



March Break Camp

March 11th-15th, 2019

Parent Information Package

Please complete and bring with you on the first day of camp the following:

- Completed Camp Excursion Form**
- Completed Camp Pick-Up & Drop-Off Consent Form**

These forms must be completed and submitted to City of Belleville Day Camp Staff no later than the morning of the first day of camp in order for your child(ren) to participate.

For questions or concerns please call The City of Belleville - Recreation, Culture and Community Services Department at **613-966-4632** or visit

www.qswc.ca

Quinte Sports & Wellness Centre

We look forward to a fun filled week! We have great games, sports and lots of exciting events and activities!

Remember To Bring

- ✓ Snow Pants, Hat, Mittens & Boots
- ✓ Morning and Afternoon Snacks
- ✓ A Healthy Lunch with Plenty of Fluids
- ✓ Indoor Running Shoes
- ✓ Bathing Suit & Towel (daily swimming)
- ✓ Extra Clothes



Please make sure to label all your belongings!
Most Importantly: A BIG SMILE!

- **Camp will be going outside to play, so please ensure your child brings the appropriate outdoor attire.**
- Parents are asked to **sign their child(ren) in and out** each morning and afternoon to ensure the safe arrival and pick up of all children.
- Drop-Off and Pick-Up will be at the Quinte Sports & Wellness Centre. Regular **camp hours are 8:00 a.m. to 5:00 p.m.**
- Extra Hours drop-off (7-8am) for all ages will be in the **Multipurpose Room** on the 2nd floor.
- Extra Hours pick-up (5-6pm) for all ages will be in the **Preschool Room** on the 2nd floor.
- Please be advised that we may have children who have severe peanut allergies in camp. Please **do not send any peanut products** with your child(ren) this week. Thank you.



For further details or questions please call 613-966-4632.

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Camp Information:

CAMP LEADERS

Our March Break camp leaders are all certified in First Aid and CPR. Our leaders create a fun atmosphere that ensures all campers have a safe and enjoyable day camp experience.

MEDICAL INFORMATION AND PARENT CONSENT FORM

This mandatory form **MUST** be completed and submitted before your child(ren) attend camp. Please see attached in this package.

SIGN IN/OUT PROCEDURES

All campers must be signed in upon arrival, and signed out upon departure, from camp by their parent or guardian. A child may only leave the premises without a parent or guardian if the appropriate section of the information sheet is signed.

SNACKS AND LUNCH

Campers are reminded to bring plenty of healthy snacks and a big lunch to camp every day. Please send your camper with a labeled water bottle that can be refilled throughout the day. We are unable to refrigerate or heat lunches.

Ontario Child & Family Services Act

City of Belleville day camps staff and volunteers are legally obliged to observe the terms of the Ontario Child and Family Services Act and must report a **child in need of protection**.

PEANUT/NUT AWARE

We **CANNOT** ensure a peanut-free environment. We are, however **PEANUT AWARE** when we are notified that a child in camp has a peanut/nut allergy. During the week, we encourage parents to pack peanut-free snacks and lunches for the safety of all campers.

SWIMMING

Please note that during swimming activities, all children under the age of ten who are unable to pass the facility swim test will be required to wear a lifejacket.

VALUABLES

We ask that all toys, electronics, or sentimental items, which could cause distraction or conflict amongst campers to be left at home. We are not responsible for lost, stolen or damaged belongings.

LOST AND FOUND

We will have a table set up that will contain any lost and found items. Please check this on a regular basis to ensure that everything is returned to its owner. To help make this process easier, please label your child's clothing clearly.

POSITIVE SPACE

To ensure that all campers have the opportunity to play and grow in a Positive Space, we will be implementing a zero-tolerance-based system for negative camper conduct. Campers will be informed of our Positive Space policy and it will be applied equitably to all situations. It is our intent that this system will allow our campers to feel comfortable and secure during their time at Camp, while reinforcing respect for themselves and others.

CONTAGIOUS CONDITIONS

If you suspect that your child may have any contagious conditions such as; head lice or pink eye, we ask that you do not send them to camp. Please inform their leader in order to prevent infecting any other campers. We encourage you to remind your child not to share any personal items with other campers.

VISITATION POLICY:

Any person wishing to visit a City of Belleville - Day Camp Site outside of regular drop-off (8:00 – 9:00 am) & pick-up (4:00 – 5:00 pm) hours **MUST** notify the City of Belleville Program Supervisor ahead of the visitation by contacting the City of Belleville's Recreation, Culture and Community Services Department at 613-966-4632. Visitors are asked to keep their visits to a 15-minute maximum stay to help reduce the disruption to the Children's Program Time. **PROGRAM VISITORS:** For individuals who wish to extend their visit beyond the 15-minute maximum stay by volunteering at one of the City of Belleville – Day Camp Programs, please note that we require all volunteers over the age of 18 to complete an application package, orientation and training session and submit a current (no older than 6 months) Criminal Reference Check including the vulnerable sector.

For questions or concerns please contact the City of Belleville – Recreation, Culture and Community Services Department at **613-966-4632**.

Daily Themes

MONDAY
MARCH 11TH



Arctic Adventures

TUESDAY
MARCH 12TH



Spring into
Experiments

WEDNESDAY
MARCH 13TH



Sports of All Sorts

THURSDAY
MARCH 14TH



Snow Covered
Canvas

FRIDAY
MARCH 15TH



Lucky Charms
(Dress in Green)



City of Belleville
Recreation, Culture and Community Services Department

EXCURSION CONSENT FORM
2019 March Break Day Camp

Participant's Name: _____ Age: _____
(First) (Last)

Camp Site Attending: *Camp at the Quinte Sports & Wellness Centre*

Extra Hours AM Extra Hours PM (*Paid & Registered for AM and/or PM)

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Please **initial** the appropriate excursion(s) / activities that you give your child consent to participate in.

SPECIALTY CAMPS:

Local Parks, Walking Trails and Sports Fields (Belleville, Ontario) ()
Playing on Play Equipment, Group Walks, Recreational Sports

Quinte Sports and Wellness Centre (265 Cannifton Rd.) ()
Swimming in the Templeman Menninga Aquatic Centre.

The undersigned, hereby releases and forever discharges the Corporation of the City of Belleville and its directors, employees and agents from all actions, causes of action, damages, claims and demands whatever which I, or my heirs, executors, administrators or assigns may have against the Corporation of the City of Belleville, its directors, employees, and agents for my loss, injury or damage suffered or incurred by the child _____, while participating in or travelling to and from the above activities. I further agree to indemnify the Corporation of the City of Belleville and its directors, employees and agents against all actions, damages, claims, and demands which may be brought against them by or on behalf of this child in respect of arising out of any accident, injury or damage suffered and incurred by this child while participating in or travelling to and from any of the above activities.

DATE (DD/MM/YY)

SIGNATURE OF PARENT/GUARDIAN



City of Belleville
Recreation, Culture and Community Services Department
265 Cannifton Rd. Belleville, Ontario K8N 4V8
(613)-966-4632 Fax: (613)-967-3207

Camp Drop Off and Pick Up Consent Form

Participant's Name: _____

Parent or Guardian Name (s): _____

Home Number: _____

Work Number: _____

Cell Number: _____

Emergency Contact Information:

Alternate Emergency Contact Name and Phone Number: _____

Relationship to the child: _____

Drop Off and Pick Up Information:

My child or children will be picked up by one of the following people:

Name: _____ Relationship to child: _____

Name: _____ Relationship to child: _____

Name: _____ Relationship to child: _____

Please Note: Photo ID will be requested by staff. If anyone other than those individuals or individual listed above is to pick up your child, the leaders will require your consent.

<p>Date (day/month/year): _____ Signature: _____ (Participant or Parent/Guardian if the participant is under 18 years of age)</p>
