



2210 High Tech Road, State College, PA 16803

814-357-6898 fax

814-357-6897

[www.pennskates.com](http://www.pennskates.com)

Dear Summer Camp Parents,

Welcome to our 2016 Summer Day Camp program! Your children will have the opportunity to participate in a wide variety of planned recreation ranging from indoor and outdoor activities, sports, arts and crafts, group activities, guest speakers, themed days, and field trips. Attached to this is the information about our Summer Camp. Please read through the entire Parent Handbook for detailed camp information. For information about specific events/activities, times and locations, please be sure to read our Weekly Camp Newsletter that will be distributed to all parents every Friday for the following week. If you have any other questions feel free to ask our helpful staff members or email Valerie Dench ([vdench@pennskates.com](mailto:vdench@pennskates.com)).

We can ensure that your children will have a fun and safe summer participating in our program. If at any time you as a parent/guardian are interested in assisting with certain activities or providing supervision or transportation for a field trip please feel free to contact us in advance.

A few reminders for the summer program:

Camp runs from June 9th through August 26th (Mondays-Fridays), from 7:30 am – 5:30 pm at Penn Skates. Your child can attend the entire week or just a few days each week. Lunches are not provided, but a hot lunch can be purchased for \$3.50 daily. Morning and afternoon snacks are included. Children are welcome to bring extra snacks, or they can be purchased at our snack bar. If you have any questions please feel free to call Penn Skates or email Valerie Dench at [vdench@pennskates.com](mailto:vdench@pennskates.com). Thanks again for registering for Summer Day Camp!

Sincerely,

Penn Skates Staff



# Penn Skates Summer Camp

## 2016

Our Staff is very excited and looking forward to a wonderful year. This handbook contains Penn Skates Summer Camp policies and procedures, which are important to you and your child. By signing the following, you agree to follow the policies, procedures, and practices placed before you within the Penn Skates Summer Camp Handbook.

Name of Child \_\_\_\_\_

Name of Parent (s) \_\_\_\_\_ Start Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please remember to notify Penn Skates Summer Camp if your child will be absent.**

**Financial Policy:** If outside assistance is required to collect any outstanding balances on your account, all costs incurred, including any and all attorney fees, collection fees, and/or court costs will be added to your account.

I understand Penn Skates Summer Camp's Financial Policy \_\_\_\_\_.  
**Initial**

# Summer Camp Registration

Please fill out this form in full. The information you provide here will be processed prior to your arrival at our facility. Please submit one form per child.

Child's Name:

Gender:  Male  Female

Age:

Birth Date:

Grade Next Fall:

Parent's Names:

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Work Phone:

E-mail Address:

How did you hear about camp?

T-Shirt Size:  Youth 6-8  Youth 10-12  Youth 18-20

Adult S  Adult M  Adult L  Adult XL

Scheduled Weeks	Requested Days
(WEEK 1) June 9,10	Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 2) June 13-17	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 3) June 20-24	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 4) June 27-July 1st	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 5) July 5-8	Entire Week- <input type="checkbox"/> Mon-CLOSED Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 6) July 11-15	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 7) July 18-22	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 8) July 25-29	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 9) August 1-5	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 10) August 8-12	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 11) August 15-19	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>
(WEEK 12) August 22-26	Entire Week- <input type="checkbox"/> Mon- <input type="checkbox"/> Tue- <input type="checkbox"/> Wed- <input type="checkbox"/> Thurs- <input type="checkbox"/> Fri- <input type="checkbox"/>

Is your child in good health, and can he/she participate without any accommodations?

Yes  No

Health History

Please provide as much information in this section as possible. Please indicate approximate date of occurrence to the all that apply.

Ear Infections	Measles	Penicillin	Poison Ivy
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Asthma	Rheumatic Fever	German Measles	Chicken Pox
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insect Stings	Hay Fever	Convulsions	Mumps
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Allergies

Operations or Serious Illness

Chronic or Recurring Illness

Please indicate dates of basic immunizations and most recent booster dates. It is also required that you provide us with a copy of the child's immunization records before your child's first day at camp.

OPT Series	German Measles	Measles (Live)	Tetanus Booster
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Typhoid	Other	Mumps Vaccines	Small Pox
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Polio (sabin)	Tuberculin Test
<input type="text"/>	<input type="text"/>

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Upon submission of this form, the parent or guardian is granting permission for the child to be transported by Penn Skates Summer Camp personal vehicles, or by its contracted providers to and from Penn Skates Summer Camp, day trips or extra-curricular activities. The health information indicated here is correct to the best of my knowledge. The child has permission to engage in all prescribed activities except if noted otherwise. In the event of an emergency, if a parent or guardian cannot be reached, permission is being granted to the physician selected by the Penn Skates Summer Camp Director to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for this child. Further authorization is given to the Penn Skates Summer Camp Director or his designee to provide over the counter medication to this child as necessary. The parent or guardian also agrees that in case of an injury to his or her child that is due to natural causes or by accident which involved no neglect by any summer camp staff that Penn Skates Summer Camp or the staff will not be held liable. Penn Skates Summer Camp reserves the right to change a trip location without prior notice. Penn Skates Summer Camp has permission to transport my child to and from camp activities as necessary.

Signature of Parent

Date

Penn Skates  
2210 High Tech Road Office:  
814-357-6898  
Fax: 814-357-6897  
Email: vdench@pennskates.com Web Address: www.pennskates.com

## PHOTO CONSENT

I give permission for my child \_\_\_\_\_ to be photographed while  
child's name

attending Penn Skates Summer Camp. I understand that the photograph(s)/Image (**to include first name only**) may be used for:

- Display at Penn Skates Summer Camp
- Publications (magazines, newspapers, flyers, etc.)
- Publicity for Penn Skates Summer Camp (TV commercials etc.)
- Penn Skates Summer Camp's website
- Facebook

I understand that there are potential dangers associated with the posting of personally identifiable information on a web site since global access to the Internet does not allow us to control who may access such information. These dangers have always existed; however, we as schools do want to celebrate your child and his/her work. The law requires that we ask for your permission to use information about your child.

Pursuant to law, we will not release any personally identifiable information without written consent from you as parent or guardian. Personally identifiable information includes child's first name and photo or image. (Please see below)

If you, as the parent or guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter to Penn Skates Summer Camp and such rescission will take effect upon receipt by Penn Skates Summer Camp.

This consent releases from liability all personnel of the school, and any others who have received permission by the staff to take photos at the school or school-related activities.

### Check one of the following choices:

I/We GRANT permission for this child's photo/image to be published on Penn Skates Summer Camp's website, Penn Skates Summer Camp's Face book page, displayed at Penn Skates Summer Camp, in publications for Penn Skates Summer Camp, or publicity for Penn Skates Summer Camp.

I/We DO NOT GRANT permission for photo/image that includes this child to be published on Penn Skates Summer Camp's website, Penn Skates Summer Camp's Face book page, displayed at Penn Skates Summer Camp, in publications for Penn Skates Summer Camp, or publicity for Penn Skates Summer Camp.

Student's Name: (please print) \_\_\_\_\_ Student's Grade: \_\_\_\_\_

Print name of Parent/Guardian: (print) \_\_\_\_\_

Signature of Parent/Guardian: (sign) \_\_\_\_\_

Relation to Student: \_\_\_\_\_

Date: \_\_\_\_\_

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### PARENTAL PERMISSION SLIP

Please fill out the permission slip below for all the off-site trips that your child is planning on attending.

My child \_\_\_\_\_ has permission to participate in off-site trips with Penn Skates Summer Camp. Possible trip locations may include but are not limited to the following destinations. The finalized trip schedule will be available prior to the start of summer camp. Possible trips may include bowling, local and State Parks, Spikes Stadium, Indian Caverns, Mini Golf, Boalsburg Military Museum, Del Grosso's, Local fairs and festivals.....Penn Skates reserves the right to adjust program schedules pending weather conditions and facility availability. Penn Skates reserves the right to change a trip location without prior notice. We also reserve the right to change any daily activity, Monday-Friday, as it seems appropriate for the benefit of your child. This may include the transporting of your child to an off-site location for an unscheduled trip.

Is your child a...       Non-Swimmer       Beginner  Swimmer

\_\_\_\_\_

Parental Initial

**Parents Authorization** *This health history is correct as far as I know, and the person herein described has permission to engage in all prescribed activities, except as noted by me. In the event I cannot be reached for emergency, I hereby give permission to the physician selected by the Penn Skates Director to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child.*

I understand that all trips are off site and that my child will be transported by bus or other vehicle to each off site location. I agree that in case of an injury to my child that is due to natural causes or by accident which involved no neglect by any Penn Skates Summer Camp staff that I will not hold Penn Skates Summer Camp or the staff liable. Penn Skates Summer Camp reserves the right to change a trip location without prior notice to parent or guardian.

\_\_\_\_\_  
 Parent Signature

\_\_\_\_\_  
 Date

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 Fax: 814-357-6897  
 Email: vdench@pennskates.com Web Address: www.pennskates.com

## General Policies and Procedures

### Personal Property

**Please label personal property with your children's name.**

**Penn Skates Summer Camp is not responsible for damaged, lost or stolen items, to include items that are left overnight. Cell phones and electronics can be used during designated electronic times during the day.**

### Clothes

Children should wear sneakers, **with socks, everyday** (unless otherwise specified on trip days). Clothing should be weather appropriate and children should **BRING A BATHING SUIT AND TOWEL TO PENN SKATES SUMMER CAMP EVERY DAY. WEDNESDAY ARE RESERVED FOR WATER DAY, BUT DUE TO WEATHER WE MAY HAVE WATER ACTIVITIES ON ALTERNATE DAYS.**

### Sun Protection

Please **put sun protection on your child prior to coming to Penn Skates Summer Camp** (SPF 30 recommended). We ask that you also pack (labeled) sun protection with your child.

### Lost and Found

Lost and found items are displayed near the front door every day. These items will be kept for a short period before being donated. Please remember it is important to have all items labeled with your child's name.

### Schedule

Summer Camp will follow the same basic schedule every day except for field trips days.

A. Camp Hours	7:30 am – 5:30 pm	G. Activity 3	1:00 pm – 2:00 pm
B. Drop Off	7:30 am – 9:00 am	H. Activity 4	2:00 pm – 3:00 pm
C. Morning mtg & snack	9:00 am – 9:30 am	I. Snack Break	3:00 pm – 3:30 pm
D. Activity 1	9:30am – 10:45 am	J. Camper's choice	3:45 pm – 5:00 pm
E. Activity 2	10:45 am – 12:00 pm	K. Pick-Up Time	4:00 pm – 5:30 pm
F. Lunch	12:15 pm – 1:00 pm		

### Drop Off Procedure

Children must be walked into the building. Parents or authorized individuals should sign each child in. **At no time should you drop our child off at the front door.** When **picking up** your child, you **MUST** come in and sign your child out at the front desk. This is for the safety of your child. Remember to notify Penn Skates Summer Camp if someone other than yourself will be picking up your child.

### Lunch

Penn Skates Summer Camp is a **peanut free facility**. Due to the severe allergic reaction of some of our children, **ALL PEANUT products are prohibited**. Lunch is not included in the weekly fee. Your child should bring a bag lunch. Lunch will be available for purchase daily \$3.50. Lunch orders must be received for the week Monday morning. Lunches will not be available for purchase on Trip Days. **On trip days your child must bring a bag lunch, including a drink (no glass)**. The lunch menu will vary and will be available by Friday for the following week. A drink will always be served with Penn Skates Summer Camp provided lunches. Morning and afternoon snacks are included in your weekly fees.

### Snack

Additional snacks are available at our snack bar area. **We recommend that parents pay for their child's snack at the beginning of each week. Pre-paid snack money will be kept in a "bank" and a snack log will be maintained for each individual.** Penn Skates Summer Camp **will not** be responsible for lost or stolen money if a child keeps his or her own money.



### Discipline Policy

The Penn Skates Summer Camp director reserves the right to suspend or expel a camper at any time due to misbehavior. A **Zero Tolerance** policy is in effect for any child who demonstrates conduct that could cause themselves, another child or staff member harm. **Vulgar language will not be tolerated.** Disrespect toward another child or staff member will not be allowed. A staff member will call or personally speak to a parent/guardian when their child demonstrates misconduct. In camp consequences include time-out or loss of participation in selected camp activities.

### Financial Policies

There is a non-refundable registration fee of \$25 per child for those new to our program. Registration fee is waived for campers that attended at least 4 weeks in the summer of 2015. Program fees are not prorated, refunded or credited based upon attendance. If a refund request is made 14 calendar days or more before the first day of the camp session, a full refund (less a \$20 administrative processing fee) will be provided for the camp. If a refund request is made less than 14 calendar days before the first day of camp, a full refund ( less a \$20 administrative processing fee) is provided for the camp **ONLY IF** a participant from the wait list can be placed in the reserved slot. If no replacement is found, no refund will be provided.

Camp registrations are not transferable to another individual.

### Payment in full for at least the first two weeks the child is scheduled to attend, is due at registration.

Please make checks payable to: Penn Skates

**Payments for continuing weeks are due the Monday prior to the weeks your child will be attending.** Please follow the schedule as shown below:

### Summer Camp Payment Schedule

If Your Child Is Registered For Camp This Week	Payment Is Due On This Date
6/13/16	6/6/16
6/20/16	6/13/16
6/27/16	6/20/16
7/5/16	6/27/16
7/11/16	7/5/16
7/18/16	7/11/16
7/25/16	7/18/16
8/1/16	7/27/16
8/8/16	8/1/16
8/15/16	8/8/16
8/22/16	8/15/16

Summer Camp Fee's	
	Fee
Daily Rate	\$38.00 (a minimum of 2 days per week is required, \$10 additional if attending on a day that includes a field trip).
Weekly Rate	\$165.00 per week (There may be additional fees for some field trips) 10% sibling discount
Registration fee	\$25. For those new to our program.

### Late Pick Up Fee's

There will be a late fee if your child is picked up after 6:00 pm. **This fee must be made at the time of the late pick up on the day applicable.**

Late Drop Off & Pick Up Fees	
	Late Fee
<b>1 to 15 minutes</b>	\$5.00
<b>16 to 30 minutes</b>	\$10.00
<b>31 to 45 minutes</b>	\$20.00
<b>46 to 60 minutes</b>	\$40.00

### Trips

**Please make sure that your child has sunscreen applied prior to arriving to Penn Skates Summer Camp.** Also, please provide all needed items listed so they can have an enjoyable day.

Penn Skates reserves the right to change a trip location without prior notice to parent or guardian. Changes will be made due to weather, availability or safety concerns. Penn Skates also reserves the right to change any daily activity, Monday-Friday as it deems appropriate for the benefit of your child. This may include the transporting of your child to an off-site location for an unscheduled trip. It is imperative that your child arrive each day by 9:00 a.m. except where indicated differently.

