

NORTHWOOD CHILD CARE



SUMMER CAMP 2016

Dear Parents,

It's time once again to sign up for Northwood's Summer Camp. Our hours of operation are from 7:00am to 6:00pm. The cost is \$90.00 a week, (\$10.00 discount for second child) plus an Activity Fee of \$25.00 a week per child. **TUITION CHECKS ARE MADE OUT TO NPC (Northwood Presbyterian Church) and you only need 1 check.** The registration fee is \$35.00, which includes 1 t-shirt, (an additional T-shirt can be purchased \$7.00). Children will **NOT** be allowed to go on field trips without a T-shirt. The staff this summer will be Susan Howell our Asst. Director, Michael Mitchell, Chris Bishoff, Megan Howell, and Aimee McDermott. I will be around, but Ms. Susie and Michael are in charge on a daily basis and they have my full authority to act in the way they see fitting. We like to keep the children busy and entertained as well as keep Summer Camp affordable. While here at the church we will have outside activities as well as activities in the gym. We will exercise and have down town, such as movies or quiet reading. There is one field trip permission form that will cover all the field trips, listed on the page following the permission form. You will only need to sign the one form and you are good to go for the whole summer. Tuition is due the first day of camp your child attends as well as the activity fee. As always you are responsible for the weeks you sign your child up regardless of attendance. You will not have to pay the activity fee if you do not attend. If you pay in cash please have the exact amount as we do not keep a bank on hand. Please don't hesitate to call (727-455-3976) or email (NCC28765@gmail.com) if you have and questions or concerns.

Have a GREAT SUMMER!!!!!!,

Ms. Vicki



CHILD'S ENROLLMENT RECORD

DIRECTOR'S USE ONLY
Date enrolled _____

Child's full legal name _____
First Middle Last

Sex _____ Birth Date _____

Child's preferred name/nickname _____

Address _____
Street Address (number, apartment #, street) City State Zip Code

Primary hours child will be in the children's center _____

Days of week child will be in the children's center _____

Who has legal custody _____ Relationship _____

Address _____
Street Address (number, apartment #, street) City State Zip Code

Home Phone _____ Cell Phone _____

Parent's name _____

Home Phone _____ Cell Phone _____

Home Address _____
Street Address (number, apartment #, street) City State Zip Code

Place of Employment _____

Address of Employer _____
Street Address (number, apartment #, street) City State Zip Code

Telephone _____

Parent's Name _____

Home Phone _____ Cell Phone _____

Home Address _____
Street Address (number, apartment #, street) City State Zip Code

Place of Employment _____

Address of Employer _____
Street Address (number, apartment #, street) City State Zip Code

Telephone _____

The child will be released only to the person(s) authorized, or in the manner authorized, in writing, by the custodial parent(s) or legal guardian(s). The following person must be someone other than the custodial parent(s) or legal guardian(s) and is authorized to remove the child from the facility in case of illness, accident, or emergency, if for some reason the custodial parent(s) or legal guardian(s) cannot be reached:

Name _____

Home Phone _____ Cell Phone _____

Address _____
Street Address (number, apartment #, street) City State Zip Code

Name _____

Home Phone _____ Cell Phone _____

Address _____
Street Address (number, apartment #, street) City State Zip Code

CHILD'S ENROLLMENT RECORD

(Back Page)

Child's Physician/Health Resource _____

Telephone Number _____

Address _____
Street Address (number, apartment #, street) City State Zip Code

Hospital Preference _____

Name of Dentist _____ Telephone _____

Address _____
Street Address (number, apartment #, street) City State Zip Code

MISCELLANEOUS INFORMATION

List all known allergies _____

List all identifying scars, birthmarks, skin discolorations _____

Special medical or dietary needs of child _____

List any areas of concern _____

My signature below verifies that:
I give permission to consult the child's physician/health resource listed above in case of emergency if parent/legal guardian cannot be reached.

I have received a copy of the "Know Your Child's Children's Center" brochure, and a copy of the children's center discipline policy.

I was notified that the snacks/meals served daily are: Breakfast AM Snack Lunch PM Snack Dinner

I verify that the information on this enrollment form is complete and accurate.

Signature of Custodial Parent or Legal Guardian

Date



EMERGENCY MEDICAL RELEASE

This form must contain only one child's name, and be the original notarized form.

A new notarized form is required when there is a change in legal guardianship.

Please Print Information

Child's Full Name: _____ Birthdate: _____

Allergies: _____

Medicines Routinely Taken: _____

Name of Custodial Parent(s)/Legal Guardian(s): _____

Address: _____
Street Address (number, apartment #, street) City State Zip Code

Home Telephone _____ Cell Telephone _____ Work Telephone _____

Family Physician's Name/Health Care Resource: _____

Address: _____
Street Address (number, apartment #, street) City State Zip Code

Telephone () _____

Hospital Preference: _____
Name City

Medical Insurance Company: _____

Policy #: _____ Expiration Date: _____

Emergency Contact (if custodial parent/guardian cannot be reached): _____

Address: _____
Street Address (number, apartment #, street) City State Zip Code

Home Telephone _____ Cell Telephone _____ Work Telephone _____

Sign in the presence of the Notary.

I hereby give my consent to any emergency facility and physician to administer necessary treatment to my child _____, in the event of an emergency at which time I cannot be reached. I give consent to transport by ambulance if situation warrants it.

(Child's Full Name)

STATE OF FLORIDA COUNTY OF _____

The foregoing instrument was acknowledged before me on _____ 20_____
(Month) (Day) (Year)

by _____, who is personally known to me or who has
(Name of Affiant)

produced _____ as identification.
(Type of Identification)

SEAL OF NOTARY

Signed: _____
(Signature of Notary)

Below is a list of the weeks for Summer Camp 2016. Please circle the weeks you are choosing for your child to attend. You will be responsible for the payment of the weeks you chose regardless of attendance. Tuition is due the first day of the week that you child attends or they cannot stay. You will not be responsible for the activity fee if you do not attend any of the weeks you signed up for. Summer Camp Operating hours are 7:00am to 6:00pm. If you have any questions, please give a call 455.3976 cell or 723.7679 landline, or email ncc2875@gmail.com.

WEEK 1	June 13 – June 17	YES	NO	_____ # of children
WEEK 2	June 20 – June 24	YES	NO	_____ # of children
WEEK 3	June 27 – July 1	YES	NO	_____ # of children
WEEK 4	July 4 – July 8	YES	NO	_____ # of children
WEEK 5	July 11 – July 15	YES	NO	_____ # of children
WEEK 6	July 18 – July 22	YES	NO	_____ # of children
WEEK 7	July 25 – July 29	YES	NO	_____ # of children
WEEK 8	August 1 – August 5	YES	NO	_____ # of children

Child(ren) Name(s): _____ Parent Name: _____

Parent Signature: _____ Date: _____

Email address: _____
 (to be used for non-emergency communication)

Your signature on this forms indicates that you understand and agree to abide by the policies set forth by Northwood Chid Care. You will be given a copy of your week choices so there are not any MISUNDERSTANDINGS.

SUMMER CAMP T-SHIRT ORDER FORM

Please Circle:

*The cost of your child(ren) first shirt is included in the Registration Fee.

\$7.00/ SHIRT*

CHILD Small quantity: _____

CHILD Medium quantity: _____

CHILD Large quantity: _____

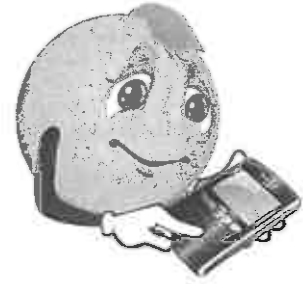
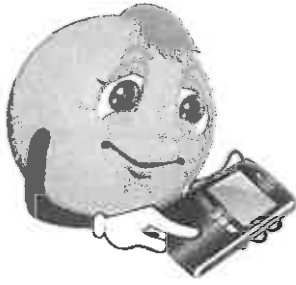
CHILD XLarge quantity: _____

ADULT Small quantity: _____

Children **MUST!! MUST!! MUST!!** wear their Northwood Summer Camp issued shirt on field trip days or they will not be permitted to stay. This is for their safety and there are **NO EXCEPTIONS!!!!!!!**

Child(ren) Name: _____

Parent Signature: _____



CELL PHONE

Parents,

Don't forget the cell phone number for the summer camp, this phone remains with us at all times during our operating hours of 7:00 am to 6:00 pm.

Cell #: (727)455-3976

If we're at the church you can also reach us at (727)723-7679, but when on field trips please use the cell phone number.

Please make sure that your emergency contact numbers are current and available, if we call you it's probably an emergency or urgent matter.

**Thank you,
Northwood Summer Staff**



Food Experience Permission Form

I give permission for my child _____ to participate in food related activities.

Please check one of the following:

_____ My child DOES NOT have a food allergy or dietary restriction.

_____ My child DOES have a food allergy or dietary restriction. He or she may participate, but may not eat or hand the following items (please list below)

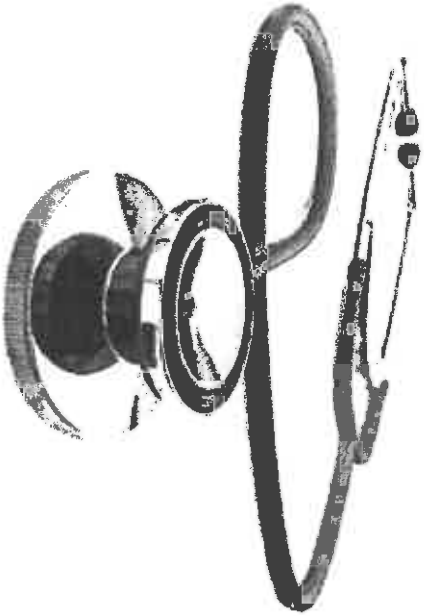
_____ My child DOES have a food allergy or dietary restriction. He or she may not participate in activities.

Parent Signature

Date

What is the influenza (flu) virus?

Influenza ("the flu") is caused by a virus which infects the nose, throat, and lungs. According to the US Center for Disease Control and Prevention (CDC), the flu is more dangerous than the common cold for children. Unlike the common cold, the flu can cause severe illness and life threatening complications in many people. Children under 5 who have the flu commonly need medical care. Severe flu complications are most common in children younger than 2 years old. Flu season can begin as early as October and last as late as May.



How can I tell if my child has a cold, or the flu?

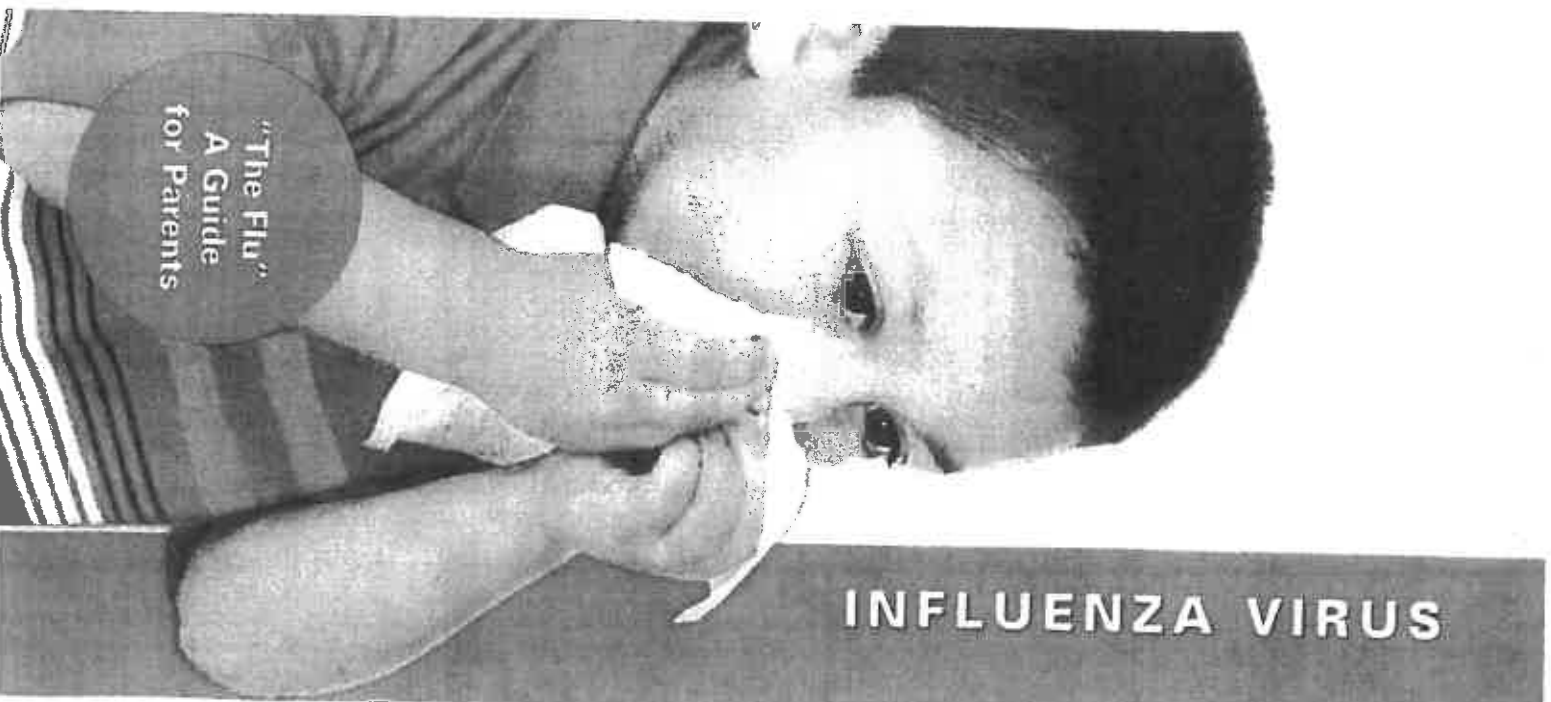
Most people with the flu feel tired and have fever, headache, dry cough, sore throat, runny or stuffy nose, and sore muscles. Some people, especially children, may also have stomach problems and diarrhea. Because the flu and colds have similar symptoms, it can be difficult to tell the difference between them based on symptoms alone. In general, the flu is worse than the common cold, and symptoms such as fever, body aches, extreme tiredness, and dry cough are more common and intense. People with colds are more likely to have a runny or stuffy nose. Colds generally do not result in serious health problems, such as pneumonia, bacterial infections, or hospitalizations.



For additional information, please visit
www.myflorida.com/childcare or contact your
local licensing office below:

CF/PI 175-70, June 2009

This brochure was created by the Department of Children and Families in consultation with the Department of Health.



During the 2009 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes provide parents with information detailing the cause, symptoms, and transmission of the influenza virus (the flu) every year during August and September.

My signature below verifies receipt of the brochure on *Influenza Virus, The Flu, A Guide to Parents:*

Name: _____

Child's Name: _____

Date Received: _____

Signature: _____

Please complete and return this portion of the brochure to your child care provider, in order for them to maintain it in their records.



What should I do if my child gets sick?

Consult your doctor and make sure your child gets plenty of rest and drinks a lot of fluids. Never give aspirin or medicine that has aspirin in it to children or teenagers who may have the flu.

CALL OR TAKE YOUR CHILD TO A DOCTOR RIGHT AWAY IF YOUR CHILD:

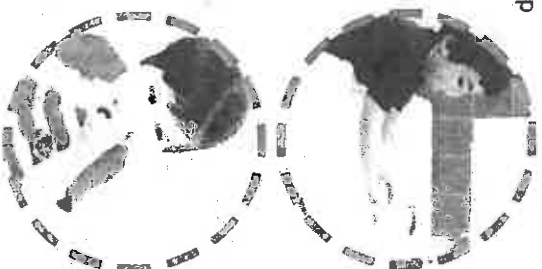
- Has a high fever or fever that lasts a long time
- Has trouble breathing or breathes fast
- Has skin that looks blue
- Is not drinking enough
- Seems confused, will not wake up, does not want to be held, or has seizures (uncontrolled shaking)
- Gets better but then worse again
- Has other conditions (like heart or lung disease, diabetes) that get worse



What can I do to prevent the spread of germs?

The main way that the flu spreads is in respiratory droplets from coughing and sneezing. This can happen when droplets from a cough or sneeze of an infected person are propelled through the air and infect someone nearby. Though much less frequent, the flu may also spread through indirect contact with contaminated hands and articles soiled with nose and throat secretions. To prevent the spread of germs:

- Wash hands often with soap and water.
- Cover mouth/nose during coughs and sneezes. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.
- Limit contact with people who show signs of illness.
- Keep hands away from the face. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.



How can I protect my child from the flu?

A flu vaccine is the best way to protect against the flu. Because the flu virus changes year to year, annual vaccination against the flu is recommended. The CDC recommends that all children from the ages of 6 months up to their 19th birthday receive a flu vaccine every fall or winter (children receiving a vaccine for the first time require two doses). You also can protect your child by receiving a flu vaccine yourself.

When should my child stay home from child care?

A person may be contagious and able to spread the virus from 1 day before showing symptoms to up to 5 days after getting sick. The time frame could be longer in children and in people who don't fight disease well (people with weakened immune systems). When sick, your child should stay at home to rest and to avoid giving the flu to other children and should not return to child care or other group setting until his or her temperature has been normal and has been sign and symptom free for a period of 24 hours.

For additional helpful information about the dangers of the flu and how to protect your child, visit: <http://www.cdc.gov/flu/>

RULES and REGULATIONS

1. Always ask a counselor for permission to leave a room or the area in which the group is in and you must have a pass.
2. Always stay with your counselor and/or group unless otherwise told.
3. NO FIGHTING!! Keep your hands and feet to yourself.
4. No playing with or feeding the animals during field trips.
5. No climbing or hanging on the trees, beams, or poles.
6. No playing with sticks or mulch.
7. Always pick up after yourself and push in your chairs
8. NO INAPPROPRIATE LANGUAGE.
9. Respect your counselors.
10. Always speak to your fellow students kindly and or respectfully.
11. No running inside or around the building.
12. Please be respectful of the church and its surroundings.
13. Please use your manners at all times including snack.
14. Please be responsible for your personal belongings. This includes any items brought into Northwood Child Care from home or school.
15. Always follow the playground rules.

Date: _____

Parent signature: _____

Student signature: _____

For your child's safety:

- Parents you will need to provide your child with sunscreen.
- All items must be labeled with your child's name.
- We are not responsible and/or liable for any electronics or toys your child brings from home, of course we will monitor them and make sure they are safe but ultimately they are your child's responsibility.
- If your child shows up on field trip days they will not be permitted to stay if they do not have their Northwood Shirt
- Parents must sign their child in and out each day.
- **If we do not have at least 25 signed up for the week of July 4 thru July 8, Northwood will not be open.**

Can your child swim and how well? (If not you will need to send them with some sort of floatation device and please list any other concerns or comments you may have).

Parents if you look on the NPC Summer Camp Calendar you will observe that we are going to Adventure Island on August 5th - For this to happen we WILL NEED PARENT VOLUNTEERS. If you are interested and would like to sign up please fill out your contact information below, as we will be contacting you (only if you fill out the bottom portion) with Field Trip Info/Details.

Name: _____

Email: _____

Ph.: _____

Northwood Childcare/Summer Camp
Field Trip Permission Slip

I (We) hereby grant permission for _____ to participate in a

Child(ren)'s Name

Field trip to:

LOCATION:

DATE:

TIME:

See Attached page for full list

June 13 - August 5, 2016

Varies by field trip

and to make authorized or emergency stops as necessary.

Students will be traveling in the following manner :

Commercial Vehicle Carrier

NPC Van

NPC Mini-bus

Other

1. I authorize staff representatives to obtain medical treatment for my child, which include required emergency transportation in case of serious illness or injury and agree to pay for such treatment.
2. I understand that medications will be dispensed by a responsible staff member.
3. I have documented below all precautions/instructions regarding my child's medication. I have noted any special health-related conditions or allergies regarding my child:

4. All provisions of the rules/regulations apply to field trips to ensure child safety and compliance with rules/regulations . I agree that my child is responsible for all personal belongings.

Parent/Guardian Signature

Phone Number

Alt. Ph. Number

Date

NORTHWOOD SUMMERCAMP FIELD SCHEDULE

<u>DATE:</u>	<u>FIELD TRIP:</u>	<u>ADDRESS:</u>	<u>TIME:</u>
6/14	Celebration Station	24546 US-19, Clearwater 33763	10:00a – 1:00p
6/17	Countryside Lanes	27867 US HWY 19 N. Clearwater,33761	9:00a – 11:00a
6/20	Highland Rec. Center	400 Highland Avenue, Largo 33770	10:00a - 4:00p
6/22	Wheel Fun @ Fred Howard Park	1700 Sunset Drive, Tarpon 34689	8:30a -3:00p
6/24	Clearwater Beach Pool	69 Bay Espalande, Clearwater 33767	11:00a-5:00p
6/30	** Lowry Park Zoo	1101 W. Sligh Ave., Tampa 33604	8:30a -4:00p
7/1	Tampa Bay Ice Skating Academy	255 Forest Lakes Blvd 34677	11:00a – 4:00p
7/5	Sea Screamer @ Clearwater Beach	69 Bay Espalande 33767	11:00a – cont'd
7/5	Clearwater Beach Pool	69 Bay Espalande, Clearwater 33767	cont'd – 4:30p
7/6	Highland Rec. Center	400 Highland Avenue, Largo 33770	10:00a - 4:00p
7/7	**Tropicana Field/ Rays Game	1 Tropicana Dr. St. Pete 33705	10:00a - 4:00p
7/11	Morningside Pool	2400 Harn blvd. Clearwater 33764	10:30a – 4:30p
7/13	**Sponge- O- Rama Cruise	510 Dodecanese Blvd. Tarpon 34689	9:00a – cont'd
7/13	Anclote River Park	1119 Baillies Bluff Road, Holiday 34691	cont'd – 3:30p
7/15	Wheel Fun @ Fred Howard Park	1700 Sunset Drive, Tarpon 34689	8:30a -3:00p
7/19	Highland Rec. Center	400 Highland Avenue, Largo 33770	10:00a - 4:00p
7/21	Tree Hoppers Aerial Adventures	27839 St. Joe Road, Dade City 33525	11:00a – 3:00p
7/22	Morningside Pool	2400 Harn blvd. Clearwater 33764	10:30a – 4:30p
7/26	**Florida Aquarium	701 Channelside Dr. 33602	9:00a – cont'd
7/26	SS Victoryship Tour	705 Channelside Dr. 33602	cont'd – 4:00p
7/27	**Buccaneer Bay @ Weeki Wachi	6131 Commercial Way Spring Hill, 34606	8:30a – 5:00p
7/29	Air Heads	12401 Belcher Road S. Largo 33773	11:00a – 3:00p
8/ 1	Clearwater Beach Pool	69 Bay Espalande, Clearwater 33767	11:00a-5:00p
8/3	Celebration Station	24546 US-19, Clearwater 33763	10:00a – 1:00p
8/5	Adventure Island	10001 N. Malcolm Dr. Tampa 33612	9:00a – 5:00p

*****Times shown will be the times that we will DEPART and ARRIVE back to NPC Facilities.*****

Vicki Conolly, Director NPC Schools; vickic@northwoodpc.org

727.723.7679

727.455.3976

2875 State Road 580, Clearwater, FL. 33761

June 2016

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1			1	2	3
	6	7	8	9	10
	13	14	15	16	17
Week 2 ** VBS**	Stay @ NPC -Pass out TSHIRTS -Pass out Money Bags Bring Lunch	CELEBRATION STATION 10:00a – 1:00p Bring Lunch	Stay @ NPC Games, Crafts, & Fun Bring Lunch	ASTRO SKATE 12:00p – 4:00p Bring Lunch	COUNTRYSIDE LANES 9:00a – 11:00a Bring Lunch
	20	21	22	23	24
	HIGHLAND REC. CENTER POOL/PLAYWORLD 11:00a – 3:30p Bring Lunch	Stay @ NPC Games, Crafts, & Fun Bring Lunch	WHEEL FUN @ FRED HOWARD PARK 9:00a – 2:00p Lunch Provided	Stay @ NPC Games, Crafts, & Fun Bring Lunch	CLEARWATER BEACH POOL 12:00a – 4:30p Bring Lunch
Week 3	27	28	29	30	
	Stay @ NPC Games, Crafts, & Fun Bring Lunch	ASTRO SKATE 12:00p – 4:00p Bring Lunch	Stay @ NPC Games, Crafts, & Fun Bring Lunch	LOWRY PARK ZOO 9:00a – 3:00p Bring Lunch	

July 2016

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 3					1 TAMPA BAY ICE SKATING ACADEMY 11:00a – 4:00p Bring Lunch
Week 4	4 CLOSED!!!	5 SEA SCREAMER & CLEARWATER BEACH POOL 11:00a – 5:00p Bring Lunch	6 HIGHLAND REC. CENTER POOL/PLAYWORLD 11:00a – 3:30p Bring Lunch	7 TAMPA BAY RAYS @ Tropicana Field 11:00a – 3:00p Bring Lunch	8 Stay @ NPC Games, Crafts, & Fun Bring Lunch
Week 5	11 MORNINGSIDE POOL & PICNIC Lunch Provided	12 Stay @ NPC Games, Crafts, & Fun Bring Lunch	13 SPONGE-O-RAMA CRUISE & ANCLOTE RI. PARK 9:00a – 4:00p Lunch Provided	14 Stay @ NPC Games, Crafts, & Fun Bring Lunch	15 WHEEL FUN @ FRED HOWARD PARK 9:00a – 2:00p Lunch Provided
Week 6	18 Stay @ NPC Games, Crafts, & Fun Bring Lunch	19 HIGHLAND REC. CENTER POOL/PLAYWORLD 11:00a – 3:30p Bring Lunch	20 Stay @ NPC Games, Crafts, & Fun Bring Lunch	21 TREE HOPPERS ZIP LINING 11:00a – 3:00p Bring Lunch	22 MORNINGSIDE POOL & PICNIC Lunch Provided
Week 7	25 Stay @ NPC CHICK-FIL-A for LUNCH Lunch Provided	26 FLORIDA AQUARIUM & SS VICTORY SHIP TOUR BRING LUNCH	27 BUCCANEER BAY @ WEEKI WACHEE 9:00a – 5:00p Bring Lunch	28 Stay @ NPC Games, Crafts, & Fun Bring Lunch	29 AIR HEADS TRAMPOLINE ARENA 11:00a – 3:00p Lunch Provided

August 2016

Monday	Tuesday	Wednesday	Thursday	Friday
1 Clearwater Beach Pool 12:00a – 4:30p Bring Lunch	2 Stay @ NPC Games, Crafts, & Fun Bring Lunch	3 CELEBRATION STATION 10:00a – 1:00p Bring Lunch	4 Stay @ NPC Games, Crafts, & Fun Bring Lunch	5 ADVENTURE ISLAND 9:00a – 5:00p Bring Lunch
8 CLOSED!!!	9 CLOSED!!!	10 SCHOOL STARTS!!!	11	12
15	16	17	18	19
22	23	24	25	26
29	30	31		