



# 2021 Arc Summer Kamp IN PERSON APPLICATION

**\*\*\*IN PERSON KAMP: Tuesday, Wednesday, and Thursday from 9 am – 12 pm \*\*\***

Camper's Name: \_\_\_\_\_

Your Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Parent/Guardian's Name (if different from above): \_\_\_\_\_

Address: \_\_\_\_\_

Best Contact Number: \_\_\_\_\_ Alternate Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Camper's General Information:**

Date of Birth: \_\_\_\_\_ School Attending/Grade: \_\_\_\_\_

**Specific Diagnosis; any other Health Issues/Allergies:** \_\_\_\_\_

Special Dietary Needs: \_\_\_\_\_

Special Restroom Needs: \_\_\_\_\_

Specific Communication Needs: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**APPLICATION DEADLINE: JUNE 8**

**Please return completed application to:**  
The Arc of Gaston County Attn: Summer Kamp  
200 East Franklin Blvd. Gastonia, NC 28052

Contact The Arc office with any questions: 704-861-1036/[arcgaston@gmail.com](mailto:arcgaston@gmail.com)



# 2021 Arc Summer Kamp

## IN PERSON APPLICATION

These questions are used to get a general idea of your child's level of functioning in each area. Although our goal is to challenge your child in each of these areas, the overall goal of Kamp is fun. For this reason, individual expectations will be adjusted to allow your child to participate in activities in a fun way. Remember that generalizing a previously mastered skill to the community is the ultimate goal of learning a skill, not being able to perform the skill on worksheets.

**Please indicate your camper's abilities in each of the following areas:**

	Complete Assistance	Partial Assistance			No Assistance		Comments:
	1	2	3	4	5		
Toileting	1	2	3	4	5	_____	
Eating	1	2	3	4	5	_____	

**My camper communicates with others using primarily:**

- \_\_\_ Complete Sentences
- \_\_\_ 2-3 Word Phrases
- \_\_\_ One Word Phrases
- \_\_\_ Objects
- \_\_\_ Gestures
- \_\_\_ Picture/Symbols

**I communicate with my camper using primarily:**

- \_\_\_ Complete Sentences
- \_\_\_ 2-3 Word Phrases
- \_\_\_ One Word Phrases
- \_\_\_ Objects
- \_\_\_ Gestures
- \_\_\_ Picture/Symbols

**Activity/Attention Level** (check all that apply):

- \_\_\_ Has typical attention span for age
- \_\_\_ Very short attention span
- \_\_\_ Less active, needs motivation
- \_\_\_ Overactive
- \_\_\_ Requires constant one-to-one supervision at all times

**Behaviors** (check all that apply):

- \_\_\_ Scratches
- \_\_\_ Hits
- \_\_\_ Pinches self/others
- \_\_\_ Grabs others
- \_\_\_ Runs away often
- \_\_\_ Throws things
- \_\_\_ Dumps liquids or drinks
- \_\_\_ Touches inappropriately self/others (please specify)
- \_\_\_ Triggers (provide examples below)

Please describe any checked behaviors checked above in detail:

\_\_\_\_\_

\_\_\_\_\_

**What would concern you the most about taking your child out into the community as part of a group?**

\_\_\_\_\_

**Please indicate the appropriate answers to the following:**

**Any special fears of which we need to be aware?**

- \_\_\_ Water \_\_\_ Thunder/Lightening \_\_\_ Animals \_\_\_ Darkness \_\_\_ Insects \_\_\_

Other Comments \_\_\_\_\_

\_\_\_\_\_



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**Any personality conditions of which we need to be aware?**

None  Shyness  Hiding  Wandering Away  Tantrums  Aggressiveness  
 Unusually Sensitive

Comments \_\_\_\_\_  
\_\_\_\_\_

**Is your camper:**

Completely dependable  Somewhat dependable  Needs close supervision

Comments \_\_\_\_\_  
\_\_\_\_\_

**What special talents does your camper have?**

Singing  Musical instruments  Reciting  Dancing  Gymnastics  Art  Reading

Comments \_\_\_\_\_  
\_\_\_\_\_

**Can your camper:**

Tell time?  
 Remember instructions for future time?  
 Understand time? (minutes, hours, day, week, yesterday, tomorrow, etc.)

Comments \_\_\_\_\_  
\_\_\_\_\_

**Please tell us anything that would be helpful about your camper's comprehension level:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please make us aware of any other important information about your child: (Special fears; Sensory issues; Calming mechanisms, etc.):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Feel free to include any other relevant information that would help us to understand your camper better)*

**2021 Arc Summer Kamp**  
**RULES/GUIDELINES/AGREEMENT**

**IN CASE OF EMERGENCY**

CAMPER'S NAME: \_\_\_\_\_

PARENT/GUARDIAN'S NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

CAMPER'S PHYSICIAN: \_\_\_\_\_

PHYSICIAN'S PHONE NUMBER: \_\_\_\_\_

**OTHER PERSONS TO CONTACT** (in addition to ones listed above)? **YES / NO**

**IF YES, LIST NAME, PHONE # & RELATIONSHIP TO THE CAMPER:**

\_\_\_\_\_

\_\_\_\_\_

**This form, as well as camper's registration form, will be on site at all times. Please list any additional information you would like us to know that has not been included in either form:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I give permission for my child to receive emergency care, if needed, while at Kamp. I understand an effort will be made to contact the parent or guardian as well as the camper's physician. If effort is unsuccessful, I give permission to the physician selected by the Kamp or Arc personnel to seek appropriate medical needs for my child, as named above.*

\_\_\_\_\_

**SIGNATURE OF PARENT/GUARDIAN** **DATE**

**PERMISSION FOR PHOTOS:**

*I give permission for Kamp to take pictures of my camper to be used in the promotion of the camp.*

\_\_\_\_\_

**SIGNATURE OF PARENT/GUARDIAN** **DATE**



**2021 Arc Summer Kamp**  
**RULES/GUIDELINES/AGREEMENT**

**PLEASE READ, SIGN, AND RETURN WITH COMPLETED APPLICATION**

**1. Application, Fees, Orientation**

- a. **A \$25.00 deposit per camper is required** and must be submitted with the completed application. This is due no later than June 4, 2021.
- b. Camp fees are \$275.00 - this covers all 6 weeks of camp and all camp activities/supplies.
- c. Orientation will be held on June 10 at 6 pm @ The United Way Building. Important information will be shared and camper handbooks will be distributed. Please have at least one caregiver to attend.

**2. Camper Drop Off & Pick Up**

- a. Staff will begin receiving campers at 8:50 am; please have your camper dropped off by 9:00 am so the day's activities can begin on time.
- b. Parents/Guardians **MUST** arrange to pick up their campers by 12:00 pm. There is no supervision onsite after 12:05 pm.  
*\*\*\* Campers picked up after 12:05 pm will incur a fee of \$1 per minute late \*\*\**
- c. For safety precautions, campers will only be released to persons specifically identified in advance.

**3. Medications**

- a. Medications **CANNOT** be administered by Kamp personnel. Special medical conditions- medication needs/allergies/special dietary needs, etc. must be clearly stated in camp application for our awareness.

**4. General Camp Expectations**

- a. Campers must bring their lunch each day. Refrigerator and microwave are available.
- b. All personal items must be clearly labeled with camper's name (lunch boxes, day packs, clothing, etc.)
- c. Camp Staff is not responsible for personal items of campers.
- d. Campers must dress comfortably but appropriately for camp (tennis/closed-toed shoes, shirts, etc.)
- e. While we enjoy having your child participate in camp, please keep them home if they are sick or contagious.

\_\_\_\_\_

**I have read, understand, and will adhere to all of the Rules and Guidelines listed above.**

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

# RULES/GUIDELINES/AGREEMENT (continued)

## CONSENT FOR CARE

I, \_\_\_\_\_ the \_\_\_\_\_  
*Parent/caregiver Name Relationship to child(ren)*

of \_\_\_\_\_, age \_\_\_\_\_

\_\_\_\_\_, age \_\_\_\_\_  
*Child's Name Child's Age*

give permission to the staff of The Arc Summer Kamp (Kamp) to provide care for my child(ren) this summer. I have been informed of the scope of the Kamp summer program. I am aware of my responsibilities to drop my child(ren) off no earlier than 8:50 am, pick up on time at 12 pm, and send them prepared to play safely (appropriate footwear and clothing, sunscreen). I understand that my child(ren) will participate in a variety of supervised activities including exercise/movement, social & behavioral skill building, outdoor play, health & nutrition, and science & education while in a group setting with a 1:4 staff-to-child ratio. I understand that staff may use verbal cues to address my child(ren)'s behavior if it becomes unruly; and should the behavior escalate where my child or others are in serious, immediate danger, staff will remove them from the group and take them to a separate room/area to safely deescalate. If my child(ren) has to be removed from the group due to behavior challenges, it will be documented and shared with me within 24 hours. I understand that if my child(ren) is unable to behave safely after staff have tried to intervene and deescalate, I may be asked to pick up my child(ren) from camp.

Parent/Caregiver Signature \_\_\_\_\_ Date \_\_\_\_\_

Kamp Kaleidoscope Director Signature \_\_\_\_\_ Date \_\_\_\_\_

The Arc of Gaston Co Director Signature \_\_\_\_\_ Date \_\_\_\_\_

# **RULES/GUIDELINES/AGREEMENT** (continued)

## **EXPECTATIONS FOR BEHAVIOR AND DISCIPLINARY POLICIES**

Kamp staff have a responsibility to make each day a safe, secure, and fun experience for all campers. They will encourage and engage positive behavior and will work to the best of their ability to de-escalate problem situations with the hopes of providing support for campers to build skills in managing their own behaviors. Kamp staff understand that each camper presents their own unique needs and will do their best to accommodate these needs while maintaining fairness. While Kamp offers a high staff-to-participant ratio, we are unable to provide constant 1:1 support to any one participant and need to consider the needs of the group as a whole when addressing behavior. Parents/Guardians have a responsibility to provide copies of their camper's IEP and Behavior Plan so that staff can help to maintain strategies for behavior already established. We want to make all camper experiences a positive one.

### **What will happen when the Behavior Policy is violated?**

If an incident occurs where a child conducts themselves in such a manner which jeopardizes their safety, the physical or emotional safety of others:

**1. Minor Violation (*hard time following directions, non-threatening touch to others*):**

A staff member will address the camper with positive reinforcement, redirect the behavior, remove camper and go to a separate area/room if needed, and will re-engage the camper with the activity once settled. Staff will document incident and verbally advise Parents/Caregiver at pick-up time.

**2. Major Violation (*uncooperative, repeated redirection, aggressive touch to others*):**

A staff member will address the camper with a positive but firm tone, ensure the other camper/staff/person isn't hurt, remove camper and go to separate area/room, redirect the behavior, and re-engage camper with activity once settled. Staff will document the incident and have the Parent/Caregiver sign the behavior/incident report. (depending on the severity of the behavior, the parent/caregiver may be called to pick up their camper within the hour).

## **RULES/GUIDELINES/AGREEMENT** (continued)

### 3. Severe Violation (*disruptive behavior, harmful touch/injury to others, damage to property*):

A staff member will immediately remove camper from area to a separate room and address the behavior directly according to instructions from application/IEP/Behavior plan. Another staff will assess injury or damage and proceed accordingly. The incident will be documented and the parent/caregiver will be contacted immediately to pick up their child from camp. The child may be suspended for the following day or remainder of the week and/or lose privileges (ex/ field trips) depending on the severity of the incident. The Kamp Director, staff involved in incident and The Director/Board Member for The Arc of Gaston County will ask to meet with the child and parent to discuss the behavior and how we can work together to improve. Parent/Caregiver will be asked to sign a behavior/incident report.

### 4. Critical Violation (*non responsive to redirection, continuously disruptive, inconsolable, continues to inflict harmful touch/injury to others, damage to property*):

This will follow the same procedure as above in Severe Violation. In addition, the camper will be suspended from camp for a full week from the day of the incident. The Kamp Director, staff involved, Arc Director, and parent/caregiver will meet to discuss the behavior, if there area any options for improvement, and if the camper will be allowed to return to camp. Behavior/Incident report will be signed by all parties.

**\*Please Note:** We reserve the right at any time to dismiss your child from the program immediately if we deem unsafe placement due to environment, physical, emotional, or other harm to themselves, other children, and staff. The above guidelines have been read and discussed.

Parent/Caregiver Signature \_\_\_\_\_ Date \_\_\_\_\_

Kamp Director Signature \_\_\_\_\_ Date \_\_\_\_\_

The Arc of Gaston Co Director Signature \_\_\_\_\_ Date \_\_\_\_\_