

"BEFORE AND AFTER SCHOOL CARE"

AM/PM Recreation Program

Who: Children entering grades K - 6
Location: City of Peoria Elementary Schools
Dates: School beginning –School ending dates,
Monday-Friday
Time: 6:30 a.m. until school opens - 2:00 or 2:40-6:00pm
Cost: Call for Fees

The Peoria A.M. /P.M. Recreation Program provides an opportunity for children to participate in a variety of activities before and after school. The goal of the program is the total well-being of each and every child. The Program provides a daily core schedule with an instructor series that visits various sites throughout the year. This provides the participants with the opportunity to explore new experiences and expand their learning in areas such as structured sports, drumming, sign language, and tutoring in a supervised, safe and secure environment. This is a DHS Licensed program. DES subsidies accepted.

PRE-SCHOOL - FULL AND PART-TIME

Lil' Learners All Day Child Care

Location: Sunrise Mountain Family Center, 21303 N. 86th Dr.
Dates: Year Round
Time: 6:00am – 6:00pm, Monday-Friday
Cost: Full Time-\$115/week,
Age: Must be 3½ - 5 years old on first day of attendance

Lil' Learners strives to aid the preschoolers in developing basic social, developmental, and educational skills. This is a state licensed program and provides an ideal environment for children to learn and grow as they are exposed to a variety of activities that promote opportunities for choice, experimentation, and to enhance self-esteem. We have all day care or ½ day care Schedules are set and have minimal flexibility.

For more information on these or other programs,
please call 623-773-7137 or visit us online at

<http://recreation.peoriaaz.gov>

2009

PEORIA SUMMER CAMP PROGRAM

Co-Sponsored by:

City of Peoria and Peoria Unified School District



AM/PM CONTINUING PARTICIPANTS

Complete the Registration Form and pay first week & deposit before 5:00pm; May 15, 2009 & pay only a
\$10.00 REGISTRATION FEE

May 22 – July 31

Monday – Friday, 6:30 a.m. - 6:00 p.m.

WHO: Children who are 5-14yrs old
Must be **5 yrs** old at time of attendance.



Cheyenne: 11806 N. 87th Ave. - 87th Ave/Cactus
Cheyenne, Sky View, Sundance

Desert Harbor: 15585 N. 91st Ave
Apache, Coyote Hills, Desert Harbor

***Frontier:** 1268 N. 81st Ave – 81st Ave /E. of Beardsley
Capped @ 300 Registrations

Paseo Verde: 7880 W Greenway Rd-79th Ave/Greenway
Peoria, Oasis, Paseo Verde, Oakwood

*** Parkridge:** 9970 W.Beardsley Rd- 99thAve/ Beardsley
Capped @ 300 Registrations

Sun Valley: 8361 N. 95th Ave-95th Ave/ S. of Olive
**Alta Loma, Cotton Ball, Country Meadows
Ira Murphy, Santa Fe, Sun Valley**

Zuni Hills 10851 W. Williams Rd 107th Ave/ Williams
Vistancia, Zuni Hills

***Community Service strives to provide quality care and programs to our citizens. Due to the excessive registrations at these 2 sites, a cap of 300 registrations has been applied; wait list will be available.**



WHAT

The **Summer Camp Program** provides an opportunity for children to explore new and old activities in a fun and safe environment. The goal of the program is the total well-being of every child, offering field trips, a core activity schedule; including centers schedule that strive to cultivate learning and creativity.

REGISTRATION PROCEDURES

1. Complete, in detail, the following forms:

- A. Complete, in detail with NO BLANKS, the **Emergency Information form** and provide a copy of child's immunization record. *Child may not attend without immunization records or an incomplete Emer. Info form.*
- B. Fee Attendance Contract with registration fee and first week's fee and deposit.
- C. Withdrawal/Change Policy -
Read and Sign "Policy" and "Waiver of Liability"



2. Where can you go to REGISTER YOUR CHILD:

Forms can be picked up at the following and can be downloaded online at: <http://recreation.peoriaaz.gov>

A. AM/PM RECREATION PROGRAM SITES:

March 2 - May 20 until the end of AM program
Go to the AM/PM program; *Monday – Friday*
6:30a.m.- School Opens or Dismissal - 6:00p.m.

B. WALK-IN REGISTRATION

March 2 – July 31

Community Services Department

9875 N. 85th Ave, Peoria, AZ 85345
Monday – Friday,
8:00 a.m. - 5:00 p.m.

Peoria Community Center

8335 W. Jefferson, Peoria, AZ 85345
Monday – Thursday,
8:00 a.m. - 8:00 p.m.
Friday - 8:00 a.m. - 5:00 p.m.



C. 2009 SUMMER CAMP LOCATIONS:

May 22 – July 31

Monday – Friday,	6:30 a.m. to 6:00 p.m.
Cheyenne	11806 N. 87 th Ave.
Desert Harbor	15585 N.91 st Ave
Frontier	21268 N. 81 st Ave.
Paseo Verde	7880 W Greenway Rd.
Parkridge	9970 W. Beardsley Rd.
Sun Valley	8361 N 95 th Ave.
Zuni Hills	10851 W. Williams

DAILY SCHEDULE & ACTIVITIES

Program Closed on May 26 and July 3

6:30 - 8:00 AM	Greeting, & Indoor Play
8:00 – 8:30 AM	Outside Play
8:30 – 9:00 AM	AM Snack
9:00 – 9:30 AM	Daily Announcements
9:00 – 11:30 AM	3 - 45 minute centers or Field Trip
11:30 – 11:50 AM	Lunch time
11:50 – 1:15 PM	Outside/ Inside play
1:15 – 3:30 PM	3 - 45 minute centers or Field Trip
3:30 – 3:50 PM	PM Snack
3:50 – 4:15 PM	Outside/Inside Play
4:15 – 6:00 PM	Indoor Free Play & group game

Times, activities and field trips may change along with other planned activities on site. Always check with your site prior to attending.

See site schedule for accurate dates, times, activities and trips.

Apply sunscreen to your child prior to attending field trips.

LUNCH PROGRAM

City of Peoria offers a lunch program in conjunction with the Peoria Unified School District Food Services. Lunch is offered Monday– Thursday, and Friday is "Take Out Day" i.e. Pizza, Sonic, Burger King, etc.

DAYCARE SUBSIDIES

The Department of Economic Security(DES) has funding available for low-income families who would like to utilize the program. Contact DES at (623) 846-1046 to find out more information on how to apply. Processing can take up to 30 days.



AZ DEPT of HEALTH SERVICES (DHS) LICENSING

Summer Camp is regulated by DHS, located at 150 N. 18th Ave. Phoenix, AZ, 85007, (602) 364-2539. Inspection reports are available upon request and are located in the Black Book at each site.

CELL PHONES:

Children are not recommended to bring **CELL PHONES** to camp and **MAY NOT** use them during program. If you or your child needs to be in contact for an emergency or for urgent matters, we will allow occasional use of site phone for short calls. Children with cell phones will be asked to put it away and not retrieve it until they are picked up.

SCHEDULE, FEE & PAYMENT POLICIES

SCHEDULE CHANGES

Any deviation from your submitted schedule on the enrollment form must be given to the site the Thursday prior to the week the changes are to take effect. If your child needs to attend on short notice, parents must call the summer camp site to make arrangements. There is 24 hour voicemail to leave a message. Payment is due the day of participation. **NO CREDIT OR REFUNDS GIVEN FOR MISSED**

DAYS. Regular Sign/sign out audits will be performed. Any extra days not originally scheduled per your Fee Contract will be the responsibility of the parent and may incur late fees if not paid in full.

Schedule Change form is available online and can be submitted by going to our website at <http://recreation.peoriaaz.gov>

DELINQUENT ACCOUNTS/LATE PAYMENT FEE

Payment is due by 5:00p.m. the **Monday** of the week of participation. Payment for participants attending on short notice must be made the day of participation or prior to attending.

A LATE FEE OF \$20 PER CHILD will be assessed each Wednesday for payments not yet received. If payment, including late fee, is not paid in full by Wednesday of the following week, the participant will not be allowed to attend until the account is cleared.

RETURNED CHECK FEE (RCF) RCF is \$30 PER CHECK

A returned check will result in service/program interruption. The \$30 RCF and the amount of the returned check must be paid in cash, cashiers check, or money order at Community Services office or over the phone with a credit card by calling 623-773-7137. All future payments will be required in cash, cashiers check, or money order for a period of six (6) months from the date of the returned check.

LATE PICK UP— PER THE SCHOOLS DESIGNATED CLOCK

A fee of \$15per child, per every 15 minutes after 6:00pm will be assessed. i.e. - 6:01p.m.-6:15p.m.--\$15; 6:16p.m.-6:30p.m.-\$30, etc.

Late fees will be assessed as follows:

- 1ST** - incident will result written warning
- 2ND** - incident will result in FEE plus written warning
- 3RD** - incident will result in FEE plus a three-day suspension
- 4TH** - incident will result in FEE plus a one-week suspension
- 5TH** - incident will result in FEE plus removal from the program

FIELD TRIPS

Children are encouraged to attend trips, but are not required. Written permission from the parent is required prior to departure. Identification will be provided to all children for safety purposes. A written field trip plan is completed. Peoria school district buses (not air conditioned) are used and water is placed on each bus.

POLICIES and PROCEDURES

PARENT/STAFF COMMUNICATIONS

The Summer Camp Program staff would like to work as a team with school and family to provide the best environment for the child's growth and development. Exchanges of information between parents and staff will be formal or informal formats. Information that is shared regarding issues in school or any changes occurring within the family will give all of us insight to a child's behaviors or attitudes.

HEALTH and EMERGENCY PROCEDURES



If your child becomes ill during the program, we will place your child in an isolated area. According to the time of day, and the degree of illness, the Site Director will decide to call the parents and make arrangements to have the child taken home by an authorized person (not a staff member) or keep them at the Summer Camp Site. Please keep your child home if they display any of the following symptoms; nausea, vomiting, diarrhea, temperature above 99° without medication, red/inflamed eyes, cold symptoms, headache, rashes or other pains within the previous 24 hours.

Minor scratches and cuts will be treated at the Site. If a serious accident should occur, the City of Peoria Fire Department will be summoned for treatment and they will decide whether your child should be taken to the nearest hospital or doctor's office by ambulance. You will be notified immediately. Treatment may only be rendered if we have your written authorization on file.

MEDICATION

The Peoria Summer Camp staff may administer medication. The parent/guardian must complete a "Medication Release Form" to authorize giving medication to a child. Bring the prescribed amount of medication in the original container. Forms are available at the site.

SPECIAL NEEDS

Parents of a child with a disability may request a reasonable accommodation by contacting Community Services at 623-773-7137 and completing the "REQUEST FOR ACCOMMODATION" form with supporting documentation turned in least 2-3 weeks prior to the first date of attendance. Life Skills such as, but not limited too, feeding, dressing and toileting are not provided by staff.

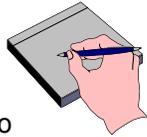
PERSONAL ITEMS

Please do not permit your child to bring personal items to the program. The City of Peoria is not responsible for any lost, stolen or broken items. The site has several activities to keep your child busy and entertained. Children are not allowed to bring cell phones.

POLICIES and PROCEDURES

SIGNING IN & OUT

Participants must be signed in and out daily by a parent or authorized person. This is done by signing your full name and time on the form. A child enrolled in the Peoria Summer Camp Program will only be released to persons specifically authorized with their signature on the registration form or advance authorization from the parents by telephone or in writing. NO exceptions will be made. For the safety of your children, individuals will be required to show a valid picture I.D. at the time of pick-up. If only one person has the sole legal custody of a child, then legal custody papers must be on file.



Children may not sign themselves in or out.

DISCIPLINE

The staff will implement an assertive discipline program. Children involved in our program are expected to follow the rules and directions of the Summer Camp staff. The following are guidelines used when disciplinary action becomes necessary due to unacceptable behavior. Parents will be notified daily if their child needed guidance or discipline. The course of action below will be followed in normal circumstance.

However, extreme behaviors that put a child, or those around them in danger, several or repeated offenses in one day, may accelerate this process and will be dealt with on a case by case basis. Extreme behaviors are but not limited to: Physical attacks such as, hitting, biting, spitting, kicking ect..., abusive language, disrespect to staff (verbally or physically by parent or child), and leaving the program area without permission.

1. **Warning** - for specific unacceptable behavior
2. **Time-out** - with a warning of future consequences for repeated behavior.
3. **Time-out** - with a warning and/or write up for repeated behavior in file and parent notified upon pick-up.
4. **Time-out** - with a call to parent or guardian and a write-up. Discuss corrective action & consequences for future incidents with parent upon pick-up.
5. **Suspension** - 1 - 2 scheduled days from the program and/or the remainder of the day.

*Repeated aggressive/inappropriate behavior with 3-5 suspensions will result in removal from program with approval from Coordinator and Supervisor.

(No Refunds for early pick-ups on scheduled days)

FEE INFORMATION

PROGRAM FEES

A **\$30 NON-REFUNDABLE** registration fee **PLUS: First week** of participation fees AND **Deposit.**

PROGRAM	1 DAY	2 DAY	3 DAY	4 DAY	5 DAY
Daily & Weekly Fees	\$24	\$48	\$72	\$96	\$98
**Elementary Summer School Rate available only for children registered and attending PUSD Summer School full session. <i>If summer school day is missed the \$23 fee for Summer Camp will be required.</i>					
Summer School Rate	\$15	\$30	\$45	\$60	\$75

Includes a morning and afternoon snacks and scheduled field trip.

PAYMENT OPTIONS

Payments are due the Monday of the week of participation

1. **Electronic Fund Transfer (EFT)** - Automatic payment from checking. Authorization form required. **Payments will be deducted on Mondays.**
2. **Quick Pay** – Automatic payment from credit card or debit card on Mondays. Authorization form required **Payments will be deducted on Mondays.**
3. **TeleReg** – Call **623-773-7725**. You will need your client ID number and password. IVR Payments can be made for current due only. Overpayment is not possible.
4. **RecConnect** – <http://recreation.peoriaaz.gov>. You will need your client ID number and password. For more information call the Community Service Department at **623-773-7137**. (Balance may not include assessed late fees for option 3 and 4)
5. **Community Services Dept**– Cash, check, or credit card 9875 N 85th Ave, M – F, 8AM - 5PM (Except Holidays)
6. **Phone Payment** - Call 623-773-7505, 773-7192 or 773-7139 with a credit card or debit card, M – F, 8AM – 5PM (Except Holidays).
7. **Peoria Community Center** – Cash, check, or credit card, at 8335 W. Jefferson, M – TH, 8 AM – 8 PM and Friday, 8AM –5PM. Program sites will accept new registrations with check or money order only. No weekly payments accepted on site.

INSURANCE

The City of Peoria carries liability insurance for all its operations, including city-sponsored recreation programs. However, the City does not carry medical insurance for any participant's injuries or illnesses associated with any specific recreational activity. Medical claims are your responsibility.

FEE ATTENDANCE CONTRACT - PEORIA SUMMER CAMP

My child _____ will attend _____ Summer Camp Program

My child attended _____ AM/PM Program. My child did not attend the AM/PM Program.

Mom's Name: _____ Dad's Name: _____

Address: _____ Address: _____

Home: _____ Work: _____ Home: _____ Work: _____

Family email address: _____ SUMMER CAMP YEAR: _____

	MON	TUES	WED	THURS	FRI	Cost times # days	Weekly Fee
Please "X" ALL DAYS ATTENDING						\$24 per day or \$98 per week	
Weekly Lunch						\$12.50 per week	
Daily Lunch						** \$3.00 per day	
** Some special lunches may require an additional fee. See your program schedule							
TOTAL WEEKLY COST							

FEE PAYMENT

Friday - 1st day of camp \$ _____ Start Date: _____

First Week \$ _____

Last Week Deposit (one week's regular schedule) \$ _____ Withdrawal Date: _____

Additional week(s) \$ _____

Lunch \$ _____

Other(_____) \$ _____

Registration Fee (Non-Refundable) - \$30 \$ _____

New Participants-\$30 registration fee

**\$30 registration fee for all participants after Early Reg Deadline
(5pm Friday, one week prior to Summer Camp Opening date)**

OR

Registration Fee (Non-Refundable) - \$10 \$ _____

\$10 registration fee for Current Year AM/PM participants and

last year returning Summer Camp participants, only

who provide full payment & is received on or before Early

Deadline Date (5pm Friday, one week prior to Summer Camp Opening date)

TOTAL ENCLOSED \$ _____ Make Checks payable to "City of Peoria"

*****FOR OFFICE USE ONLY*****

Blue Card Reviewed:

Staff Signature

WAIVER OF LIABILITY

*I/we hereby release and forever discharge Peoria Unified School District and the City of Peoria, an Arizona municipal corporation, its elected and appointed officials, directors, officers, boards, commissions, agents, representatives, servants, and employees, and any and all other persons, firms, or corporations who are or might be liable, from any and all claims of any kind or character which I/we have or may have against them due to my participation, or my child's participation, in a City of Peoria recreation program at a Peoria Unified School District facility. This waiver includes all damages, losses, costs, expenses, and injuries that allegedly occur during the course of this recreation program. In that regard, I/we covenant to indemnify, defend, and hold harmless to the fullest extent permitted by law the foregoing persons and entities from any loss or damages, including reasonable attorneys' fees and litigation expenses, which may be incurred by them in the event any such claims are asserted against them or any of them. I/we understand that medical claims are my/our responsibility. This waiver does not extend to any such claim or liability that is caused by the sole and exclusive intentional acts or gross negligence of Peoria Unified School District and/or the City of Peoria or its officers, employees, or agents. **By signing below, I attest that I have read and agree to abide by the payment policies listed on the reverse of this form and that I have received a copy of and will abide by the policies and guidelines outlined in the Summer Camp Parent Handbook.***

Please Print Name _____

Signature: _____ **Date:** _____

OFFICE USE ONLY

Date: _____ Cash Check # _____ Money Order: _____

Credit Card: _____ Visa M/C Discover AMEX

(not available for on-site registration)

Staff Signature: _____

- **REGISTRATION**

A \$30 non-refundable registration fee is required for all participants. All participants must make full payment of registration fees to attend the program. **Full payment of participation fees is the first Friday of attendance plus the following full week, the \$30 registration fee and the last week's deposit.**

- The contracted fee (full time, part time or day by day and varying schedule) is based on days/week enrolled, and that payment is due every week on **Monday** for the week of participation. **A penalty of \$20 per child will be assessed on Wednesday for payments not received.** Penalty fees will accrue weekly for any outstanding balances. If weekly/daily payment and late fees are not paid by the following Wednesday, the participant cannot attend until the account is paid in full.

- **DROP IN PARTICIPANTS**

For those parents/guardians who have inconsistent schedules or schedules not known by the Thursday prior to attendance, you may choose the drop in program. Regular schedules are not eligible for drop in status. A regular schedule is defined as consistent attendance or a pattern of attendance over the course of one month. **ALL PAYMENTS MUST BE RECEIVED ON OR PRIOR TO THE DAY OF ATTENDANCE.** You may also choose to keep a credit balance for future use at all times. **Any payments not received by Monday for the previous week will be charged a penalty fee of \$20 per child.** Penalty fees will accrue weekly for any outstanding balances. If payment and late fees are not paid by Wednesday, the participant cannot attend until the account is paid in full.

- **PAYMENT OPTIONS**

1. **Quick Pay/Electronic Funds Transfer (EFT)** – Automatic payment from a credit or debit card - AUTHORIZATION FORM REQUIRED
2. **Electronic Funds Transfer (EFT)** – Automatic withdrawal from a checking account – AUTHORIZATION FORM REQUIRED
3. **TeleReg** – Automated Telephone available 24/7 -**Call 623-773-7725**. You will need your Client ID number and Family Password. . TeleReg is available for current payments only. You cannot pay over the amount due. Payments are posted every Monday.
4. **RecConnect** – <http://recreation.peoriaaz.gov>. Available 24/7. You will need your client ID and Family Password.
5. **Community Services Offices** – Located at 9875 N. 85th Ave. Customer Service Staff are available Mon – Fri 8am – 5pm except Holidays
6. **Phone with Customer Service Staff** – Call 623-773-7192, 623-773-7139 or 623-773-7505, with a credit or debit card Mon-Fri 8am – 5pm except Holidays
7. **Bill Pay** – set up weekly payments through your on-line banking account. Please check with your bank for this option

Weekly payments will not be accepted at school sites. New registrations will be accepted with a check or money order only.

- **SCHEDULE CHANGES/ABSENCES**

It is the Peoria Summer Camp Recreation Program policy that prior notice is required to terminate or change enrollment in the program. If for any reason you decide to change or drop your child's enrollment from the Peoria Summer Camp Program, notification must be made in writing by **Thursday** for the following week and given to the Site leaders or the Peoria Recreation Division to make changes to your current contract. **NO REFUNDS OR CREDITS FOR MISSED DAYS, SUSPENSIONS, OR EARLY PICKUPS**

- **RETURNED CHECKS**

A returned check or declined EFT payment will result in service/program interruption. An RCF of \$30 per check/EFT and the amount of the returned check/EFT must be paid in cash, cashier's check, credit card or money order at the Community Services Offices or over the phone with a credit card by calling 623-773-7139. All future payments will be required in cash, credit card, cashiers check or money order for a period of six (6) months from the date of the returned check.

- **AUDITS**

Bi-weekly audits of daily sign-in/sign-out sheets will be performed for each site. Any extra days of attendance not originally scheduled per this attendance contract will be the responsibility of the parent/guardian and subject to late/penalty fees as described above.

**For billing information and/or questions, call (623) 773-7505, 623-773-7192,
or 623-773-7139 e-mail: AMPMbillingStaff@peoriaaz.gov**



City of Peoria
9875 W. 85th Ave
Peoria, Arizona 85345

Print Child's Name: _____

Name of Summer Camp _____

Mom's Name _____ Cell Phone: _____

Home Phone: _____ Work Phone: _____

Dad's Name _____ Cell Phone: _____

Home Phone: _____ Work Phone: _____

Where did you hear about our program? *Returning Patron* *Word of mouth*
 City Brochure *School* *Website* *Advertisement in* _____

Photos:

I give permission for my child to be video taped or photographed by the City of Peoria employees or established area media for the free use of my child's name and picture for site activities or should they appear in broadcasts, newspapers, or city brochure etc. _____ (Initial)

Signing Children In/Out of Program:

I give permission for the City of Peoria Summer Camp staff to sign my child in and out of the program as needed, i.e. room changes during program hours. _____ (Initial)

Sunscreen:

I understand that sunscreen must be applied by a Parent or Guardian as needed prior to attending the Summer Camp Program. _____ (Initial)

Please sign below to acknowledge that you have read each statement above regarding photos, signing children in/out of the program and sunscreen.

Signature

Date



Quick Pay



Pay your weekly childcare fees automatically every Monday with your Debit or Credit Card without having to call each week. This is a Free service. Complete the following information to become enrolled in our Quick Pay program today.

Child's Name: _____

Parent's Name: _____

School Name: _____

Home Phone Number: _____

Alternate Phone Number: _____

Amount to be Charged Weekly: \$_____

Date of First Charge: _____

Card Number: _____

Expiration Date of Card: _____

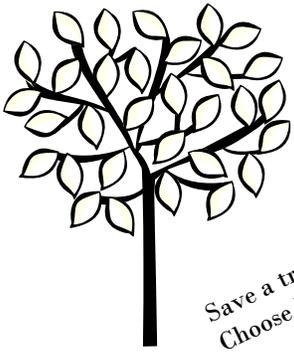
Billing Zip Code: _____

You are hereby authorized and requested, until otherwise instructed, to charge to the above referenced account, the weekly attendance fee and any occurring extra fees, such as late pick-up fees. I understand that if a transaction is DECLINED, a courtesy phone call will be attempted at the numbers listed above. I further understand that I am responsible for payment and I am aware that if the transaction is declined and payment is not made by the due date, penalties will be applied and will not be waived. I further understand that the staff reserves the right to cancel my "Quick Pay" program.

I understand that a request to discontinue or change this service must be made in writing one week prior to the stop date, and given to the Site leader or the Community Services office at 9875 N. 85th Ave, Peoria, AZ 85345.

Signature

Date



Electronic Funds Transfer



In effort to make payments more convenient, we are now offering an Electronic Transfer option. Provide us with a voided check, complete the following information and each Monday we will automatically deduct your childcare payment from your checking account.

Child's Name: _____ School Name: _____

Parent's Name: _____

Home Phone #: _____ Alternate Phone #: _____

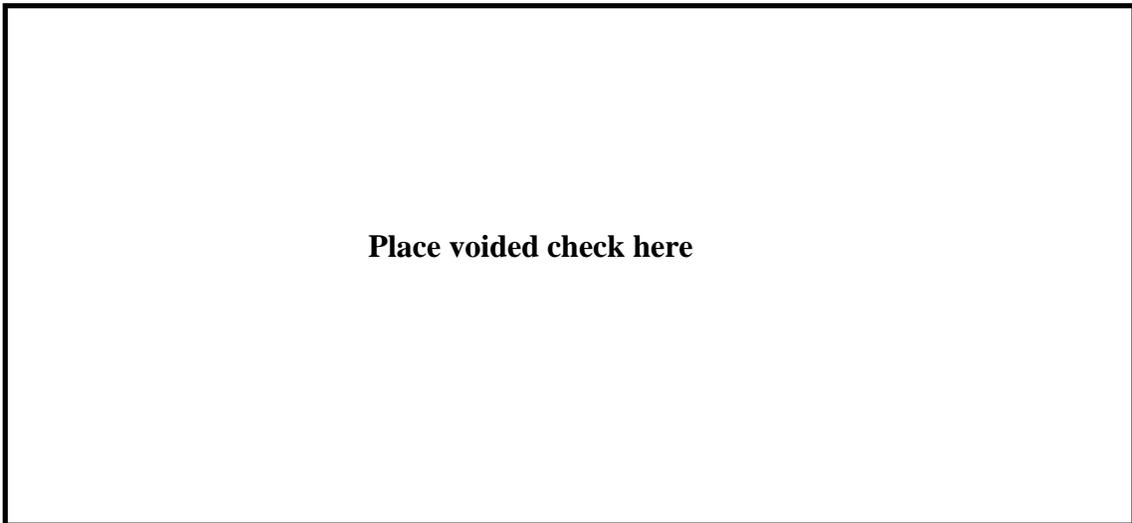
Amount to be Deducted Weekly:\$ _____ Date of First Deduction: _____

You are hereby authorized and requested, until otherwise instructed, to deduct from the above referenced account, the weekly attendance fee and any occurring extra fees, such as late pick-up fees. I understand that if the transfer is unsuccessful, a courtesy phone call will be attempted at the numbers listed above. I further understand that I am responsible for payment and I am aware that if the transfer is unsuccessful, "Return Check Fees" will apply. I further understand that the staff reserves the right to cancel my "Electronic Funds Transfer" program.

I understand that a request to discontinue or change this service must be made in writing one week prior to the stop date, and given to the Site leader or the Community Services office at 9875 N. 85th Ave, Peoria, AZ 85345.

Signature

Date



Summer Camp 2009

MAY

Week #	Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1	2
	3	4	5	6	7	8	9
	10	11	12	13	14	15	16
1	17	18	19	20	21	22	23
2	24	25	26	27	28	29	30
	31						

May 25 - Memorial Day - NO PROGRAM

- Early Registration deadline(5pm) for reduced reg fee (returning 09-09 AM/PM or 08 Summer Camp Only)
- Registration fee and participation for May 22 and week of May 25 due
- 1st day of Summer Camp
- Schedule Change form due (for following week)

JUNE

Week #	Sun	Mon	Tue	Wed	Thu	Fri	Sat
3		1	2	3	4	5	6
4	7	8	9	10	11	12	13
5	14	15	16	17	18	19	20
6	21	22	23	24	25	26	27
7	28	29	30				

- Payment Due
- Schedule Change form due (for following week)
- Late fees assessed for payments not made on Monday

JULY

Week #	Sun	Mon	Tue	Wed	Thu	Fri	Sat
7				1	2	3	4
8	5	6	7	8	9	10	11
9	12	13	14	15	16	17	18
10	19	20	21	22	23	24	25
11	26	27	28	29	30	31	

July 3 - Independence Day (observed)- NO PROGRAM

- Payment Due
- Schedule Change form due (for following week)
- Late fees assessed for payments not made on Monday
- Final Day of Summer Camp & Early Reg Deadline (5pm) for 09-10 AM/PM Program (returning 08-09 AM/PM & 09 Summer Camp Participants only)

AUGUST

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

- 1st day of School (PUSD students)

RecConnect: <http://recreation.peoriaaz.gov>

TeleReg: 623-773-7725

Customer Service Staff: Monday - Friday 8am - 5 pm (Except Holidays)

623-773-7505

623-773-7192

623-773-7139

Emergency Information and Immunization Record Card

Child's Name: _____

Date Enrolled: _____ Updated: _____

Home Address: _____
Street City State Zip

Date Disenrolled: _____

Home Phone: _____

Date of Birth: _____ Sex: male female

Mother or Guardian Name: _____
Home Address: _____ Street City State Zip
Home Phone: _____ Cell Phone: _____
Business Name: _____ Work Phone: _____
Business Address: _____ Street City State Zip
Signature: _____

Father or Guardian Name: _____
Home Address: _____ Street City State Zip
Home Phone: _____ Cell Phone: _____
Business Name: _____ Work Phone: _____
Business Address: _____ Street City State Zip
Signature: _____

If Medical Care is Necessary, Call:

DOCTOR: _____
Name Address City State Zip Phone

HOSPITAL: _____
Name Address City State Zip Phone

Does your child have insurance coverage? No Yes Name of Insurance Company _____ (Optional)

In case of injury or sudden illness, _____ will be called first. I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time for his/her health and safety. It is understood by me that the expense of this service will be accepted by me.

In case of an emergency, or if I cannot be contacted to pick up my child, I hereby authorize the following person(s) to pick up my child.

Name: _____ Name: _____

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

Telephone: _____ Cell phone: _____ Telephone: _____ Cell phone: _____

Name: _____ Name: _____

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

Telephone: _____ Cell phone: _____ Telephone: _____ Cell phone: _____

The following person(s) may **not** remove my child from the center:

Name: _____ Name: _____

Custody papers have been provided and are on file at the facility. yes no

This **Emergency Information and Immunization Record Card** is accurate and complete, front and back, and was provided by:

Parent or Guardian printed name Signature Date: _____

Immunization Information

Age	Required Vaccine Doses By Age						
	DTaP	Polio	Hib	Hepatitis B	Hepatitis A	MMR	Varicella
<2 months				#1			
2 – 3 months	#1	#1	#1				
4 – 5 months	#2	#2	#2	#2			
6 – 11 months	#3		#2 - #3 ¹				
12 – 14 months		#3	#1 - #4 ²	#3		#1	#1
15 – 59 months	#4						
24 – 71 months					#1 ³ & #2 ³		
School Age (K-12)	#4 ⁴ or #5	#3 ⁵ or #4		#3		#2 ⁶	#1 ⁷

¹ Pedvax or Comvax vaccine given

² Must have at least 1 Hib after 12 months of age

³ Hep A required in Maricopa County only

⁴ 4 doses meet requirement if 4th dose is after 4th birthday

⁵ 3 doses meet requirement if 3rd dose is after 4th birthday

⁶ Must have 2 doses of MMR for K-12 entry

⁷ A 2nd dose is needed if dose #1 is given at 13+ years of age

Check one

<input type="checkbox"/>	Copy of current official documented immunization record attached
<input type="checkbox"/>	Religious Beliefs exemption form signed by parent/guardian attached
<input type="checkbox"/>	Medical Exemption form signed by physician and parent/guardian attached
<input type="checkbox"/>	Signed Laboratory Proof of Immunity form attached

Notification of immunizations needed sent to Parent(s) or Guardian(s):

_____/_____/_____
MO /DAY/ YR

_____/_____/_____
MO /DAY/ YR

_____/_____/_____
MO /DAY /YR

Updated immunizations received and attached

_____/_____/_____
MO /DAY/ YR

_____/_____/_____
MO /DAY/ YR

_____/_____/_____
MO /DAY /YR

Medical Information

Is child allergic to food or other substances? No Yes (If yes, name foods or substances to be avoided and procedure to follow if reaction occurs.) _____

Is child usually susceptible to infections and if so, what precautions need to be taken? No Yes _____

Is child subject to convulsions and what should be our procedure if one occurs? No Yes _____

Is there any physical condition that we should be aware of and what precautions should be taken (heart trouble, foot problem, hearing impairment, hernia, etc.)? No Yes _____

Additional comments: _____

Other special instructions: _____

Telephone Authorization Code : _____ (optional)