

MAHOOSUC KIDS

Apr 6, 2023

Dear MKA families,

Happy spring!

We are working hard to secure our summer plans and we're excited to have everyone back! Attached you will find the 2023 Summer Adventure Program (SAP) enrollment forms.

*Some things to note:

- The daily rate of MKA SAP is \$40.00. There is a charge of \$10.00 for both early and late care per child.
- Drop off is 7:50 am to 8:30 am and pick up is from 4pm to 4:15 pm. Early care is from 7 am to 7:50 am and extended care is from 4:15 pm to 5:30 pm. Pick up and drop off is in the cafeteria.
- ****Please note there is no late care on Fridays****
- We will no longer be able to accommodate drop in care. Similar to the school year, we will operate a slot based program. Your child will **only** be able to attend on the days you sign up for on the enrollment contract.
- Please pay all care fees on the first day of each week. If fees are not received by Monday morning, your child will not be able to attend camp until all fees are paid for.
- You will be charged weekly for every day that you sign up for on the enrollment contract whether your child is in attendance or not. ***You will need to notify us by Wednesday of the week before the change is taking place in order to not be charged.*** Contact the director in the case of a medical or family emergency.
- Like the school year, MKA staff will take children's temperatures upon arrival. If the child has a temperature (99 degrees and above), the child will have to return home. Children can return to MKA SAP after 24-hours without symptoms and no fever reducers.
- MKA provides breakfast, lunch and afternoon snacks for all campers.
- Follow us on Facebook for the most recent updates about camp!

*Behavior Expectations:

Parents are expected to review the Summer Camper Behavior Agreement with their child. It needs to be signed and returned with the enrollment forms. Failure to return all paperwork may mean your child cannot start on time. MKA has a zero-tolerance policy for any kind of physical or verbal aggression, intimidation, belittling, or threatening behavior.

. ***Please see our Essential Eligibility Criteria information**

*Kindness Clause:

Our MKA staff is a team of highly dedicated, talented, and passionate professionals. They show up, work hard, and truly enjoy your children. Please remember to be *kind, respectful, and patient*.

Please note that MKA SAP scholarships are available. To learn more, please email MKA at mka@sad44.org or call us at 207-824-7007. Please return all information to: Amy Connell MKA, Crescent Park School

MKA SAP 2023 Essential Eligibility Criteria

At MKA, we strive to provide programming that is enjoyable for as many children as possible. In all we do, health and safety is paramount. As such, we need to recognize the limitations of our facility, program, and staff. Below is a list of Essential Eligibility Criteria (EEC) deemed necessary for participation.

All children must be able to do the following at a developmentally-appropriate level for their age:

- Communicate needs and concerns verbally with others
- Understand and comply with directions given by staff
- Refrain from unsafe and/or harmful behaviors toward self and others
- Identify and avoid health and safety risks
- Assume responsibility for personal hygiene
- Demonstrate age-appropriate social and emotional skills in managing personal boundaries, relationships, communication, stress, and conflict
- Participate FULLY in all scheduled activities and programs

***Please note we are not able to provide children attendants (one-on-one staff members) to support individual children. ALL children need to be able to have successful experiences within our ratio of one adult to every 13 children.**

Parent/Guardian Signature: _____

Date: _____

NON-DISCRIMINATION STATEMENT

Mahoosuc Kids Association does not discriminate against employees or participants on the basis of race, sex, color, national origin, religion, sexual orientation, age, or disability in accordance with all federal and state laws related to nondiscrimination.

ANTI-DISCRIMINATION POLICY (STATEMENT OF INCLUSION)

It is our policy to serve all children to the best of our ability while functioning within our state guided child/adult ratios. We will work with reasonable accommodations to include all children with and without special needs in our program. We work with other agencies, such as, Center for Community Inclusion and Child Development Services, to help all children to be successful in our program. Enrollment is available to any child when there is an opening.

ACCOMMODATIONS FOR CHILDREN WITH DISABILITIES

To ensure equal opportunity for children with disabilities, Mahoosuc Kids Association will provide reasonable accommodations and/or make reasonable modifications to its policies, practices and procedures, to the extent required by law and where such accommodations or modifications would not pose an undue administrative or financial hardship or fundamentally alter the nature of the services provided by the program. If parents are seeking specific accommodations or modifications on behalf of a child with a disability, or if they have concerns or questions about whether their child will be able to benefit from the program, they should bring such matters to the attention of the Program Coordinator as soon as possible. The Program Coordinator may ask parents to provide necessary medical and other documentation regarding the nature of the child's disability and the accommodation or modification sought. Because of the additional time that may be required to request and receive information from specialist agencies and medical providers, parents should bring any request for accommodation to the attention of the Director well in advance of the start of the program to ensure that a decision can be made prior to the start of the program. It is important to note that all enrollment documents must be completed before any such consideration process can begin.

**Summer Adventure Program
2023 Registration Form**

Student Name:	Parent/Guardian Name:
DOB:	Cell #:
Physical Address:	Work #:
Mailing Address:	Email:
Town:	Parent/Guardian Name:
State:	Cell #:
Zip:	Work #:
Grade next fall:	Email:
<p>*If parents are separated, who has primary residence? *Is there a visitation schedule?</p>	
Emergency Contacts:	
Name:	Name:
Phone #:	Phone #:
Relationship:	Relationship:
<p>Are there any court documents (restraining orders, etc.) that MKA should be aware of? If yes, please explain. Please note that if a restraining order is in effect, a copy of that order will need to be provided and placed with your child's enrollment information. All enrollment information is kept confidential.</p>	
<p>Drop off and Pick up Authorization I am aware that for safety reasons, I am required to sign my child in and out of the program. Check in will be located in the cafeteria. Morning drop off is between 8:00 and 9:00 AM. Afternoon pick up is by 4:00 PM. I am aware that early care and extended care is available for additional charges. The following persons are authorized to pick up my child. If my child is to be picked up by a person other than me or those listed below, I will send a note or call 824-7007 to make the change. I am aware of Mahoosuc Kids Association's responsibility, and understand that they will keep my child at Crescent Park if they do not have consent to pick up my child. Proper photo ID is needed.</p>	
Name:	Name:
Phone:	Phone:
<p>Authorization to be included in photos: I grant permission for photos or video of my child and/or examples of his/her work during the SAP program to be included in publications such as (but not limited to) local newspapers, local television, display boards for public viewing and other promotional/social media as well as the Mahoosuc Kids website/Facebook page.</p>	
Parent/Guardian Signature:	
Date:	

**MAHOOSUC KIDS SUMMER ADVENTURE PROGRAM 2023
MEDICAL INFORMATION SHEET**

*Recently the Maine Department of Health and Human Services, along with the Maine Center for Disease Control and Prevention required that child care facilities have **copies of children's immunization records. Please attach record(s) to the packet. A packet without this information will be considered incomplete and enrollment will not be processed.** If you have any questions or concerns, please feel free to contact Amy Connell at 207-824-7007 or connella@sad44.org.

Current Medications	Allergies	History	Diseases
To be taken: Home: _____ SAP: _____ Medication: _____ Dose: _____ Time: _____	Hay Fever: _____ Poison Ivy: _____ Insect Stings: _____ Penicillin: _____ Others (please list): _____	Frequent Ear Infections _____ Heart Defect/Disease _____ Convulsions _____ Diabetes _____ Bleeding/Clotting Disorder _____ Mental Condition _____ Mononucleosis _____ Asthma _____	Chicken Pox _____ Measles _____ German Measles _____ Mumps _____ Others (please list) _____

Date of last Tetanus: _____ Chronic illness or medical condition: _____

Operation or serious injury: _____ Dietary restriction: _____

Physician: _____ Address: _____ Phone: _____

Dental Provider: _____ Address: _____ Phone: _____

Emergency Medical Release

In the event that my child _____ should have a sudden illness or accident at MKA SAP, I understand that the staff will attempt to contact me or the listed emergency contacts, for instructions. If unsuccessful, or in the event that the staff member in charge views the situation as critical, I request that the family physician listed above be called. If emergency treatment is needed, I authorized MKA to request assistance from EMS and consent to any emergency treatment that is recommended by the EMS or Emergency Room Staff. It is understood that every effort will be made to contact the parents or other priority person before treatment is given but that treatment will not be withheld if parent or emergency contact cannot be reached. It is also understood that I will be responsible for all costs involved in treatment of this minor.

Signature of Parent or Guardian: _____

Date: _____

2023 MKA SAP Reservation Information- please check off days attending					
Weeks	Monday	Tuesday	Wednesday	Thursday	Friday
6/26 - 6/30/23			Children's Museum of Maine (younger) Southward Planetarium (older)		
7/3 - 7/7/23		Closed	MT. Blue State Park		
7/10 - 7/14/23			Frogtown Puppeteers @ CPS PM Swimming at Angevine		
7/17 - 7/21/23 *Older campers will have a Thursday field trip*			Range Pond State Park (younger)	Sea Dogs (older)	
7/24 - 7/28/23			AM Swimming at Angevine Mad Science @ CPS		
7/31 - 8/4/23			Crescent Beach State Park		
8/7 - 8/11/23			Echo Lake State Park		
8/14 - 8/18/23			Sebago State Park		

Parents and Guardians:

- 1) I understand that I am responsible for any medical expenses that may be incurred by my child while he or she is attending S.A.P.
- 2) **My child understands that S.A.P. involves physical activity and working cooperatively in groups, and that he or she is capable of participating in S.A.P. activities.**
- 3) Summer Adventure personnel must ensure compliance with all DHS rules regarding water activities, field trips and transportation; Including but not limited to supervision and staff to child ratios at all times. Summer Adventure does not allow the use of floaties, water wings, noodles, etc. It is our belief children will better respect their swimming abilities when not relying on these items.
- 4) I have read and fully understand the policies and procedures outlined in the MKA Family Handbook. (You can find a electronic copy on www.mahoosuckkids.org)

Parent/Guardian Signature

Date

Mahoosuc Kids Association
Summer Adventure Program 2023 Parent Contract

(Please complete a separate Contract for each child)

The MKA Summer Adventure Program serves children entering Kindergarten through grade six who are from or visiting the greater Bethel/MSAD #44 area.

Child's Name: _____ Town: _____

Grade entering in the fall: _____

Fee Schedule:

The camper fee is \$40 a day. All fees must be paid in advance, on or before the first day each week.

Absences are non-refundable. Absences due to illness or family emergency may be credited if approved by the MKA director.

Due to staffing concerns, MKA must be notified by Wednesday morning of the week before to cancel a reserved day. Failure to provide this notice will result in being charged the daily fee.

Invoices for SAP fees are only generated on delinquent accounts. All unpaid accounts fall delinquent at the end of the first unpaid week and children may not return to the program until a payment arrangement has been reached with the MKA director.

Scholarships may be available based upon need. Please contact the MKA director for details.

Early childcare is offered from 7:00 AM until the program begins at 8:00 AM at the rate of \$10.00 per child per day. Extended childcare is offered from 4:00 PM to 5:30 PM at the rate of \$10.00 per child per day.

If a child is picked up after 5:30 PM closing time, parents will be charged \$5.00 per child for each 15 minute interval or part thereof. Repeated late pick-up will result in a child's dismissal from the program.

Pursuant to contract between MSAD # 44 and Mahoosuc Kids Association by which MKA has permission to use MSAD # 44 facilities, all participants in the MKA programs including the Summer Adventure Program must follow the MSAD # 44 Code of Conduct, a copy of which is available upon request.

If your child gets sick during MKA, we will call you to pick your child up within 30 minutes. They will be isolated from the other kids. Please have an emergency contact on call if you cannot be available within 30 minutes.

I have read all provisions of this contract and agree to abide by all terms, conditions and policies as set forth.

Parent/Guardian Signature

Date

OFFICE USE ONLY

Date received _____ Date entered _____ Forms received: _____ Sign up _____ FT/Swim _____ enrollment

MAHOOSUC KIDS

Summer Camper Behavior Agreement

Please discuss the following expectations with your student and help them sign our contract in agreement with our behavior policy. We encourage you to have an open conversation about bullying with your student and how our words, bodies, and attitudes can have either a positive or harmful impact on our community. We have a zero-tolerance policy for any kind of physical or verbal aggression, intimidation, belittling, or threatening.

I agree that the following expectations are needed in MKA. I will try my best to always uphold the following expectations:

- I will keep my body to myself.
- I will listen when someone is talking.
- I will use my best manners.
- I will respect other people's feelings and property.
- I will always do my best.
- I will keep our program spaces clean and tidy.
- I will respect the environment and leave it better than I found it.
- I will be a helpful group member

If I choose not to follow the expectations, I realize the following consequences:

1st time: Verbal warning

2nd time: Removal from activity for 5 minutes

3rd time: Loss of participation in the activity

4th time: Student conference and incident report to be discussed with family

Upon having to complete 3 incident reports, a meeting will be arranged with executive director (Amy Connell), Summer Camp Program Coordinator (Andrea Howe), and parents to discuss a Summer Camp behavior plan.

I sign this agreement knowing what is expected of me at MKA.

Student Name Printed: _____

Student Signature: _____ Date: _____

Parent Signature: _____

MAHOOSUC KIDS

Do you Give MKA permission to do the following with your child.....	Yes	No
Apply sunscreen as needed (we use Equate Kids Sunscreen)		
Apply bug repellent as needed (no DEET)		
Use Playground Equipment		
Take walking field trips including into the wood trails and around town		
To participate in high risk activities such as swimming, hiking, biking, sports and sprinklers		
To provide over the counter medication such as Children's Tylenol, Children's Motrin, Orajel and Cortisone cream		

I understand that these permissions are in place for the MKA Summer Camp session June 26 through August 18, 2023. I understand that I can revoke my consent at any time by notifying MKA in writing.

Parent/Guardian Signature

Date