LIBRARY</td>
<td>&gt; REC AREA</td>
</tr>
</tbody>
</table>

Wash Hands / Transition 10:30 - 10:45 AM

<table>
<thead>
<tr>
<th>6-7</th>
<th>8-9</th>
<th>10-13</th>
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</thead>
<tbody>
<tr>
<td><strong>STEM</strong></td>
<td><strong>GAMES</strong></td>
<td><strong>LITERACY</strong></td>
</tr>
<tr>
<td>10:45 - 11:30 AM</td>
<td>10:45 - 11:30 AM</td>
<td>10:45 - 11:30 AM</td>
</tr>
<tr>
<td>&gt; STEM LAB</td>
<td>&gt; REC AREA</td>
<td>&gt; LIBRARY</td>
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</tbody>
</table>

Wash Hands / Transition 11:30 - 11:45 AM

## Lunch
11:45 - 12:45 PM

Wash Hands / Transition 12:45 - 1:00 PM

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<thead>
<tr>
<th>6-7</th>
<th>8-9</th>
<th>10-13</th>
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</thead>
<tbody>
<tr>
<td><strong>SEL</strong></td>
<td><strong>ART</strong></td>
<td><strong>STEM</strong></td>
</tr>
<tr>
<td>1:00 - 1:45 PM</td>
<td>1:00 - 1:45 PM</td>
<td>1:00 - 1:45 PM</td>
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<tr>
<td>&gt; LIBRARY</td>
<td>&gt; REC AREA</td>
<td>&gt; STEM LAB</td>
</tr>
</tbody>
</table>

Wash Hands / Transition 1:45 - 2:00 PM

<table>
<thead>
<tr>
<th>6-7</th>
<th>8-9</th>
<th>10-13</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ART</strong></td>
<td><strong>LITERACY</strong></td>
<td><strong>SEL</strong></td>
</tr>
<tr>
<td>2:00 - 2:45 AM</td>
<td>2:00 - 2:45 AM</td>
<td>2:00 - 2:45 AM</td>
</tr>
<tr>
<td>&gt; K-2</td>
<td>&gt; LIBRARY</td>
<td>&gt; REC AREA</td>
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</tbody>
</table>

## Closing Ceremony & Dismissal
2:45 - 3:00 PM

## Role Models in Training (RMIT)

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<th>6-7</th>
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<th>10-13</th>
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<tr>
<td></td>
<td><strong>STEM</strong></td>
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<td>9:30 - 10:45 AM</td>
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<td>&gt; STEAM LAB</td>
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</tbody>
</table>
# YMCA Summer Camp Daily Schedule

## Friday

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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</thead>
<tbody>
<tr>
<td>9:00 - 9:45 AM</td>
<td>Check in, Health Screening &amp; Opening Ceremony</td>
</tr>
<tr>
<td>9:45 - 10:30 AM</td>
<td>Games &gt; K-2</td>
</tr>
<tr>
<td>10:45 - 11:30 AM</td>
<td>STEM &gt; STEM LAB</td>
</tr>
<tr>
<td>9:45 - 10:30 AM</td>
<td>Literacy &gt; STEM LAB</td>
</tr>
<tr>
<td>10:45 - 11:30 AM</td>
<td>Games &gt; REC AREA</td>
</tr>
<tr>
<td>9:45 - 10:30 AM</td>
<td>Literacy &gt; Library</td>
</tr>
<tr>
<td>10:45 - 11:30 AM</td>
<td>Games &gt; REC AREA</td>
</tr>
<tr>
<td>1:00 - 1:45 PM</td>
<td>Literacy &gt; Library</td>
</tr>
<tr>
<td>2:00 - 2:45 PM</td>
<td>Literacy &gt; K-2</td>
</tr>
<tr>
<td>2:00 - 2:45 PM</td>
<td>SEL &gt; K-2</td>
</tr>
<tr>
<td>2:00 - 2:45 PM</td>
<td>SEL &gt; REC AREA</td>
</tr>
<tr>
<td>2:00 - 2:45 PM</td>
<td>LITERACY &gt; REC AREA</td>
</tr>
<tr>
<td>2:00 - 2:45 PM</td>
<td>LITERACY &gt; STEM LAB</td>
</tr>
<tr>
<td>2:00 - 2:45 PM</td>
<td>GAMES &gt; STEM LAB</td>
</tr>
<tr>
<td>2:00 - 2:45 PM</td>
<td>JR. ACHIEVEMENT &gt; STEM LAB</td>
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<tr>
<td>2:00 - 2:45 PM</td>
<td>JR. ACHIEVEMENT &gt; STEM LAB</td>
</tr>
</tbody>
</table>

**Closing Ceremony & Dismissal**

- **2:45 - 3:00 PM**
What Does My Child Need for Camp?
Our campers carry their backpacks with them throughout the day. Please remember, all items belonging to your child should be CLEARLY LABELED with permanent marker. Some common items you can fill your campers backpack with are:
> Refillable water bottle. We will supply cold water at several stations throughout camp.
> Close-toed shoes
> Face covering

All children must wear closed toe shoes every day to camp. Crocs, flip flops, and sandals are NOT permitted. Please do not send your child with any personal items. This includes, but is not limited to: electronic devices (cell phones, tablets, etc.), toys, card games (Pokémon, Yu-Gi-Oh, etc.). If personal items are brought into camp, they will be collected in the beginning of the day and returned to the camper during dismissal. Cell phones will be given out during tech time and recollected until the end of the camp day.

THE FREEHOLD BOROUGH YMCA COMMUNITY CENTER IS NOT RESPONSIBLE FOR ANY LOST OR DAMAGED ITEMS.

Where Is Camp Held?
Camp takes place at the Freehold Borough YMCA Community Center located at 41 Center Street Suite 2 in Freehold, NJ 07728. Outdoor camp activities will be held at Liberty Park, Liberty Street, Freehold, NJ 07728

Who Is The Staff?
Jo Ann Rountree is the Freehold Borough YMCA Community Center’s Branch Director. David Thomas is the Camp Program Coordinator. Kevin Leigh-Manuell is the STEAM Program Coordinator. Bryanna Reevey is a Youth Development Program Coordinator. All of the Camp Group Supervisors are a minimum of 18 years old and Counselors are a minimum of 16 years old. All staff members are required to submit to a background check, fingerprint screening, and complete numerous training certifications before the beginning of camp.

What Is The Counselor To Camper Ratio?
There is 1 counselor for every 8 campers.

What Ages Are Permitted To Enroll In Camp?
Children ages 6 - 13 who have completed Kindergarten prior to the start of camp are encouraged to register. Campers are grouped together based on age: 6-7, 8-9, and 10-13.

What If We Are Going On Vacation During Camp, Is There A Discount?
There is NO prorated option for campers who will miss multiple days of camp. The registration cost is one flat fee.

Can I Pay For Camp In Multiple Instalments?
Yes. If you would like to arrange for a payment plan, please notify JoAnn Rountree by March 1, 2020 to set your preferences. The total camp balance must be paid in full by June 5, 2020 in order for your child to be admitted.
How Did You Make Decisions About Your Safety Protocols?
With guidance from health officials, government leaders, YUSA and subject matter experts from the YMCA of Greater Monmouth County Reopening Task Force developed For A Safer Us: A Reopening Roadmap. The plan outlines our COVID-19 mitigation strategies, representing hundreds of hours of research and many thoughtful, informed discussions about how best to resume operations and safely serve members and program participants. All branches and programs are required to follow the protocols set by the YMCA of Greater Monmouth County Reopening Task Force.

Is Financial Assistance Offered?
Freehold Borough Residents receive a subsidy from the Freehold Borough Municipal Government. Non-Borough Residents may apply for financial assistance by completing the Financial Assistance Application and submitting a copy of the parent/legal guardian’s 2020 1040 form, W-2, and two most recent pay stubs.

What Is The Policy Regarding Refunds And Credits?
YMCA of Greater Monmouth County / Freehold Borough YMCA Summer Camp DOES NOT issue refunds NOR CREDIT under any circumstances. This includes in the rare instance that a camper is expelled from camp.

What If I Need To Drop My Child Off Before 9:00am Or Pick Up After 3:00pm?
They earliest you may drop your child off in the morning is 8:45 am. The latest you may pick your child up in the afternoon is 3:15 pm. There will be no before or aftercare due to COVID-19.

When Can I Enroll My Child For Camp?
Registration is now open and will close when all camp spots are filled. Registration is open Monday, Wednesday, Friday 9:00 am - 5:00 pm and Tuesday and Thursday 10:00 am - 7:00 pm. The last day to register is Saturday July 11th, 9:00 am - 12:00 pm. Space is limited to 10 campers per age group due to social distancing requirements. A waiting list will be formed and campers will be enrolled if space becomes available. Those on the waiting list must pay for camp in full immediately if they are notified of their admission to camp.

Are The Groups Co-ed?
Yes, the groups are co-ed. Sometimes a group will have more campers of one gender than another.

Do Campers Go Swimming?
No. Due to restrictions and safety guidelines due to COVID-19 campers will not be having instructional or recreational swim days.

Is There Bus Service?
There is no bussing to or from individual camper’s homes. Campers and their families are responsible for getting to and from camp.
What Are The Policies In Regard To Drop-off And Pick-up?
All campers must be signed-in at arrival to camp by a parent/legal guardian. Campers may not arrive to camp unaccompanied. Campers who are 10 years of age or older and have consent from their parent/guardian may walk home from camp unsupervised (see page 14). No camper may be dropped off earlier than 8:45 am or picked up later than 3:15 pm.

Are Meals Provided During Camp?
Breakfast and lunch are provided at no additional cost via Fulfill Food Bank’s summer camp meal program. Campers will receive a menu at the beginning of the summer. If your child will not be participating in our meal program, we ask that they bring their meals and snacks in labeled containers. PLEASE ADHERE TO THE ALLERGEN AND NUT SAFE POLICY.

Can Campers Buy Snacks?
Yes, campers will have access to the vending machines during designated snack time. The machines offer snacks and beverages at nominal fee.

Is There Trained Medical Personnel On Site?
Yes. A Registered Nurse will be on site to administer COVID-19 related health screenings and temperature checks. Camp staff are able to tend to cuts and bumps with band aids and ice, but cannot administer non-prescription pain relieving medications. In the event of an emergency, staff is instructed to dial 911 and then the parents/guardians or emergency contact listed on the child’s camp application.

What Is The Contingency Plan In The Event Of Inclement Weather?
The Freehold Borough YMCA Community Center Summer Camp will be held entirely indoor. Parents will be notified in the event of a severe weather emergency casing closure.

What Is The R.M.I.T. Program?
The camp’s Role Model In Training program is for youth ages 14 and 15 who are interested in exploring their leadership capabilities within the camp setting. Students in this program are considered counselors in training, as they are required to submit to a background check, and complete numerous training certifications before the beginning of camp. There is a $50 enrollment fee. Applications for this program can be sent to Jo Ann Rountree (Jrountree@ymcanj.org) and an interview will be arranged.
We encourage you to review the following and discuss any questions or concerns you may have about the policies and procedures of the Y with our Executive Branch Director. It is the goal of the Y to keep our children safe and healthy. Anyone who has reasonable cause to believe that an enrolled child has been or is being subject to any form of hitting, corporal punishment, abusive language, ridicule, harsh humiliation, or frightening treatment or any other kind of child abuse, neglect or exploitation by any adult, whether working at the Y or not, is required by State law to report such allegations immediately to the Division of Youth and Family Services Office of Child Abuse Control toll free at 1-877-NJ-Abuse (1-877-652-2873) or to any District Office such reports may be made anonymously. Parent(s) may secure information about child abuse and neglect by contacting: County Education Office, Division of Youth and Family Services, CN 717, Trenton, New Jersey 08625-0717.

For your review, we have included the following policies: Release of Children Policy, Expulsion Policy, and Management of Communicable Diseases.

**RELEASE OF CHILDREN POLICY**

Each child may be released only to the child’s parent(s) or person(s) authorized by the parent(s) to take the child from the Y and to assume responsibility for the child in an emergency if the parent(s) cannot be reached. Any person(s) authorized to pick up a child must be 18 yrs. of age or older. If a non-custodial parent has been denied access, or granted limited access, to a child by a court order, the Y shall secure documentation to that effect, maintain a copy on file, and comply with the terms of the court order. If the parent(s) or person(s) authorized by the parent(s) fails to pick-up a child at the time of the Center’s daily closing, the Y shall ensure that:

1.) The child is supervised at all times;

2.) Staff members attempt to contact the parent(s) or person(s) authorized by the parent(s); and

3.) An hour or more after closing time, and provided that other arrangements for releasing the child to his/her parent(s) or person(s) authorized by the parent(s), have failed and the staff member(s) cannot continue to supervise the child at the Y, the staff member shall call the Division’s 24 hour Child Abuse Hot-line 1-877-652-2873 to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child’s parent(s) is able the pick up the child, and;

4.) if the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the Director and/or staff member, the child would be placed at risk of harm if released to such an individual, the Y shall ensure that:

a.) the child may not be released to such an individual.

b.) Staff members attempt to contact the child’s other parent or an alternative person(s) authorized by the parent(s); and

c.) if the Y is unable to make alternative arrangements, a staff member shall call the Division’s 24 hour Child Abuse Hot-line 1-877-652-2873 to seek assistance in caring for the child.
FREEHOLD BOROUGH YMCA
REQUIRED PARENT INFORMATION

EXPULSION POLICY
Unfortunately, sometimes there are reasons we have to expel a child from our program either on a short term or permanent basis. We want you to know we will do everything possible to work with the family of the child(ren) in order to prevent this policy from being enforced. The following are reasons we may have to terminate or suspend a child from the program:
> Parents failure to pay/habitual lateness in payments
> Uncontrollable tantrums or angry outbursts
> Ongoing physical or verbal abuse to staff or other children
> Excessive biting
> Parents failure to complete required forms, including child’s immunization record
> Parents habitual tardiness when picking up child/children
> Parents physical or verbal abuse to staff
> Failure of child to adjust after a reasonable amount of time

PROACTIVE ACTIONS THAT WILL BE TAKEN IN ORDER TO PREVENT EXPULSION
Staff will try to redirect child from negative behavior.
Staff will consistently apply consequences for rules that may result in the child losing certain privileges.
Child’s disruptive behavior will be documented and maintained in confidentiality.
Staff will always use positive methods and language disciplining children.
Parent/guardian will be notified verbally.
Staff will praise appropriate behavior.
A brief time out will be given so that the child can regain control.
Child will be given verbal warnings.
Parent/guardian will be given written copies of the disruptive behaviors that might lead to suspension and potential expulsion.

MANAGEMENT OF COMMUNICABLE DISEASES
The following provisions relate to illness and/or symptoms of illness: 1. The Y serving well children shall not permit a child who has any of the illnesses or symptoms of illness specified below to be admitted to the Y on a given day unless medical diagnosis from a health care provider, which has been communicated to the Y in writing, or verbally with a written follow-up, indicated that the child poses no serious health risk to himself or herself or to other children. Such illnesses or symptoms of illness shall include, but not be limited to, any of the following:
> Severe pain or discomfort;
> Acute diarrhea, characterized as twice the child’s usual frequency of bowel movements with a change to a looser consistency within a period of 24 hours, or bloody diarrhea;
> Two or more episodes of acute vomiting within a period of 24 hours;
> Elevated oral temperature of 101.5 degrees Fahrenheit or over, or auxiliary temperature of 100.5 degrees Fahrenheit or over in conjunction with behavior changes;
(continued)
MANAGEMENT OF COMMUNICABLE DISEASES

The following provisions relate to illness and/or symptoms of illness:

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   Such illnesses or symptoms of illness shall include, but not be limited to, any of the following:

   > Severe pain or discomfort;
   > Acute diarrhea, characterized as twice the child’s usual frequency of bowel movements with a change to a looser consistency within a period of 24 hours, or bloody diarrhea;
   > Two or more episodes of acute vomiting within a period of 24 hours;
   > Elevated oral temperature of 101.5 degrees Fahrenheit or over, or auxiliary temperature of 100.5 degrees Fahrenheit or over in conjunction with behavior changes;
   > Lethargy that is more than expected tiredness;
   > Yellow eyes or jaundice skin;
   > Red eyes with discharge;
   > Infected, untreated skin patches;
   > Difficult rapid breathing or severe coughing;
   > Skin rashes in conjunction with fever or behavior changes;
   > Weeping or bleeding skin lesions that have not been treated by a health care provider;
   > Mouth sores with drooling; or
   > Stiff neck

Once the child is symptom free, or a health care provider indicates that the child poses no serious health risk to himself or herself or to other children, the child may return to the Y. The Y shall not permit a child or staff member with a communicable disease, as specified in the table below, to be admitted to or remain at the Y, until:

> A note from the child’s or staff member’s health care provider states that the child or staff member, respectively, has been diagnosed and presents no risk to himself, herself, or to others;

> The Y has contacted the Communicable Disease Program in the State Dept. of Health and Senior Services, or the Middlesex County

**TABLE OF COMMUNICABLE DISEASES**

<table>
<thead>
<tr>
<th>Respiratory Illnesses</th>
<th>Gastro-Intestinal Illnesses</th>
<th>Contact Illnesses</th>
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<tbody>
<tr>
<td>COVID-19</td>
<td>Campylobacter*</td>
<td>Impetigo</td>
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<tr>
<td>Chicken Pox</td>
<td>Escherichia coli*</td>
<td>Lice</td>
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<tr>
<td>German Measles*</td>
<td>Giardia Lamblia*</td>
<td>Scabies</td>
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<tr>
<td>Hemophilus Influenza*</td>
<td>Hepatitis A*</td>
<td>Shingles</td>
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<tr>
<td>Measles*</td>
<td>Salmonella*</td>
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<td>Meningococcus*</td>
<td>Shigella*</td>
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<td>Mumps*</td>
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<tr>
<td>Strep Throat</td>
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<tr>
<td>Tuberculosis*</td>
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<tr>
<td>Whooping Cough*</td>
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</tbody>
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*Reportable diseases, as required by N.J.A.C. 10:122-7.10(a)
FREEHOLD BOROUGH YMCA
COVID-19 SAFETY POLICIES & PROCEDURES

CHECK-IN PROCESS

1. Youth staff will complete daily wellness check of every child.
2. Once the child is cleared, staff will escort child to bathroom to wash hands or use sanitizer.
3. Staff will offer the caregiver hand sanitizer and instruct the caregiver to sign the child in on the roster.
4. Encourage caregiver to bring and use their own pen. If no, staff will sanitize the pen after each use.
5. All staff wash hands as often as possible.

ISOLATION

If a child develops symptoms or a fever of 100.4 or higher while in the program, the following will take place:

1. Child will be isolated immediately away from other children and staff.
2. Parent will be called to have child picked up immediately.
3. Notify supervisor immediately.
4. Follow cleaning guidelines immediately to disinfect the isolation area.

SOCIAL DISTANCE

Each group will observe personal space, groups will be 6 ft from each other.

Maintain the same groups from day to day. This will help reduce potential exposures.

Max of 3 campers per table. No large group activities will be permitted.

Outdoor games and activities will not be permitted. This includes, but is not limited to, playgrounds and parks.
Lethargy that is more than expected tiredness;
Yellow eyes or jaundice skin;
Red eyes with discharge;
Infected, untreated skin patches;
Difficult rapid breathing or severe coughing;
Skin rashes in conjunction with fever or behavior changes;
Weeping or bleeding skin lesions that have not been treated by a health care provider;
Mouth sores with drooling; or
Stiff neck

Once the child is symptom free, or a health care provider indicates that the child poses no serious health risk to himself or herself or to other children, the child may return to the Y. The Y shall not permit a child or staff member with a communicable disease, as specified in the table below, to be admitted to or remain at the Y, until:

> A note from the child's or staff member's health care provider states that the child or staff member, respectively, has been diagnosed and presents no risk to himself, herself, or to others;
> The Y has contacted the Communicable Disease Program in the State Dept. of Health and Senior Services, or the Middlesex County

REGISTRATION FORMS
Please complete all of the following forms, polices & waivers. All documents must be returned to the Freehold Borough YMCA prior to the start of camp.
FAMILY INFORMATION:
Camper’s Name: __________________________________________________________________________________ Birth Date: _______________ Age as of June: ____________

Home Address: ____________________________________________________________________________________________________________________________________________________

School Attending: _____________________________________________________________ Grade in Sept 2020: ______________________________ T-Shirt size: _________

Gender:          Male          Female         Adult E-mail Address (Required): _______________________________________________________________________________

Custodial Parent/Guardian: __________________________________________________ Phone# _____________________________________ Work# _________________________

Home Address: ____________________________________________________________________________________________________________________________________________________

Second Parent/Guardian: ______________________________________________________ Phone# _____________________________________ Work# _______________________

Home Address: ____________________________________________________________________________________________________________________________________________________

EMERGENCY CONTACT & AUTHORIZED PICK-UP INFORMATION:
Name:______________________________________________  Relationship:__________________________ Phone: _______________________ Phone 2:  ________________________

Name:______________________________________________  Relationship:__________________________ Phone: _______________________ Phone 2:  ________________________

Name:______________________________________________  Relationship:__________________________ Phone: _______________________ Phone 2:  ________________________

Name:______________________________________________  Relationship:__________________________ Phone: _______________________ Phone 2:  ________________________

Check this box if camper is 10 years or older and has permission to walk home from camp unsupervised.

Check this box if camper is 10 years or older and does not have permission to walk home from camp unsupervised.

LUNCH
My child will:  ____ be bringing a lunch from home OR  ____ need to receive a lunch provided by the Y.

PARENTS AGREEMENT  Please read and initial the following. Initial

I am enclosing a deposit of $50 per child and acknowledge that the remaining balance is due by June 7th. ________

In case of a medical emergency, every effort will be made to contact parents/guardians of children. In the event I cannot be reached, I hereby give permission to the YMCA to seek proper medical attention. ________

I understand that the Freehold Borough YMCA is fully insured and this coverage is secondary to my family’s health insurance provider’s primary coverage for the participant. ________

I hereby consent and authorize use and reproduction of photographs taken of my child, and to circulate same for advertising and publicity purposes. Please note: your child’s name will NOT be included in these publications. ________

I am aware that I must notify the Freehold Borough YMCA to report delays in pick-up and that I will be subject to a late charge of $15.00 per every 15 minutes. ________

I understand that I am financially responsible for all payments from my account including service fees incurred for non-payment or insufficient funds. No refunds will be given. ________

FOR OFFICE USE ONLY:
Residency :  □ Freehold Borough Resident  □ Non-resident
Program Choice:  □ Day Camp (6-9 years old) □ Travel Camp (10-13 years old)  □ Extended Day
Items Received:  □ $50 Deposit (Staff Initials _________)  □ Immunization Record  □ Proof of Address
FREEHOLD BOROUGH YMCA
CODE OF CONDUCT & BULLYING POLICY AGREEMENT

“Bullying is an act or threat that is unprovoked, repeated, aggressive, intended to cause fear, distress, harm, may be physical, verbal, or psychological in nature or combination, and may be bias/prejudice... Acts of bullying may include: name calling, slurs, epithets, put-downs, taunts, teasing, bodily harm, hitting, kicking, tripping, shoving, taking or damaging personal property, saying/writing inappropriate things, starting rumors, public humiliation, deliberate exclusion, and coerced actions.” (New Jersey Coalition for Bullying Awareness and Prevention.)

Any camper observed bullying another camper or campers will have their parents notified along with the camper or campers being bullies by the YMCA Camp Director. If the problem persists, the Freehold Borough YMCA may remove the camper who has committed the act or acts of bullying from camp.

The Y is committed to providing a safe and welcoming environment for all its members and staff. To promote the safety and comfort of everyone, all individuals are asked to act appropriately at all times when in our facilities or participating in a Y program. We expect persons using the Y to act maturely, to be responsible, and respect the rights and dignity of others. Our code of conduct outlines prohibited actions, but the actions listed are not an all inclusive list of behaviors considered inappropriate in our facilities or programs.

- Smoking is not permitted. The Y and its property are a smoke-free environment.
- Inappropriate use of electronic devices, including those equipped with photographic capabilities. Verbally abusive behavior, including name calling, angry or vulgar language, swearing, and shouting.
- Using or possessing alcohol or illegal chemicals on Y property, in Y vehicles or at a Y sponsored program.
- Sexually explicit conversation or behavior, any sexual contact with another person.
- Inappropriate, immodest, or sexually revealing attire. Vulgar or profane language or images on clothing.
- Loitering within or on the grounds of the Y.
- Harassment or intimidation by words, gestures, body language, or any menacing behaviors.
- Carrying or concealing a weapon or any device or object that may be used as a weapon.
- Theft or behavior that results in the destruction or loss of property.
- Physical contact with another person in an angry, aggressive, or threatening way.

Members and guest are encouraged to be responsible for their personal comfort and safety, and to ask any person whose behavior threatens their comfort, to refrain from doing so. If a member or guest feels uncomfortable confronting the person directly, they should report the behavior to a staff person of Director. YMCA staff is eager to be of assistance. Members and guests should not hesitate to notify a staff member is assistance is needed. In order to carry out these policies, we ask that members and guest identify themselves to staff when asked. The YMCA will investigate all reported incidents. Suspension or termination of membership and/or guest privileges may result from a determination by the YMCA Executive Staff if, in their discretion, a violation of the YMCA Code of Conduct has occurred.

We ask that you and your child carefully read over our bullying policy above and sign this agreement with the understanding of the Freehold Borough YMCA’s policy and its repercussions.

Parent/Guardian Name (please print) _________________________________________________________________

Parent/Guardian Signature ________________________________________________________________________

Child’s/Participant’s Name (please print) ___________________________________________________________

Date __________________________
Check-in Procedures
We have established new procedures for checking in and out at our facilities and program sites. Signage will guide everyone through the process.

Health Assessments
People who have a fever or do not feel well should stay home. Before access is allowed in our branches and/or programs, all staff and campers, will be required to complete a health assessment. Counselors will stand at entrance to welcome campers and parents at arrival. A registered nurse will take their temperature and ask them to answer the following health survey:

In the past 48 hours, have you or anyone in your household experienced any of the following:

1. Fever (100.4 F or greater)?
2. Sore throat?
3. Shortness of breath?
4. Headache?
5. Cough?
6. Muscle aches?
7. New loss or taste of smell?
8. Chills and/or repeated shaking?
9. Recent Travel to hot spot states advising self-quarantine?
10. Have you been in contact with anyone diagnosed with COVID-19?

Campers displaying any symptoms not listed above may be asked to stay home at the discretion of the Nurse.

Waivers/Code of Conduct
Campers will need to sign a new waiver and a new Member Code of Conduct. Program participants will also be required to sign a new waiver. These documents are included in this packet.

Social Distancing
> Staff and campers are encouraged to observe the CDC recommendation of at least 6’ social distancing.
> Programs will maintain appropriate ratios with one staff and ten participants.
> To the degree possible, participants will remain in the same group.
> No large group activities.
> No activities that require close physical contact between multiple participants or increase respiration.
> Shared items get sanitized before and after use.
> Minimize time standing in lines.
> Children will stay with the same group of 10 campers and 2 councilors. Campers will always remain with the same group for the duration of camp. Close contact such as hugging, holding hands, etc. is discouraged.
> Staff should maintain rosters throughout the day and keep track of the exact times that participants are involved in activities and enter/exit program.

Sanitizers/Wipes/Hand Washing
Hand sanitizing stations and disinfectant wipes for equipment will be provided throughout the facility. Campers will be required and given the opportunity multiple times a day to wash their hands with soap and water, for at least 20 seconds.

Personal Protective Equipment
All staff will be required to wear a face mask during camp. Campers are encouraged but not required to wear face masks.

Field Trips & Outdoor Activities
Field trips, including travel to parks or playgrounds, transportation, and special guests are not allowed.

Lunch
> All surfaces will be disinfected at the beginning of each shift and before lunch, using approved products.
> All staff and participants will wash hands before and after lunch.
> Each age group will have a separate designated lunch area.
> Staff and children will not eat at the same time to allow staff to adequately clean hands and disinfect surfaces between meals.

References & More Information
> Coronavirus Disease – Centers for Disease Control and Prevention (CDC)
> Reopening Plan for New Jersey’s Recovery – Governor’s Task Force Report
> New Jersey Department of Health Guidelines
> Department of Children and Families Licensing Standards
> YUSA Best Practices
What Happens If I Don’t Pass The Health Assessment?
If you answer yes to any of the questions, you will be asked not to return to the Y until you have been fever and/or symptom-free for 48 hours. If you have had contact with anyone diagnosed with COVID-19 and are not a health care worker or first responder wearing Personal Protective Equipment (PPE) or practicing universal precautions, you cannot return to the Y for at least 14 days. You will be encouraged to get tested for COVID-19 and notify us if you test positive.

Why Do You Have To Take My Temperature and Ask These Questions?
Your safety – and the safety of everyone in our buildings and programs – is our number one priority. We are taking every precaution we can to reduce the risk of exposure to COVID-19. Temperature checks and health surveys are among the CDC’s recommended mitigation strategies.

What Happens If I Don’t Want To Follow These Safety Protocols?
Campers and staff who fail to comply with new policies and procedures are putting others at risk. They may be asked to immediately leave the facility. Refusal to comply with these protocols, may result in participation suspension and ultimately expulsion from the Freehold Borough YMCA Summer Camp.

ISOLATION & CONTAINMENT STRATEGY

In the event the a camper exhibits symptoms of COVID-19 the following protocol will take place:

1. Camper will be sequestered to the established isolation space.
2. Appropriate personal protective equipment (PPE) will be accessible and provided for use.
3. Parent/Guardian will be notified for immediate pick up.
4. Camper will be kept under the surveillance and care of the Y’s on site nurse awaiting pick up.
5. Staff will follow all cleaning and sanitation guidelines.
6. Y Staff will review record to determine contact tracing. All parents of campers that have come into contact with the symptomatic child will be notified.
7. All notified persons will be encouraged to get tested for COVID-19.
8. Symptomatic camper may not return to the Freehold Borough YMCA Summer camp without written consent form his/her doctor.
9. The Departments of Health will be immediately notified of any staff or camper that tests positive for COVID-19.

_________________________  _____________________________
Parent / Guardian Signature  Date
YMCA OF GREATER MONMOUTH COUNTY

LIABILITY WAIVER

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT FOR ADULTS

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA of Greater Monmouth County for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, acknowledges, agrees and represents that he or she has immediately upon entering or participating, inspected and carefully considered such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA of Greater Monmouth County, its directors, officers, employees, and agents (hereinafter referred to as “releasees”) from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damages, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.

2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.

3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releasee or otherwise while in about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER, AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of New Jersey and that if any portion thereof is held invalid, it is agreed that the balance shall notwithstanding continue in full legal force and effect.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASE, AND AGREE TO ABIDE BY THE AGREEMENT SET FORTH. I FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS, OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE.

<table>
<thead>
<tr>
<th>Adult 1 Name</th>
<th>Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>Adult 2 Name</td>
<td>Signature</td>
<td>Date</td>
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RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT FOR MINORS

The following information is important for the safety and protection of your child.

I understand that YMCA staff and volunteers are not allowed to baby-sit or transport children at any time outside the YMCA program. If a violation is discovered, the YMCA will take immediate disciplinary action toward staff and/or volunteers.

I understand that staff and volunteers are not allowed to initiate contact with members and program participants outside the YMCA, unless necessary in certain limited cases for the smooth operation of a YMCA program. If deemed necessary, contact should be made with the program participant’s parent or guardian. Contact includes, but is not limited to, sharing of phone numbers, email addresses, personal websites and/or web logs. If a violation is discovered, the YMCA will take immediate disciplinary action toward staff and/or volunteers.

I understand that I am not to leave my child* at the YMCA or program site unless a YMCA staff or volunteer is there to receive and supervise my child. I understand that my child must be escorted to and from the program area by me or another person on my authorized list. Children may not just be dropped off at the door.

*Note: The YMCA’s policy is that children under the age of 13 may not be alone in our facilities/program sites.

I understand children should not receive excessive gifts (e.g., toys, video games, jewelry) from YMCA staff or volunteers, and I should report this to a supervisor if they do.

I understand that my child will not be allowed to leave the program with an unauthorized person. Any person authorized to pick up my child, including relatives, must be listed with the YMCA and must be of the age required by this YMCA. Any other alternate pick-up arrangements must be made in writing by a parent/guardian. Phone notification of an alternate pick-up arrangement is only accepted in an emergency.

I understand that should a person arrive to pick up my child who appears to be under the influence of drugs or alcohol, for the child’s safety, staff may have no recourse but to contact the police.

I understand that I can help ensure my child’s safety by taking an active interest in his or her YMCA experience. I too will monitor volunteer and staff interactions with my child and ask my child specific questions about program activities and volunteer or staff relationships with my child.

I understand that the YMCA is mandated by state law to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

Name of Minor(s) | Date
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<tbody>
<tr>
<td>Parent/Guardian Signature</td>
<td>Date</td>
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</table>

WAIVER/CONSENT

I, ________________________________________________________, give my permission to the YMCA of Greater Monmouth County to use my picture or other likeness, or other likeness of any of my children, specifically, ______________________________________, in general publicity and campaign materials.

Signature | Date
|-----------|-----|
COVID-19 RELEASE AND WAIVER OF CLAIMS ADDENDUM (RELEASE)

I hereby acknowledge the health risks and dangers associated Coronavirus, COVID-19. COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a means to help prevent the spread of the virus. COVID-19 can, among other things, lead to severe illness, personal injury, permanent disability, and death. Participating in YMCA of Greater Monmouth County events, programs, services or accessing the YMCA of Greater Monmouth County facilities could increase the risk of contracting COVID-19. The YMCA of Greater Monmouth County in no way represents or warrants that COVID-19 infection will not occur through participation in the YMCA of Greater Monmouth County programs/services or accessing the YMCA of Greater Monmouth County facilities.

I have read and fully understand and acknowledge the contents of the Release. In exchange for participating in the YMCA of Greater Monmouth County events, programs, services and/or at any of its facilities (collectively, "Participation"), I, for myself and on the behalf of my family, agree that I am voluntarily waiving, releasing, indemnifying and discharging the YMCA of Greater Monmouth County and its officers, directors, employees and volunteers for, from and against any and all liability, damages, and each and every action including, but not limited to, exposure or transmission of the COVID-19 virus (collectively, "Claims") by participation associated with or at the YMCA of Greater Monmouth County.

I represent that I have full authority to sign on behalf of my family and that my signature binds each other person having authority to make decisions on behalf of my family.

My signature below is confirmation that I have read and fully understand and acknowledge the contents of the Release and agree that I am voluntarily WAIVING, RELEASING, INDEMNIFYING and DISCHARGING the YMCA of Greater Monmouth County and its officers, directors, employees and volunteers for, from and against the Claims.

<table>
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<tr>
<th>Name</th>
<th>Signature</th>
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620-4817D-THQ

YMCA OF GREATER MONMOUTH COUNTY
170 Patterson Avenue  |  732.671.5505  | ymcanj.org  |  Here for all.  
Shrewsbury NJ 07702  |  info@ymcanj.org  |  Financial assistance is offered based on availability of funds.  |
FREEHOLD BOROUGH YMCA
HEALTH HISTORY & MEDICATION FORM

Camper’s Name: ______________________________________________________
Gender: ____ Birth Date: _______________ Age: __________

Address: ______________________________________________________
City: ______________________ State:_______ Zip: ___________

Parent/Guardian: _____________________________________________________
Cell Phone: _____________ Work Phone: _____________

MEDICAL HISTORY (Required by the New Jersey Department of Health and Safety):

Doctor’s Name: ____________________________________________
Phone Number: ____________________________________________

Insurance Carrier: _____________________________________________
Policy Number: ______________________________________________

IMMUNIZATION HISTORY:

Please attach a copy of the campers record of the basic immunizations and most recent boosters. If you have any questions, check with your doctor. Physician’s signature is required on the attachment.

Food Allergies: ________________________________________________

Medication Allergies: __________________________________________________________________________________________

Does the child carry an asthma inhaler? ________________
Will you be sending an EpiPen to camp? ________________

Operations or serious injuries (type and dates): ____________________________

Chronic or recurring illness including seizures: ____________________________

Please list any additional health history information we should be aware of:
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________

> If we can address any further needs to help your child be successful at camp, a separate letter is encouraged.
MEDICAL HISTORY OF PAST OR PRESENT DISEASE / ILLNESS / BEHAVIOR (Please check all that apply)

___ Serious Illness       ___ Menstrual Issues       ___ Ears       ___ IEP / 504 Plan
___ Heart                ___ Eyes                ___ Back/Limbs/ Joints   ___ Autism Spectrum
___ Serious Injury       ___ Hernia/Rupture      ___ Teeth                ___ ADHD
___ Stomach/Bowel        ___ Nose/Sinus          ___ Diabetes             ___ Behavior
___ Deformity            ___ Kidney/Bladder      ___ Throat/Tonsils       ___ Appendicitis
___ Surgery              ___ Chest/Lungs         ___ Skin/Glands          ___ Infection/Seizure

MEDICATION PERMISSION FORM:
I hereby request the following medication to be given to my child at the prescribed time and dosage by the Assistant Director. This applies to over-the-counter medication. No medication will be given unless the information below is filled out in detail and signed by a licensed physician. All medications is to be brought to camp in the original container labeled by the pharmacy. Medications must be delivered to the camp office by an adult. All medications will be kept in a locked storage area. Medications will be returned only to the parent on the last day of camp.

Medication: ___________________________ Dosage: ______ Specific Time: ______ Diagnosis: __________________

Medication: ___________________________ Dosage: ______ Specific Time: ______ Diagnosis: __________________

Medication: ___________________________ Dosage: ______ Specific Time: ______ Diagnosis: __________________

> A physician is to sign this form and stamp if medication will be administered to your child.

Physician Signature: ___________________________ Printed Name: ___________________________ Date: _____________

Parent’s Signature: ___________________________ Printed Name: ___________________________ Date: _____________

Physician’s Office Stamp Required if medication is to be administered.

PARENT AUTHORIZATION:
This health history is correct and complete. The camper described in this form has permission to engage in all camp activities unless otherwise noted. I hereby grant permission to the Freehold Borough YMCA Summer Camp to provide routine health care, administer prescribed medications, and seek emergency treatment if necessary. In the event that I cannot be reached in an emergency, I hereby grant the Freehold Borough YMCA Summer Camp to secure and administer treatment.

Signature Parent/Guardian: ___________________________________________________________ Date: _______________
To promote a safe environment for all campers, the Freehold Borough YMCA implemented a “Nut Safe” policy because so many children have life threatening allergies. This is a strategy to educate parents and staff about reducing the risk of exposure to life threatening foods. It is important to note that the safety of children with severe reactions requires the cooperation of the entire community. Please read carefully so that you fully understand the guidelines that will be in place.

> All breakfast and lunches provided by the YMCA will be free of peanut/nuts.
> Children must refrain from bringing ANY products that contain peanuts/nuts. This includes all snacks as well as lunch items.
> If a lunchbox is found to have peanut or nut products, those items will be removed and an alternative nut-free item provided.
> We do not allow food sharing unless it is a special occasion (Multi-Cultural Day, Battle of the Camps, and the Block Party).
> Any baked items brought in for celebrations should be nut-free, or should be store bought with the ingredient label intact.

GUIDELINES AND HELPFUL INFORMATION
Please read ingredient labels of all snacks to ensure that it does not contain any nuts at all or any of the following: peanuts/nuts, peanut/nut butter, peanut oil, peanut/nut flour, peanut/nut meal, or any variety of the statements, “contains peanuts” and “may contain traces of peanut/nuts”.


Your support and understanding of this policy is greatly appreciated!

I have read and received a copy of the “Nut Safe” policy.

Child’s Name ________________________________________________________________

Parent’s Name ______________________________________________________________

Parent’s Signature ___________________________________________________________  Date __________
FREEHOLD BOROUGH YMCA
PARENT STATEMENT OF UNDERSTANDING

The following information is important for the safety and protection of your child. Please read the information, sign this form, and return to the Freehold Borough YMCA Community Center. A copy will be filed with your child’s record.

I understand that YMCA staff and volunteers are not allowed to baby-sit or transport children at any time outside the YMCA program. If a violation is discovered, the YMCA will take immediate disciplinary action toward staff and/or volunteers.

I understand that staff and volunteers are not allowed to initiate contact with members and program participants outside the YMCA, unless necessary in certain limited cases for the smooth operation of a YMCA program. If deemed necessary, contact should be made with the program participant’s parent or guardian. Contact includes, but is not limited to, sharing of phone numbers, email addresses, personal websites, and/or web logs. If a violation is discovered, the YMCA will take immediate disciplinary action toward staff and/or volunteers.

I understand that I am not to leave my child at the YMCA or program site unless a YMCA staff or volunteer is there to receive and supervise my child. I understand that my child must be escorted to and from the program area by me or another person on my authorized list. Children may not just be dropped off at the door. *Note: The YMCA’s policy is that children under the age of 8 may not be alone in our facilities/program sites.

I understand children should not receive excessive gifts (e.g. toys, video games, jewelry) from YMCA staff or volunteers, and I should report this to the Executive Branch Director if they do.

I understand that my child will not be allowed to leave the program with an unauthorized person. Any person authorized to pick up my child, including relatives, must be listed with the YMCA and must be of the age required by this YMCA. Any other alternate pick-up arrangements must be made in writing by a parent/guardian. Phone notification of an alternate pick-up arrangement is only accepted in an emergency.

I understand that should a person arrive to pick up my child who appears to be under the influence of drugs or alcohol, for the child’s safety, staff may have no recourse but to contact the police. Please do not put staff in a position where they have to make this judgment call.

I understand that I can help ensure my child’s safety by taking an active interest in his or her YMCA experience. I too will monitor volunteer and staff interactions with my child and ask my child specific questions about program activities and volunteer or staff relationships with my child.

I understand that the YMCA is mandated by State Law to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

__________________________________________  __________________________
Parent or Guardian Signature                  Date

__________________________________________
Parent or Guardian Name (Please Print)

__________________________________________
Program Participant’s Name

________________________________________________________________________
Parent or Guardian Signature

________________________________________________________________________
Program Participant’s Name
FREEHOLD BOROUGH YMCA
CAMP POLICIES & PROCEDURES

SUNSCREEN POLICY
You should assist your child in putting on sunscreen BEFORE arriving at camp. All campers will be carrying their backpacks throughout their day. We ask that you please clearly label, and put your child’s sunscreen in their backpack. We will assist if needed with applying sunscreen to bare skin including the face, tops of ears and bare shoulder, arms, legs, and feet throughout the day as needed and before afternoon outdoor activities. Sunscreen will not be applied to any broken skin or if a skin reaction has been observed. Any skin reaction observed by staff will be reported promptly to the parent/guardian. It is your responsibility to provide sunscreen with a minimum SPF of 15.

PARKING POLICY
Parking for Freehold Borough YMCA Summer Camp Drop Off and Pick Up is across the street in the Rug Mill Plaza or in the Overflow parking lot on Jackson Street by The Freehold Borough Police Department.

THERE IS NO PARKING IN THE LOADING ZONE DIRECTLY IN FRONT OF OUR BUILDING.
Orange Traffic cones will be placed there so that our buses can pull up to the building for pick up and drop off for our summer camp trips. I understand there is no parking in the Loading Zone and will park in the designated parking lots.

_____________________________  _____________________________
Parent / Guardian Signature   Date

MEDICATION POLICY
Freehold Borough YMCA Summer Camp is not authorized to give any camper any over the counter medication without written permission from the parents/guardians. Parents/Guardians must fill out the medication permission form and health history form, if they would like the Assistant Director to administer any medication to their child if needed.

NO MEDICATION OF ANY NATURE WILL BE SUPPLIED BY THE CAMP.

All medication must be brought in to camp on the first day in its original packaging, placed in the care of the Assistant Director, put into a locked cabinet, and must be labeled as followed:
> Prescribing physician
> Name of medication
> Dosage and frequency of administration
> Child’s name
> Placed in Ziploc bag
> Child’s name written on Ziploc bag
> The Program Coordinator will discreetly administer medications, as per the physician’s specifications, in a designated area and manually log the dosage, time, symptoms, etc. in the camp’s medication log.

_____________________________  _____________________________
Parent / Guardian Signature   Date
FREEHOLD BOROUGH YMCA
PROGRAM & PARTICIPATION WAIVER

PROGRAM & PARTICIPATION WAIVER
The Freehold Borough YMCA (FBY) conducts its program with the best interests of all participants in mind. The FBY attempts, at all times, to run programs that are educational, enjoyable, and safe. Further, the activities of the FBY are designed to further the educational, motivational, and charitable objectives of the FBY. Nonetheless, participants must understand that some activities of the FBY may involve inherent risks and hazards for which the FBY cannot be held responsible. Because of the nature of the FBY activities, injuries may still result even if after reasonable precautions have been taken but it is acknowledged that the FBY cannot be held responsible in the event that injury occurs. I hereby assume all risks and hazards incident to participation in all YMCA activities. I further waive, release, absolve, and indemnify and agree to hold harmless the participants to and from activities from any claims or injury sustained during my child’s participation in YMCA programs.

I understand that at least one YMCA employee, during program time, is available and certified in the following: CPR, EpiPen and First Aid. I also understand that in ALL EMERGENCY SITUATIONS during YMCA programming, the staff will proceed to CALL 911 for assistance.

Photo Consent
Permission is given to Freehold Borough YMCA to take photographs or video of my child(ren) during Freehold Borough YMCA programs, to be used in promotional materials and/or Web site advertisements for the YMCA and its programs only. Your child’s name will not be included in these publications,

I HAVE READ AND AGREE TO THE ABOVE WAIVER, RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT
By signing, you are agreeing to the terms in the agreement above.

___________________________________________________________________
Print Child’s Full Name
___________________________________________________________________     _______________________
Parent/Legal Guardian Signature                                    Date
Financial assistance is offered based on availability of funds. Contact P. 732.845.5273 E. jrountree@ymcanj.org

YMCA OF GREATER MONMOUTH COUNTY
Freehold Borough YMCA Community Center I Arts & Outreach
41 Center Street
Freehold, New Jersey 07728

YMCANJ.org

Here for all. Financial assistance is offered based on availability of funds.