

LJPS Summer Camp

June 14 – July 30, 2021



LJPS Summer Camp
Ron Crawford Recreation Center
1127 Hospital Rd.
Fort Walton Beach, Florida, 32547
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Phone: (850) 833-3321 ext. 227

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Welcome to Liza Jackson Preparatory School's Summer Camp



Introduction

The purpose of the Liza Jackson Preparatory School's Summer Camp is to provide a safe, fun, activity-filled environment for children. The program is open to all children entering kindergarten up to 8th grade.

Philosophy

At Liza Jackson Preparatory School's Summer Camp, we believe that when a child has enriched experiences it stimulates future growth. Children deserve to be respected as individuals in an environment that welcomes reason, exploration, question, and imagination.

Mission Statement

“We are a caring community of learners, dedicated to making the world a better place, through academic preparation, good manners, common sense, and 100% effort”.

HOURS OF OPERATION

Monday- Friday 6:30am - 6:00pm*

We will be CLOSED Monday, July 05, 2021, in observance of Independence Day.

The hours of the LJPS Summer Camp Program are from 6:30am to 6:00 pm.* There is no early drop-off as LJPS Summer Camp staff is unable to supervise children before this time.

LATE PICK-UP POLICY

We understand that emergencies (sudden/urgent, unforeseen occurrences requiring immediate action) do occur. If an emergency does occur and you will be late picking up your child, please notify the LJPS Summer Camp staff by calling (850) 833-3321 ext. 227

If a child is picked up after 6:00 pm, the account will be charged a late pick-up fee of \$10.00 for every 5 minute increment past 6:00 pm. LJPS Summer Camp staff will begin calling persons authorized to pick up the child, if no communication is received by 6:10pm.

Continued late pick-up is considered abuse of the LJPS Summer Camp Program. Such abuse may result in Summer Camp privileges being revoked.

SIGN-IN/OUT PROCEDURES

Your child must be signed in and out from summer camp each day. If someone other than the parent/guardian is picking a child up from summer camp, they must be listed on the Authorized for Childcare Release form. The minimum age of an individual responsible for signing a child out of camp is 18. These procedures are in place for the safety of the children in the program.

Childcare staff may ask anyone who comes to pick up your child for a photo I.D.

COVID-19 Summer Camp Precautions

All staff and students are required to wear masks or a shield and have their temperature taken prior to entering the building. Only LJPS staff and students are allowed inside the Ron Crawford Recreation Center. Check-in/out will occur at the front doors of the building. Check-in/out will be at staggered times to alleviate crowding. Rooms, tables, chairs, and material are sanitized throughout the day. Grade level groups will stay together and have assigned seating whenever possible. Hand sanitizer is in every classroom, staff and students will wash their hands or use hand sanitizer, as necessary.

**Every day, our operations cease when the last child is picked-up.*

Registration Policies

There are 75 full-time camper slots available, and a waiting list will be created when we reach capacity.

Registration fees

There is a **\$30.00 non-refundable** fee for parents with first-time registrations.

There is a **\$25.00 non-refundable** fee for parents re-enrolling children in the program.

Registration fees are a one-time flat rate regardless of full time or drop-in enrollment.

Activity Fee

There is a **\$100 non-refundable** activity fee for full-time campers.

Your child will **not** be considered registered until the childcare director receives the completed packet along with the registration and activity fees. Current LJPS childcare students have priority placement, followed by the remaining LJPS student population.

New Student Registration Fee	\$30.00
Returning Student Registration Fee	\$25.00
Activity Fee Full-time	\$100.00
Full Time, (1) Child	\$125.00 per week
Full Time, (2) Children or more	\$115.00 per child weekly

**Every day, our operations cease when the last child is picked-up.*

Payment Due Date

Fees are due on the Friday before the week of care and payments can be made from 6:30 am to 6:00 pm.* Example, the payment for the week of 21-25 June is due on Friday, 18 June. Payments can be made in advance. There will be no credit offered for any absences, holidays, or closure due to natural disasters. Full payment is required unless the summer camp director specifically informs parents of a different amount. Payments can be made by check or money order by everyone. At this time, credit card payments can only be made by current parents of Liza Jackson students. Please use the school's E-funds portal to make the payment.

Late Fees

Payments are considered late if not received by close of business the Friday prior to the week of care. A \$10.00 fee will be assessed when payment is late. In the event weekly fees are unpaid for 2-weeks, the child will not be allowed to enter the program until the fees are paid. If there is a need for a special payment plan, please contact the summer camp director.

Unpaid Balances

Any unpaid balances at the end of the summer camp will result in the student being ineligible to register for Lion Childcare during the school year and subsequent summer camps.

Vacation

Due to our abbreviated summer camp, we are unable to provide a 1-week vacation. All 7-weeks of summer camp are required to be paid.

Illness and Emergency

Children who are ill (runny nose, continuous cough, sore/red throat, unexplained rashes, swollen glands, headache, stomach ache) should not be sent to the LJPS Summer Camp Program. Children who have a fever (100.4) should not be sent to camp and must be fever free without the use of medication for at least 24-hours.

If a child becomes ill or is seriously injured while attending LJPS Summer Camp, a parent will be notified immediately. It will then be expected of the parent to pick-up the child, or make arrangements for the child to be picked-up within 1-hour.

In the case of an emergency as determined by LJPS Summer Camp staff, the paramedics will be called and the parent will be notified immediately. (Parents will be responsible for all costs incurred in such emergencies.)

Medication

If a child is taking medication, the parent will be required to fill out the proper forms so that the medication can be accurately administered to the child. Children may not carry medication on them at the LJPS Summer Camp program (this includes cough drops/sunscreen and ointments of any kind). Under no circumstance will a Liza Jackson Summer Camp staff member administer the 1st dose of a new medication.

**Every day, our operations cease when the last child is picked-up.*

Severe Weather Conditions

When the local area is under a hurricane, tornado, severe weather, or flood watch/warning, LJPS Summer Camp will suspend operations in conjunction with the recommendations from the Okaloosa County Emergency Operations Center. Notification of the closure of summer camp will be given as early as possible.

FIELD TRIPS

Due to COVID-19, our field trip activities will be at the Ron Crawford Recreation Center. If an opportunity arises where we can take the students to an off-campus location, with limited exposure to the general public, we will do so.

In the event we are able to facilitate off-campus field trips, a summer camp calendar will be emailed to parents, and a copy will be posted. Please be aware of the arrive no later than times because it is essential that you are punctual. The safety of the children is our first priority. Transportation and field trip rules will be reviewed with the children shortly after the “Arrive NLT” indicated on the activity calendar. Summer camp staff has a limited amount of time to account for everyone and discuss all safety aspects of the field trip before departing. **Due to safety, if a child is repeatedly late arriving after the “Arrive NLT” indicated on the activity calendar, the summer camp contract will be terminated.** If your child has not arrived by our departure time, it will be the parent’s responsibility to find care. Staff will NOT be available at LJPS to care for your child. If you missed the bus and choose to bring your child to the field trip destination, you must remain on site with your child, possibly pay any entrance fees, and when it’s time to leave the venue, transport your child to the rec center.

All children riding the bus to a field trip location are expected to ride the bus back to the Ron Crawford Recreation Center. The only exceptions are if the child becomes ill or if due to a disciplinary issue warranting removal from the venue.

If a parent does not want his/her child to attend a field trip, alternative care will not be offered. It will be the parent’s responsibility to find childcare for the duration of the field trip. A credit will not be given for unattended field trips.

Open Swim and Lessons

Open swim and swimming lessons are offered to LJPS Summer Campers. The swim indemnity form and swimming lesson contract along with the payment are required to be turned into the LJPS childcare program or Mrs. Lewis. All campers must have a completed swim indemnity form on file to swim at the Bernie. If there are questions about the indemnity or the swimming lessons contract, please contact the pool @ 863-SWIM.

SNACKS

Two snacks are provided daily; a morning snack and afternoon snack. We will provide a weekly snack calendar that is subject to change, but will give you the general idea of what we are offering. Also, children may bring their own snacks to consume instead of eating what is offered.

BREAKFAST/LUNCH

LJPS Summer Camp does not provide breakfast or lunch. Breakfast should be eaten prior to checking into summer camp. We ask that you provide your child with a lunch that does not require refrigeration or microwave use.

*******Hydration*******

LJPS childcare strongly suggests providing your child a water bottle with an electrolyte type of drink (Gatorade, Powerade, Propel, etc.) Water is great, but through experience we have found, children do not drink enough water to stay hydrated. If your child will bring the electrolyte drink in its original bottle, please write his/her name on the bottle with a Sharpie. If you are certain your child will drink water throughout the day, please disregard the suggestion.

Disclaimer

Attending Liza Jackson Preparatory School's Summer Camp program does **not** impact enrolling/enrollment or the waiting list for Liza Jackson Preparatory School. Please contact the registrar at 833-3321 for questions pertaining to school enrollment.

**Every day, our operations cease when the last child is picked-up.*

LJPS Summer Camp Policies and Contract

LJPS Summer Camp Discipline Policy

Age-appropriate behavior of the children is always taken into consideration when addressing behavior and discipline. However, please keep in mind this is group care and not one-on-one care. All children enrolled in summer camp regardless of age or ability/disability must be able to follow safety rules. If you are aware that your child requires a little more attention than other children of the same age, is highly active, or has difficulty socializing in large groups, please speak with the childcare director before submitting the enrollment packet and fees.

Disciplinary actions will be discussed with parents for inappropriate behavior. Habitual inappropriate behavior will result in a parent meeting with the LJPS Childcare Director. Certain situations may require a parent to pick-up his/her child from the program immediately such as but not limited to, an altercation, disrespecting a staff member, non-compliance on a field trip, destruction of property, verbally threatening to obtain or use a weapon to cause harm. Children who misbehave on the bus or at the field trip location will be suspended from the next field trip. The activity fee for the field trip is nonrefundable and the fee for the day will not be prorated. It is the parent's responsibility to find alternate care for the duration of the field trip.

If a child exhibits severe inappropriate behavior or habitual inappropriate behavior, it will be at the discretion of the LJPS Childcare Director to expel the child from the program. **Theft, as well as having possession of drugs/drug paraphernalia, cigarettes/e-cigarette, lighter/matches, a knife, or a gun will result in an automatic expulsion from the LJPS Summer Camp and other LJPS childcare services indefinitely.** If a child is expelled, all fees (activity, registration, and weekly) are forfeited.

DRESS CODE

Summer camp attire for all children:

1. Clothing must be neat, clean, and appropriate.
2. **Closed toe shoes must be worn at all times**, preferably non-marking tennis shoes. Water shoes and flip flops can only be worn to and from the pool.
3. Garments bearing inappropriate slogans, language, or pictures are not permitted (i.e., alcohol, drugs, profanity, explicit messages etc.)
4. Spaghetti string tank tops and similar shirts or blouses will not be permitted.
5. Any clothing that is suggestive or exposes undergarments will not be permitted.
6. No hats permitted inside unless told otherwise by LJPS staff.
7. **Types of swimming suits allowed are 1 piece or a tankini for girls and swim trunks for boys.** The tankini top and the swim bottom of the swimming suit have to touch. **No bikinis or speedos permitted.**

SUMMER CAMP GUIDELINES

Camper's Guidelines

1. Always be honest.
2. Speak nicely to others at all times. Disrespect to anyone will not be tolerated.
3. Tell a staff member before leaving an area.
4. Using inappropriate words and gestures will not be tolerated.
5. Toys, make-up, trading cards, and electronics should not be brought to LJPS Summer Camp. E-Books and Kindles can be used for reading at designated times
6. Handheld game devices, iPod, and or MP3 players are permitted on field trips outside of FWB.
7. **Cell phones are to remain in a bag/backpack.**
8. **Smart watches can only be used to tell time. If used for anything else, a parent will have to pick-up the watch from the director.**
9. All items or living organisms discovered outside of the building will remain outside of the building.
10. Speak for yourself. "Tattle-tales" are not necessary.

Please discuss the guidelines with your child.

Child's Name: _____

Child's Name: _____

Child's Name: _____

I, the Parent, will...

1. **provide my child a mask or shield to wear everyday**
2. have my child arrive by the NLT (no later than) time annotated on the summer camp activity calendar.
3. work with the staff to solve any concerns regarding my child.
4. not allow my child to bring toys, make-up, trading cards, or electronics. Handheld gaming devices and tablets can be used when attending field trips that are outside of Ft. Walton. All games, music, or videos must be previously downloaded and appropriate.
5. instruct my child to keep their cell phone in their backpack and use smart watches only to tell time.
6. provide a lunch from home each day (please do not pack sodas or candy for lunch)
7. label all belongings. LJPS Summer Camp, or staff, is not responsible for lost personal effects.
7. have my child wear appropriate shoes and clothing daily (only non-marking soles on gym floor).
8. have my child wear the summer camp T-shirt on field trip days.
9. pick-up my child within 1-hr of being contacted if the child is required to leave the program due to illness or disciplinary issues.

Parent/Guardian's Signature: _____ Date _____

LJPS Summer Camp 2021 Financial Policy Contract

This agreement is made between LJPS Summer Camp 2021 and

Parent(s)/Guardian(s) _____

of
 Child's Name _____ Child's Name _____
 Child's Name _____

- I understand that upon registration I accept financial responsibility for the 7-weekly fees regardless of attendance due to illness, suspension, closure due to natural disasters, or holiday.
- If I need to withdraw my student from the LJPS Summer Camp 2021 program, I must do so in writing and notify the LJPS Summer Camp Director at least 1- week prior to the last week of my child's attendance. Invoices will cease based on the date notification is received. I will continue to pay weekly fees if a 1-wk written notice is not given.
- If I arrive after 6pm to pick-up my child, I will incur a \$10.00 fee for every 5 min increment after 6pm.
- I acknowledge that if my account balance is more than two-weeks past due, my child may no longer attend the program, and I am still responsible for the amount owed.
- Termination of contract will occur if LJPS Summer Camp COVID-19 precautions are not followed.
- I understand the policies and procedures as outlined in the Summer Camp Handbook that was attached to the registration packet. **I understand that disregarding these policies could result in termination of Summer Camp enrollment.**

New Student Registration Fee (non-refundable)	\$30.00 per child	\$30 <input type="checkbox"/> \$60 <input type="checkbox"/> \$90 <input type="checkbox"/>
Returning Fee (non-refundable)	\$25.00 per child	\$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$75 <input type="checkbox"/>
Activity Fee Full-time (non-refundable)	\$100.00 per child	\$100 <input type="checkbox"/> \$200 <input type="checkbox"/> \$300 <input type="checkbox"/>
Full-Time, (1) Child	\$125.00 per week	\$125 <input type="checkbox"/>
Full-Time (2) or more children	\$115 per child weekly	\$230 <input type="checkbox"/> \$345 <input type="checkbox"/>
Optional Extra T-Shirt Youth XS-XL & Adult S-2XL	\$12.00 each	Qty <input type="checkbox"/> Size <input type="checkbox"/> Qty <input type="checkbox"/> Size <input type="checkbox"/> Qty <input type="checkbox"/> Size <input type="checkbox"/>
Optional LJPS Visor or Baseball Cap	\$12.00 each	Visor (one size fits most) Qty <input type="checkbox"/> Child Cap Qty <input type="checkbox"/> Adult Cap Qty <input type="checkbox"/>

By signing, I agree to abide by the policies outlined on this page as well as in the summer camp handbook.

Parent's Signature: _____ Date _____

Liza Jackson Summer Camp Registration

Child's Name Last, First	Grade 21/22	Gender	Age	D.O.B.	T-Shirt Size
Child's Name Last, First	Grade 21/22	Gender	Age	D.O.B.	T-Shirt Size
Child's Name Last, First	Grade 21/22	Gender	Age	D.O.B.	T-Shirt Size

Address: _____

Mother's Name _____ Cell Phone _____ Work Phone _____

Father's Name _____ Cell Phone _____ Work Phone _____

Student Resides with Mother Father Both Grandparent Guardian

LJPS Summer Camp uses email as a form of communication for the program. Through email, you may be notified about upcoming field trips, reminders, balances, etc.

Email Address:	Email Address:
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***Emergency Name and Phone number: If we are unable to reach you, the following persons will be contacted and have your permission to take custody of your child.

1 st Contact's Name	Cell Phone	Work Phone	Relationship
2nd Contact's Name	Cell Phone	Work Phone	Relationship
3rd Contact's Name	Cell Phone	Work Phone	Relationship

Preferred Hospital _____ Phone _____

Preferred Physician _____ Phone _____

It is very important that the following be answered as thoroughly as possible. It will accompany your child in the event of an emergency. Check if your child has or ever had any of the following and indicate which child if registering 2 or more:

- ADD/ADHD Diabetes Kidney Disorder Orthopedic Impairments
 Heart Disease Gastronomy Tube Sickle Cell
 Visual Impairment Asthma Blood Transfusions
 Major Surgeries Epilepsy/Seizure Disorder VP Shunt
 Ear Problems/Frequent Infections Hearing Loss Stroke
 Pulmonary/Lung Disorder Communication Limitations Epilepsy/Seizure Disorder

Please note any conditions, diagnoses, explanations, or special instructions you feel emergency health care provider needs to be aware of regarding your child's care:

Please complete the fillable areas, sign in front of a notary, and then turn it in.

Allergies

Medication _____
Food _____
Insect _____
Environmental _____
Other Allergies _____

Please list all medications your child takes at home or at summer camp:

Child's Name	Medication	Dosage & Time	Purpose
Child's Name	Medication	Dosage & Time	Purpose
Child's Name	Medication	Dosage & Time	Purpose

ALL MEDICATION DISPENSED WILL BE IN ACCORDANCE WITH LJPS POLICIES.

EMERGENCY MEDICAL AUTHORIZATION
THIS FORM MUST BE SIGNED AND NOTARIZED

Purpose: To enable Parents/Guardians to authorize the provision of emergency treatment for students who become ill or injured while under school authority if parents cannot be reached.

TO GRANT CONSENT

In the event reasonable attempts to contact parent/guardian

Parent/Guardian's Name _____ and Phone # _____
Parent/Guardian's Name _____ and Phone # _____

have been unsuccessful, I give my consent for administration of any treatment deemed necessary and by another physician or dentist if the designated practitioner is not available. I also consent for the transfer of my child to Hospital Name: _____

or any hospital reasonably accessible by ambulance. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists concurring in the necessity for such surgery are obtained prior to the performance of such surgery.

Parent/Guardian Signature Date

Notarization
State of Florida
County of Okaloosa

The foregoing instrument was acknowledged before me this _____ day of _____ 20____, by _____, who is personally known or produced _____ as identification.

Notary Public Signature _____ Notary Stamp

Sunscreen/Insect Repellent Permission

Each child will be sprayed with sunscreen before outside play and outdoor field trips. We will supply Rocky Mountain sunscreen, which is broad spectrum SPF 50, and water resistant. The sunscreen is FREE OF: Fragrance, Gluten, Nut Oil, PABA, Carbohydrates, Casein, Corn Products, Sugars, & Soy.

When mosquitoes are prevalent, Beat IT! insect repellent will be sprayed on the children. This product is Deet-free and the ingredients are: Lemongrass Oil, Lemon Eucalyptus Oil, Mint Oils, Citronella, Aloe Vera Gel, and Coconut Oil.

If you would like to provide sunscreen or insect repellent, please label it with your child's first and last name. The item will be stored with the products we supply.

Please what is applicable and sign below.

Allow Sunscreen

No Sunscreen

Allow Insect Repellent

No Insect Repellent

Will Provide Own Sunscreen

Will Provide Own Insect Repellent

Parent signature indicates permission for LJPS staff to administer sunscreen and or insect repellent to your child as needed.

Parent/Guardian's Signature: _____

Date: _____

Please complete the fillable areas, sign in front of a notary, and then turn it in.

Liza Jackson Preparatory School
Authorization for Summer Camp Childcare Release

I, (parent/guardian's name), _____
the parent or guardian of the following child/ren,

Child's Name: _____ Child's Name: _____

Child's Name: _____

authorize childcare personnel to release the aforementioned children to the following adults. Every person listed, can check-out my child/ren at any time, without prior notification.

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

Parent/Guardian Signature

Date

Notarization
State of Florida
County of Okaloosa

The foregoing instrument was acknowledged before me this _____ day of, _____ 20_____,
by _____, who is personally known or produced
_____ as identification.

Notary Signature _____ Notary Stamp