

2021 Camp Fairfield Rules

We sincerely hope you will enjoy Camp Fairfield - Arts, Parks and More! We have established the following camp rules and would appreciate you reviewing this information with your child. Please sign and return this Rules Form along with your Health Information Form prior to the first date your child will attend camp.

1. Masks must be worn at all times when in the Community Arts Center and on the Fairfield City School buses, campers may remove masks during outdoor mask breaks and lunch.
2. Cooperation is needed at all times, especially when Camp Leaders are speaking. Follow the instructions of the Camp Leaders and cooperate with them at all times.
3. Any personal items brought to camp are the responsibility of the camper.
4. Remain quiet in the halls of the Community Arts Center and running is not permitted.
5. Please keep your hands to yourself - no pushing, hitting, tripping, play fighting, etc.
6. Respect other campers, leaders, tour guides, guest speakers and the environment.
7. No foul or inappropriate language.
8. No trading or exchanging of toys, cards, games, food or money.
9. No throwing of objects.
10. No fighting, verbal or physical assault of any kind.
11. Always sit on the bus. This is a major safety concern and can lead to the removal of camp.
12. No lending of money - please remember, money is your child's responsibility, not the camp leaders.
13. No Public Displays of Affection.
14. No drugs or weapons of any kind.
15. All prescribed medication must be administered and carried by the Camp Leaders.
16. Electronics (including cell phones) that are misused during camp, will be taken away by the leading and returned to the parents upon leaving that day.

Time-outs will be given, as needed, if camp rules are not followed. If time-outs are not effective, children will be sent to visit with the Head Camp Leader. **If necessary, the Head Camp Leader will call parents and if the situation warrants it, parents could be asked to pick up their child early. If parents have to be called, the camper will be put on probation for one week. Further incidents would prohibit the child from returning for up to 5 camp days.** We certainly hope not to be in these situations this summer, but we must have a plan for discipline. The Parks and Recreation Department also reserves the right to change or amend these rules as necessary. It is our intent to make this camp the best experience possible for everyone. If you have any questions or concerns, please do not hesitate to contact us.

CAMPER'S SIGNATURE _____

PARENT'S SIGNATURE _____

Fairfield Parks and Recreation
2021 Health Information Form

Camper Name: _____

Birthdate: _____ Age: _____ Sex: _____

Address: _____ City: _____ State: _____ Zip: _____

Name of Parent/Guardian: _____

Phone(H): _____ Phone(W): _____ Cell: _____

Additional Parent/Guardian or Emergency Contact: _____

Phone(H): _____ Phone(W): _____ Cell: _____

Family Physician: _____ Phone: _____

Family Dentist/Orthodontist: _____ Phone: _____

Medical Insurance Carrier: _____ Policy Group #: _____

Medical Information past or present (please circle):

| | | | | | | | | | | | |
|-----------------------|-----|----|------------|-----|----|-----------------------------|-----|----|------|-----|----|
| Asthma | Yes | No | Allergies | Yes | No | Diabetes | Yes | No | ADD | Yes | No |
| Seizures | Yes | No | Hemophilia | Yes | No | Ulcers | Yes | No | ADHD | Yes | No |
| Psychiatric Treatment | Yes | No | | | | Other Diseases / Conditions | Yes | No | | | |

Please explain each yes circled: _____

In addition to the parent/guardians, my child may be released ONLY to the following individuals:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

If staff member is unfamiliar with person signing out the camper, proper ID will be required.

Anyone other than those names listed above will not be permitted to take the child home unless we have verbal or written permission from the parent/guardian.

Parent/Guardian Signature: _____ Date: _____

I grant my child permission to apply their own sunscreen.

Parent/Guardian Signature: _____ Date _____