

Camp Dates	Paid
Wk 1 Jun 24 - 28	<input type="checkbox"/>
Wk 2 Jun 1 - July 5	<input type="checkbox"/>
Wk 3 July 8 - 12	<input type="checkbox"/>
Wk 4 July 15 - 19	<input type="checkbox"/>
Wk 5 July 22 - 26	<input type="checkbox"/>
Wk 6 July 29 - Aug 2	<input type="checkbox"/>
Wk 7 Aug 5 - 9	<input type="checkbox"/>
Wk 8 Aug 12 - 16	<input type="checkbox"/>
Wk 9 Aug 19 - 23	<input type="checkbox"/>



2024 Registration Form

<i>For Office Use</i>
Registration
Liability
Waiver
Health Exam.
Behavior
Checked By: _____

Child's Name: _____ Age: _____ DOB: _____

Address: _____

Home Phone: _____

Parent / Guardian: _____

Address: _____

Home Phone: _____ Cell (Mother): _____ Cell (Father): _____

Emergency Phone: _____ Name/Relationship: _____

E-mail (Mother): _____ (Father): _____

Family Doctor: _____ Doctors Phone: _____

Physical description of your Child: _____

Allergies: _____

Medications: _____

Any Special Care: _____

Pick-up Authorization: _____

I understand I or another authorized pick-up person must pick up my child by 5:00pm. I also understand there is a \$5.00 late pick-up fee per 5 minutes. The fee increases after 15 minutes. I understand that the Interskate 91 staff will not release my child to anyone not listed on this form as an authorized pick-up person. I also understand that everyone listed on the authorized pick-up list must bring their ID with them.

Signature of Parent or Guardian: _____ Date: _____

BEHAVIOR MANAGEMENT POLICY

Camper's Name: _____ **Age at time of camp** _____

Interskate 91's Kids Camp wants all of our campers to have a rewarding and memorable experience. In order for this to take place, there are a few rules campers are expected to follow. Please review the following rules and discipline measures with your child to ensure that he/she has a safe, positive, and, most importantly, fun summer.

Camp Rules:

- To treat myself, others, and the camp staff with Care, Honesty, Respect and Responsibility.
- To follow directions and instructions from all staff.
- To stay with the group and counselor at all times unless given permission to do otherwise.
- To keep hands, feet and all other body parts to myself.
- Be responsible for all personal belongings.
- To respect all camp facilities, equipment and property.
- To not use any foul or inappropriate language at any time.
- To Have Fun!!

Camper Consequences:

- Redirection of camper
- Verbal warning or loss of free time
- Visit Camp Director and call home. Child will speak to parents at that time.
- If a second phone call is necessary, the child will be sent home.
- In the event of consistent or excessive failure to follow the rules, the camper will be sent home. If the camper severely endangers the physical, mental or emotional health of another individual, the camper may be sent home immediately.
- Interskate 91 reserves the right to terminate a child's enrollment at our discretion.

Behavior Management/Discipline Agreement

I, the undersigned, have carefully read and gone over the above rules and consequences with my child. I agree with the above policy and understand that in the event my child is sent home and suspended for failure to follow the behavior policy, I will not receive a refund for any camp monies for that time. If my child is removed from the camp permanently, I will not receive a refund for that week. My registration will be terminated at the end of the week that the camper was sent home.

Signature of Parent/Guardian: _____ **Date:** _____

Signature of Camper: _____ **Date:** _____

RELEASE OF LIABILITY

This document affects your legal rights. You must read and understand this document before initialing it or signing.

Name: _____ If under 18 Name of Guardian: _____ Date: _____

Address: _____ Phone: _____

I, the above-named person being above age eighteen, or the legal guardian of the above-named person who is under 18, in consideration of the services of **RAHL Entertainment Inc.** (hereinafter referred to as "**Interskate 91**") the rate charged for those Services, and the right to engage in Roller Skating and other various activities as a participant, hereby acknowledge the following:

ACKNOWLEDGEMENT OF RISKS

I understand and acknowledge that roller skating, laser tag, playgrounds, scooters and miscellaneous high energy activities occurring at the rink involve certain known risks to myself, my child and/or spectators or other third parties. I understand and acknowledge that **Interskate 91** cannot guarantee the safety of me or my child, as participates or spectators. My participation in these activities is purely voluntary; no one is forcing me/he/she to participate.

ACCEPTANCE OF RISK AND RESPONSIBILITY

Being aware that roller skating, laser tag, playgrounds, scooters and miscellaneous high energy activities can involve risks of injury to myself or my child, I expressly agree to accept and assume all responsibility and risk for injury, or death, to myself or to my child arising from my/his/her participation in this and other activities at **Interskate 91**.

RELEASE

I hereby voluntarily release and forever discharge **Interskate 91**, its officers and employees, and all other persons or entities from any and all liability, claims, demands, actions or rights of action, which are related to, arise out of, or are in any way connected with my/his/her participation in the activities at **Interskate 91**. I further agree to hold harmless and indemnify **Interskate 91**, its officers and employees and all other persons or entities from all defense costs, including attorney's fees, or from any other costs incurred in connection with claims for bodily injury or property damage which I/he/she may negligently or intentionally cause to spectators or other third parties in the course of my participation in this activity. I further agree, not to sue, assert or otherwise maintain any claim against **Interskate 91**, its officers and employees, and all other persons or entities, for bodily injury, or death, to myself or to my child, arising from or connected with my/his/her participation in this recreation program from any claim asserted against any of us by spectators or other third parties.

ENTIRE AGREEMENT

I understand that this is the entire Agreement between myself and **Interskate 91**, its officers and employees, and that it cannot be modified or changed in any way by the representation or statements of any officer, employee, or agent of **Interskate 91** or by me. My signature below indicates that I have had sufficient opportunity to read this entire document, understand it completely, and agree to be bound by its terms.

Signature of Participant: _____

Signature of parent or guardian (if under 18): _____

KIDS CAMP MEDICAL TREATMENT WAIVER

Parents Name: _____

Child's Name: _____

Address: _____

Home Phone: _____

Office Phone: _____

Child's Age: _____

*I understand that in case of an emergency and I cannot be contacted medical treatment could be required.
I give full permission to Interskate 91 to authorize any treatment necessary to insure the safety of my child.*

Preferred Hospital: _____

Insurance Information: _____

This waiver does not in any way hold Interskate 91, its officers and employees, and all other persons or entities financially responsible or otherwise liable for any medical or emergency care given.

Signature of Parent or Guardian: _____ Date: _____

CAMP HEALTH EXAMINATION FORM FOR CHILDREN, YOUTH AND ADULTS

Developed by American Camping Association, Inc.
in consultation with The American Medical Association and the American Academy of Pediatrics

Program: _____

RETURN TO:
Interskate 91
2043 Boston Road
Wilbraham, MA 01095

This side to be filled in by parent and checked with physician at time of examination.

Participant name _____ Birth Date: _____ Sex _____ Age _____

Parent or Guardian (or Spouse) _____ Phone _____

Home Address _____

Business Address _____ Phone _____

If not available in an emergency notify: _____ Phone _____

Home Address _____

Health History: (Check — giving approximate dates)

Conditions	Allergic Reactions***	Diseases
Migraine _____	Food (nuts, shellfish) _____	Chicken Pox _____
Heart Defect/Disease _____	Plants (poison ivy, etc) _____	Measles _____
Convulsions _____	Insect Stings _____	German Measles _____
Diabetes _____	Drugs _____	Mumps _____
Bleeding/Clotting Disorders _____	Other _____	Asthma _____

*** Severe allergic reactions – please give explanation and course of action _____

Operations or serious injuries (dates) _____

Chronic or recurring illness _____

Psycho-social conditions (ADD/depression/anxiety/food disorder, etc.) _____

If medication(s) will be taken during camp, indicate name of drug and dose _____

Name of family physician _____ Phone _____

Do you carry family medical/hospital insurance? Yes _____ No _____ If so, indicate below:

Carrier _____ Policy or Group number _____

IMPORTANT: Please notify the camp if this camper is exposed to any communicable disease during the three weeks prior to camp attendance

Suggestions from parents: _____

Parent's Signed Authorization: This health history is correct so far as I know, and the person herein described has permission to engage in all prescribed camp activities.

I hereby give permission to the physician selected by the camp director to order X-rays, routine tests and treatment for the health of my child, and in the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for my child as named above.

Parent/Guardian Signature: _____ Date _____

--- Important — Must be SIGNED & Completed for Camp Attendance ---

IMMUNIZATION HISTORY Applicant Name: _____

Required immunizations must be determined locally. Please record the date (month & year) of basic immunizations and most recent booster doses

Vaccines	Year of Basic immunization	Year of Last Booster
Diphtheria Pertussis (whooping cough) DPT Tetanus or		
Tetanus Diphtheria TD or		
Tetanus		
Oral Polio (Sabin) TOPV		
Injectable Polio (Salk)		
Measles (hard measles, red measles, Rubeola)		
Mumps		
Rubella (German measles, 3-day measles)		
Other		
Tuberculin test given _____ (most recent)	Height: _____	Weight: _____

HEALTH EXAMINATION BY LICENSED PHYSICIAN WITHIN 12 MONTHS OF CAMP - I have examined the above applicant...

In my opinion, the applicants condition does _____ / does not _____ preclude her / his participation in an active sports program.

Is there any physical and/or psycho-social conditions for which the applicant is under professional care: _____

Current Treatment (include current medications): _____

Any activity or dietary restrictions: _____

Explanation of loss of consciousness, convulsion or concussion: _____

Does applicant have: Epilepsy: Yes _____ No _____ Asthma: Yes _____ No _____ Diabetes: Yes _____ No _____

Bleeding or clotting disorders: Yes _____ No _____ Heart defect/disease: Yes _____ No _____

Any allergies (food, drugs or insects): _____

Any medication to be administered (specific dosages): _____

Additional Health Information: _____

*****LICENSED PHYSICIAN SIGNATURE:** _____ Date: _____

Address: _____ Phone: _____

Name of Physician (please print): _____

2024
INTERSKATE 91



KIDS
Camp



Wilbraham, MA

WELCOME

Welcome to INTERSKATE 91 KIDS CAMP. We are looking forward to a safe and fun summer. This handbook has been designed to answer the many questions parents and campers may have. Please read this information packet carefully. If you have any questions and/or concerns, feel free to contact Interskate 91 at (413) 543-4664 ext. 0.

PHILOSOPHY OF KIDS CAMP

Interskate 91 Kids Camp is committed to providing a fun and safe summer for your child/children. Our camp staff is carefully chosen and trained to provide the campers with a fun and supportive atmosphere where everyone can make new friends, grow, and develop team building skills. Attending camp can be an experience you never forget and at Interskate 91 Kids Camp we strive to make that possible for each child we serve.

GOAL OF KIDS CAMP

The goal of Interskate 91 Kids Camp is to use our facilities and staff to help the campers enjoy their summer and create new experiences. We will provide many activities in both small and large group settings under the guidance of caring and well-trained staff members. By using our facility, we provide each camper with the opportunity to learn new skills in roller skating and many other activities.

CAMP STAFF

Our staff is here to help make your child's experience with us as fun and safe as it can be. The entire staff is required to participate in training, which includes certification in CPR and Standard First Aid. Background checks are conducted on all members of the staff. Interskate 91 is committed to recruiting and developing an outstanding group of counselors that are dedicated to providing the best possible camp experience.

2024 INTERSKATE 91 KIDS CAMP DATES

February Vac	Feb 19	thru	Feb 23
April Vac	Apr 15	thru	Apr 19
Week 1	June 24	thru	June 28
Week 2	July 1	thru	July 5 (closed on 4 th)
Week 3	July 8	thru	July 12
Week 4	July 15	thru	July 19
Week 5	July 22	thru	July 26
Week 6	July 29	thru	August 2
Week 7	August 5	thru	August 9
Week 8	August 12	thru	August 16
Week 9	August 19	thru	August 23

KIDS CAMP HOURS & FEES

- Camp Hours: 8a.m. – 5p.m. OR 7a.m.-6 p.m. (additional \$35 wkly)
- Single Day: \$ 65.00
- Full Week: (Mon – Fri) \$195.00
- **Extended Day Add On:**

We are now offering extended hours for families that need the extra time to drop off/pick up

Drop off as early as 7a.m. Pick up as late as 6p.m. \$35.00 per week additional

Restrictions:

- Extended day: (good with **FULL** week camp only) (**NOT** available for Single Day Camp)
- Single Day Campers **not** accepted on field trip days **unless** going on trip
- Late fees are strictly enforced for late pickup. (see Late Fee Policy)

EARLY REGISTRATION DISCOUNT

Receive 10% off, when paying in advance.

- FULL week camp only
- Must be PAID IN FULL by the WEDNESDAY PRIOR to camp week you are registering for.

PAYMENTS

Payments may be made in person or by mail. Payments may be made by cash, debit or credit card (Visa, MasterCard, Discover, and American Express). A check will only be accepted 20 days before your child's start date. If you have any questions regarding your camp bill, please call the Interskate 91 office at (413) 543-3991 Ext.0.

PAYMENT SCHEDULE

By Cash/Debit/Credit:



Week 1.....full payment due: June 24

Week 2.....full payment due: July 1

Week 3.....full payment due: July 8

Week 4.....full payment due: July 15

Week 5.....full payment due: July 22

Week 6.....full payment due: July 29

Week 7.....full payment due: August 5

Week 8.....full payment due: August 12

Week 9.....full payment due: August 19

By Check:

due: June 3

due: June 10

due: June 17

due: June 24

due: July 1

due: July 8

due: July 15

due: July 22

due: July 29

IMPORTANT FORMS

There are forms located in the back of this booklet which must be filled out completely and brought to us before your child can attend camp.

1. Camper Information
2. Release of Liability
3. Medical Treatment Waiver
4. Behavior Management/Anti-Bully Policy
5. Camper Physical Exam

(The Physical Sheet must be completed and signed by your child's physician.)

ALL Completed **Registration/Medical** forms, with signatures, must be received by Interskate 91 at least ten (10) days prior to your child's first day of camp.

You may deliver in person

OR

You may mail them to:

Attn: Tom Ventura
Interskate 91 Kid's Camp
2043 Boston Road
Wilbraham, MA 01095

KIDS CAMP ACTIVITIES

Roller Skating

Arts & Crafts

Indoor Games

Sports

Fitness

Movies

In-line Skating

Outdoor Games

Laser tag

Music

Play Quest

Nature

*Soccer City (next door) could be used for some of the activities.

OPEN SKATING TIMES

There are certain times during the camp week when Interskate 91 is open to the public. At these times our campers are given an Interskate 91 piney to wear. *(These are bright colored with our logo and easy to spot)*

Our staff is positioned in the following manner:

- Front and exit doors,
- Skating on the rink floor,
- In the birthday area.

During open sessions, the birthday area is reserved for Interskate 91 Kid's Camp only. This area is also used for camper's special activities offered as a non-skating option.

Public Sessions:

Monday, Tuesday, Thursday & Friday, approximately 1:00-4:00pm.

FIELD TRIPS

Interskate 91 Kid's Camp could be going on a field trip each week. Some field trip destinations could be, Look Park, Bowling, Majestic Theatre, Forest Park or Lupa Zoo. There is an additional fee for these trips, and they are optional. Any children that do not wish to attend a field trip will have a usual camp day at Interskate 91. Transportation for these field trips is given by a licensed bus company hired by Interskate 91. The child to counselor ratio on a field trip is a 1 to 5 ratio for ages 8-12 and a 1 to 3 ratio for ages 6-7. If there are not enough children to attend a field trip, then it will be cancelled. Further information on the field trips will be given out closer to each field trip.

WHAT TO BRING TO CAMP?

BRING to camp:

- | | |
|------------------------------------|-------------------|
| Lunch (with name on it) | Comfortable shoes |
| Sunscreen (for outdoor activities) | Proper Clothing |
| Skates (if you have your own) | |

DO NOT bring to camp:

- | | |
|--------------------|-----------------|
| Jewelry | Toys |
| Phones/Electronics | Glass bottles |
| Video Games | Expensive items |

Electronics, including PHONES, are **NOT ALLOWED** at Interskate 91 Kids Camp. We will be strongly enforcing this policy. Please take note of all other items that should **NOT** be brought to camp. The consequence for violation of this policy will be:

1. Verbal warning and item put in office till end of day.
2. Item put in office, parent called to
3. Pick up camper immediately.
4. Permanent dismissal from Interskate 91 Kids Camp

We thank you in advance for your help and support on this.

We would also like to remind you that Interskate 91 Kids Camp / Staff are NOT responsible for personal items (**including cash**) that are left unattended. Camper's cash for the day should be checked in with Staff member handling morning check in.

LUNCH AND SNACKS

Option1: Purchase lunch from concession

Option2: Lunch brought from home every day

A COLD lunch packed in a disposable bag with your child's name on it. Do NOT send any food items that need to be heated. All lunches will be stored in a refrigerator. Please provide your child with a nutritious lunch.

SNACK: Interskate 91 will provide a morning and afternoon snack each camp day.

*Water is always available at the fountain.

ATTENDANCE POLICY

Parents are required to call Interskate 91 when their child is going to be absent. The office phone number is (413)543-3991 Ext. 0. If a person cannot be reached by telephone then leave a message on the answering machine.

CANCELLATIONS & REFUNDS

Any cancellation must be made to the Interskate 91 office staff.

Refunds will only be issued if you cancel at least a week before your camp week starts.

(Exception: if there is a note a doctor's note stating that the child cannot attend camp for a medical reason.)

Payment for a single day cannot be transferred to the following week. *(However, you may change it to a day within the same week.)*

MEDICAL FORMS

State law requires that each child receive a physical exam within 24 months before his or her attending camp. Each child **must** have a completed medical form on file before he/she is allowed to attend camp. **Children without a valid physical form on file will not be allowed to attend camp.** Please have your doctor complete the official camp medical form (provided) or a comparable form. All forms are due to Interskate 91 ten (10) days prior to your camp week.

HEALTH POLICY

Parents should **not** send children who are sick or infectious to camp. Any additional health information should be directed to the Camp Director.

MEDICAL AND DRUG ADMINISTRATION POLICY

Medication will only be administered under the following guidelines:

- Non-prescription medication will not be administered under any circumstances.
- An Authorized Medication Form must be completely filled out including signature and date.
- All prescription medication must be in its original container with the child's name, address, and dosage instructions listed.
- Medications are to be given to a staff member upon the child's arrival to camp.
- All medication is secured within a locked area. Medication that requires refrigeration is placed on a labeled shelf in the refrigerator.

INCLEMENT WEATHER POLICY

Interskate 91 is open on inclement weather days unless there is a state of emergency banning all non-essential traffic on the roads. Please listen to the radio or television if severe weather should arise.

EMERGENCY PROCEDURES

Interskate 91 Kids Camp employs CPR/First Aid certified staff, an on-site health supervisor, as well as an on-call doctor. Our trained first aid personnel will respond to minor illnesses or injuries that arise during the camp day. For any injury or illness that requires medical treatment parents will be notified immediately to pick up their child. If a parent/guardian cannot be reached, then the person listed as the emergency contact will be called. In the case of an injury which requires immediate medical treatment the following steps will be taken:

1. An ambulance will be called.
2. Parent/Guardian will be notified.
3. A staff member will accompany the child to the hospital.
4. Interskate 91 staff will remain with the child until a parent/guardian arrives

The Health Care Policy and Contingency Plans for camp are always available for parents/guardians to view at anytime.

PARENT SUGGESTIONS

Your questions, suggestions and concerns are important to the success of Interskate 91 Kids Camp. Remember, you are your child's best advocate. It's important you inform the staff if your child is having difficulty at camp or home that might affect their behavior at camp. Let them know if changes are occurring at home that are affecting your child's mood or behavior. Do not let a potential problem arise and grow. Also, if your camper really enjoyed a particular event or activity and you appreciate something special at Kids Camp, please tell the staff. Positive feedback lets us know we are doing thing right. Interskate 91 welcomes Parents/Guardians to visit camp at anytime during the week.

PICK-UP / DROP-OFF PROCEDURES

Parents/Guardians must come in the building and sign your child in starting no earlier than 8:00am and sign your child out no later than 5:00pm. (7am-6pm extended day only) Proper identification must be shown when picking children up. Interskate 91 will only release a child to persons **authorized** and listed on the child's Registration Form. Staff members will ask for identification. In the event that a relative or friend not listed on the registration form needs to pick up a child, parents should provide advance written notification. If an emergency or unexpected need should arise for an unauthorized person to pick up the child, precluding advance written notification, a telephone call from the parents or legal

guardian must precede the arrival of the unauthorized person. Identification from this person is required. NO child will be released to any individual with-out proper identification, even the child's parents. NO exceptions.

LATE FEE POLICY

A \$5.00 fee will be charged for late pick-ups for every five minutes in the first fifteen minutes. After fifteen minutes, the fee will be increased to \$10 for every five minutes up to thirty minutes. After thirty minutes the fee will be increased to \$20 for every five minutes. Late fees must be paid at the time of late pickup. Please make every effort to be prompt at pick up time. Late pick-ups can cause undue stress to a child who may be hungry and tired from a full day at camp. If, in an emergency, you know that you are going to be late please call the Interskate 91 office.

ANTI BULLYING

At Interskate 91 Kids Camp, bullying is inexcusable, and we have a firm policy against all types of bullying. Our Camp philosophy is based on our mission statement which ensures that every camper has the opportunity to have a safe and fun place make new friends, acquire new skills, and life experiences. We work together as a team to ensure that campers gain self-confidence, and go home with great memories. Unfortunately, persons who are bullied may not have the same potential to get the most out of their camp experience. Our leadership addresses all incidents of bullying seriously and trains staff to promote communication with their staff and their campers so both staff and campers will be comfortable alerting us to any problems during their camp experience and between camp seasons. Every person has the right to expect to have the best possible experience at camp, and by working together as a team to identify and manage bullying, we can help ensure that all campers and staff have a great summer at Interskate 91 Kids Camp.

BEHAVIORAL MANAGEMENT PLAN

DISCIPLINE and GUIDANCE shall be (1) consistent and (2) based on an understanding of the individual needs and level of development of each child. The goal of all discipline is to maximize the growth and development of self-discipline, while insuring the safety of the group.

Rules and limits will be clearly explained to campers frequently so that they understand them and feel secure and safe. Developmentally appropriate methods of behavior management will be used in dealing with unacceptable behavior. These methods include use of some of the following techniques: distraction, redirection, gentle reminders, offering acceptable choices, natural consequences, and when absolutely necessary, time away from the situation to relax and renew self-control.

“Renewal Time” is used with much care and thoughtfulness to prevent it from becoming a punishment. Behaviors, which might call for “renewal time”, include but not limited to:

- Repeated defiance of rules set down for the children’s safety (only after said rules are thoroughly established)
- Repeated behavior which threatens the physical and/or emotional safety of the child, other children or staff (i.e.: hitting, biting, verbal assault, kicking, throwing objects, pushing, and temper tantrums) will result in the following:

First Offense – “In House” behavior management. The child will be asked to sit and discuss what unacceptable behavior they demonstrated and why it occurred. With the assistance of the staff person, they will list alternate appropriate behaviors for possible future situations. Parents will be notified.

Second Offense – An incident report will be completed, and the parent will be called in for a conference that **same day**. Previous documentation will be shared - - a plan of action with staff, parent, and child will be determined. *(Example: Choices may include loss of privileges at home or camp)*

Third Offense – Suspension of 1–3 days depending on the severity of behavior.

Fourth Offense – TERMINATION from program.

NOTE: Extremely Violent/Threatening Behavior can result in an IMMEDIATE TERMINATION.

- At no time will a behavior incident be dealt with in a demoralizing, humiliating, abusive manner. No child will be subject to neglect, cruel, unusual, severe, or corporal punishment including: punishment which subjects a child to verbal abuse, ridicule or humiliation, denial of food, rest, or use of bathroom facilities. Punishment for soiling or wetting and relating to or not eating food is strictly prohibited.
- No staff member shall be subject to verbal or physical abuse by a child enrolled in camp. This includes humiliation, foul or abusive language or ridicule.

ADJUSTMENT TO THE CAMP EXPERIENCE

If a child is unable, in our opinion, to enjoy the camp experience, we reserve the right to ask for his or her withdrawal after consultation with parents/guardians. Please feel free to speak to our camp staff regarding any questions or problems your child may have adjusting to the camp program.

If you have any questions or concerns, always feel free to contact us. We are looking forward to a great summer of fun at Interskate 91 KIDS CAMP. (413)-543-3991 Ext.0