

GOLD MEDAL SUMMER CAMP 2023

Office Use Only: _____
Record date: _____
Initials: _____ Start Date: _____



Arrival and Dismissal

Summer Camp opens at 7:30am and closes at 6:00pm. Upon arrival, make sure your child has already been served breakfast and has a **non-microwavable lunch** that is packed with an ice pack if needed. We do not have a microwave or refrigerator available. Make sure your child has the necessary attire for gym play and field trips planned for that day and any extra spending money necessary for field trips.

New Sign-In/Sign-Out Protocols will be implemented to ensure the safety of each child. More information will be found within our welcome letter. We offer drive thru pickup from 4:00 - 6:00. A staff member will be present at this time to make sure your child is safely escorted to their vehicle.

Enrollment Procedures

Parents are required to fill out the attached registration form for each child being enrolled in the Summer Camp program. At the time of enrollment, **make sure all documents including waivers are signed before processing.**

Gold Medal Summer Camp will seek to establish and maintain a good relationship and to facilitate communication and cooperation. Parents are welcome to visit the program at any time, especially on birthdays and special occasions. Information on any special field trips will be posted.

Fees and Payments Process

Cost of the program will be **\$135.00 a week if registered BEFORE May 15th or \$140.00 if registered after May 16th**. This cost includes a t-shirt for one full week of enrollment and some of the field trips. A \$10.00 deposit is required to hold your spot for each week in attendance. This payment is **non-refundable. The daily rate is \$42.00** and **does not** include a t-shirt. A t-shirt may be purchased for \$10. All payments will be accepted in the form of credit, debit, check, cash or automatic draft. If you are planning on using automatic draft, please see the front desk for payment setup.

Payments must be made each week on Monday of the week in which your child is attending. If payment is not made by the end of the day Tuesday, there will be a \$20 late fee added to your account and your child will not be able to return to camp until payment is made.

Camp Cancellation notice MUST be given two weeks before the start of that particular camp week in order to not be charged for the remainder balance of that week. If no notice or less than a 2 week notice is given, payment for the remaining balance will be required, no exceptions moving forward.

Snacks: Snacks will be provided for the children at approximately 9:00am & 3:30pm. During an event or a field trip during those times, snack may be earlier or later depending on the current circumstances.

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Field Trips

Field trips are included in the weekly cost. There are a couple of exceptions on higher cost outings. You will be notified about these as soon as our booking is in place. Our weekly field trip schedules will determine the destination, costs, and further details regarding each specific trip. If your child will be in **grade 3 or higher** and you would like them to go to Myrtle Waves with their group (group 3-5) you will need to purchase a season pass. You **MUST** purchase this pass through Myrtle Waves directly. There will be **NO** outside food permitted in the park. Only exception will be you may send your child with a water bottle. Lunch options for Myrtle Waves this year will be Pizza *ONLY, Cheese or Pepperoni!* These lunch purchases will be made through your parent portal *ONLY*, in the amount of \$7.00 weekly! If you choose to not purchase lunch meals through your portal, you **MUST** provide your child with no less than \$10.00 in order to allow them lunch purchases inside the park!

Moving forward, we **WILL NOT** be holding money for children. Everything must be purchased through our Parent Portal via your Parent Portal account. If you wish to send money with your child for our vending machines, the child must be responsible for holding their own money.

Personal Belongings

Gold Medal staff members will not be held responsible for lost, broken or stolen items. Please leave all valuables at home and no money in the cubbies. **All personal belongings need to be properly labeled** and placed in a cubby. We keep a lost and found for items not taken home. Each Friday, the lost and found items will be donated. **Electronics are NOT allowed.** If your child is to bring his/her phone, it must be kept in their backpacks.

Health Policies

Children attending the program should have school insurance or a private coverage. If a child becomes ill during the day, they will be isolated from the group and parents will be notified immediately and you must make arrangements to pick up the child as soon as possible. If the child is in need of emergency care and the parents cannot be located, they will be taken to the doctor who is authorized by the parents on the enrollment application. In case of a serious accident requiring emergency treatment, the emergency room of Grand Strand Hospital will be used.

The staff will not administer medicine without special permission and specific instructions from the child's doctor. Prescription medicine must be sent in the original container with instructions on the label.

What to Bring

Our program requires each child to bring **a bag with an extra change of clothes (including socks and shoes), sunblock, swimsuit, towel, and a water bottle daily.**

Please make sure each bag is labeled properly with name and group number, so it can be easily identified. Upon arrival, each student will be given a cubby for his or her belongings. Please note, if your child does not have the items necessary in their bag, he or she may not be able to participate in daily activities nor can Thomas Gymnastics supply these items.

Contact: For any further information regarding summer camp, please contact us at (843) 353-1500 or email at campmb@thomasgymnastics.com for Carolina Forest and campc@thomasgymnastics.com for Conway.

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Membership Registration Form

Student's name _____ Female/Male, DOB _____ Grade (going into) _____

2nd Child's name _____ Female/Male, DOB _____ Grade (going into) _____

Facility (Conway or Carolina Forest) Attending: _____ Shirt Size _____

Mom's name _____ Dad's name _____

Street Address _____

City _____ State: _____ Zip Code: _____

Email: _____

Home Phone: _____ Mom's Cell: _____ Dad's Cell: _____

Mom's Employer _____ Work phone: _____

Dad's Employer _____ Work phone: _____

Emergency Contact: _____ Relation _____

Emergency phone: _____ Gymnastics class? YES__ or NO__ Time: _____

INFORMATION ABOUT YOUR CHILD

Does your child have any known medical conditions:

Diabetes COPD Stroke Autism (Please Specify)

Heart Disease Arthritis ADD

Heart Failure Cancer ADHD OTHER (Please Specify)

Asthma High Blood Pressure

Does your child have any known allergies (Food, Medication, and/or Environmental): If yes, please specify below:

Please give any other information concerning your child which will be helpful in his/her experience in a group living (such as play, eating, sleeping habits, special fears, like or dislikes).

I agree that the program director has the authorization to use Grand Strand Hospital to obtain emergency care for my child in the event that neither I nor the family physician can be contacted immediately.

Family physician _____ Phone Number _____

Signature of Parent _____ **Date:** _____

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If your child is to be picked up by anyone other than the person(s) listed below, you must send a written note. Otherwise, the child will not be permitted to leave.

Person: _____ Relationship: _____

Person: _____ Relationship: _____

Person: _____ Relationship: _____

Person: _____ Relationship: _____

Weeks and their Corresponding Themes

Please circle the weeks your child will be coming to camp. If you will be coming all weeks or are unsure, check the appropriate box. (A \$10 nonrefundable deposit per child for each week signed up will be due upon sign up to hold your child(s) spot each week and will be deducted from the weekly cost.)

<u>Week 1</u> Away We Go (June 5 th - June 9 th)	<u>Week 2</u> Blasting Off (June 12 th - June 16 th)	<u>Week 3</u> Wild N' Free (June 19 th - June 23 rd)	<u>Week 4</u> Young Dreamers (June 26 th - June 30 th)	<u>Week 5</u> Safety Check (July 3 rd - July 7 th)
<u>Week 6</u> Knights of the Round Table (July 10 th - July 14 th)	<u>Week 7</u> Killin' Me Smalls (July 17 th - July 21 st)	<u>Week 8</u> Deep Sea Adventures (July 24 th - July 28 th)	<u>Week 9</u> Walk On The Wild Side (July 31 st - August 4 th)	<u>Week 10</u> Barnyard Friends (August 7 th - August 11 th)
<u>Week 11</u> Up, Up & Away (August 14 th - August 18 th)	<u>FAMILIES INVITED</u> END OF SUMMER BLAST HELD ON THURSDAY AUGUST 17TH Weekly Themes & Field Trips may change based on booking availability with the destination.			
<u>ALL WEEKS</u> (Week 1 - Week 11)				

CAROLINA FOREST LOCATION

<u>Kinder-Kids</u> Pre-K & Kindergarteners	<u>Group 1</u> (rising) 1 st Graders	<u>Group 2</u> (rising) 2 nd Graders	<u>Group 3</u> (rising) 3 rd Graders	<u>Group 4</u> (rising) 4 th Graders	<u>Group 5</u> 5 th Graders and higher
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CONWAY LOCATION

Group Assignments May Change Based On Enrollments

<u>Group 1</u> Pre-K & Kindergarteners	<u>Group 2</u> 1 st & 2 nd Graders	<u>Group 3</u> 3 rd Graders and higher
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Gymnastics Waiver and Release 2023

The staff of Thomas Gymnastics recognizes gymnastics can be a dangerous sport. Any activity which involves height and/ or motion can cause injury. All instructors at Thomas Gymnastics takes every precaution to ensure the safety of each student. While safety is our number one priority, students may suffer injury, possibly minor, serious or catastrophic in nature. Thomas Gymnastics coaches and staff members are not liable for injuries sustained by students or spectators during the course of or in transportation to and from events. With this in mind and being fully aware of the risks and possibility of injury involved, I consent to have my child/children participate in the programs offered by Thomas Gymnastics. In an unlikely event of injury, I waive and release all claims and liability I or my child may have against Thomas Gymnastics. I understand that Thomas Gymnastics produces promotional material about their program. I understand that my son or daughter may be included in video tape or photography taken during summer camp hours. I hereby grant Thomas Gymnastics, its successors, assignees, sponsors, and all other commercial exhibitors the exclusive right to photograph and/or videotape my son or daughter and further to utilize my son or daughters name and face as part of advertising and promotion of Thomas Gymnastics without reservation. In granting this, I understand that Thomas Gymnastics is under no obligation to exercise any of its rights and privileges hereby granted.

Signature of Parent or Guardian

Date

Food Allergy Policy

Parents are responsible to disclose the level of need for their child's allergy to the appropriate summer camp staff. Gold Medal Summer Camp can only make parents and children aware of food allergies during snack times; however, the Gold Medal Summer Camp Program does not assure parents that food items served at our facility are free from those allergens. Parents of children with severe allergies should provide appropriate and safe food for their children. Parents may request special seating for their child during snack time to limit contact with foods that cause a severe reaction.

Signature of Parent or Guardian

Date

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Summer Camp Field Trip Waiver 2023

The undersigned hereby releases Gold Medal Summer Camp, its respective directors, teachers and staff of and from any and all claims whatsoever arising, or which may arise by reason of the Child's participation in the Field Trips including any claims due to personal injuries or illness excepting any such claim resulting from and/or arising out of the gross negligence of Thomas Gymnastics, its respective directors, teachers or staff.

Should the Child suffer injury or illness while on the Field Trips, the undersigned hereby authorizes any representative of Thomas Gymnastics and, in particular, any teacher accompanying the Child to authorize such medical attention for the Child as may be deemed appropriate by said representative of Thomas Gymnastics in any circumstance. The undersigned agrees to bear the costs of all medical care and procedures required by the Child. The undersigned also agrees to maintain appropriate medical insurance coverage for the Child while on the Field Trips.

The undersigned hereby releases Thomas Gymnastics, its respective directors, teachers and staff from any claim arising out of any medical treatment the Child may require.

The undersigned acknowledges that should the Child fail to keep and obey all rules and regulations prescribed by Thomas Gymnastics, its respective directors, teachers and staff, while participating in the Field Trips, Thomas Gymnastics may, in its sole and absolute discretion, terminate the Child's participation in the Field Trips without refund for the cost of the Field Trips. Any additional costs incurred because of the termination of the Child's participation in the Field Trip and/or as a result of the Child being sent home will be the responsibility of the undersigned.

Signature of Parent or Guardian _____ **Date** _____

Signature for Swimming Trips _____ **Date** _____

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Discipline and Behavior Management

Rules

- Students must keep hands, feet and objects to themselves.
- Students must show respect for ALL staff and other students.
- Students must use appropriate language.
- Students must use movement and voice levels that are acceptable for the setting.
- Students must respect program's grounds and refrain from damaging property.
- Students must always stay with assigned group.

Consequences:

First offense: A warning is given

Second offense: Time out from activities

Third offense: Time out from activities, written documentation and/or parent contact.

Repeated offenses: After three offenses have been documented, dismissal from program is possible.

** If behavior is severe, regardless of the offense, parent will be contacted immediately.

Dismissal of a child from the program will occur at any time that a child's behavior is determined to be detrimental to his or her own well-being or to the well-being of others in the program. Automatic dismissal will also occur when a child is habitually left after scheduled closing time (over two times in a one-month period) or by failure to promptly pay for the services.

I, THE UNDERSIGNED PARENT OR GUARDIAN OF _____ (CHILD'S FULL NAME), DO HEREBY STATE THAT I HAVE RECEIVED AND DISCUSSED WITH MY CHILD A COPY OF THE THOMAS GYMNASTICS Discipline and Behavior Management Policy.

Date of child's summer camp enrollment: _____

BULLY FREE ZONE: We at Gold Medal Summer Camp maintain a "BULLY FREE ZONE" in accordance to these rules.

Signature of Parent or Guardian

Date

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Advertising Release

By signing below, you also acknowledge that pictures of your child might be taken by staff to be used for advertising purposes for Thomas Gymnastics at the Beach.

Signature of Parent or Guardian

Date

Program Guidelines

If my child is picked up after 6:00 pm there will be a \$20.00 late pick up fee. After 6:10pm, there will be an increase of \$1.00 per minute thereafter.

I also understand that a 2-week notice must be given to withdraw from the program or to inform the facility that your child will be absent for a given week. I understand that my account will be charged if a 2-week notice is not given.

Signature of Parent or Guardian

Date