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# **Emergency Information Form**

Name of Child	Age
Grade Entering in Sept. 2022 Phy	vsical Limitations, if any:
Describe any special needs your child may have	ve and/or any special services your child receives at school
Medications	
Will any of these medications need to be kep	t or administered at camp? Yes No
Please fill out the Authorization to Administe	er Medication to a Camper (see document after Health Information)
Parent/Guardian	Parent/Guardian
Cell Phone	Cell Phone
Home Phone	Home Phone
Office Phone	Office Phone
Email	
emergency if you cannot be reached. These granted permission to take your child from ca	
Name	
Secondary Phone	
Name	
Secondary Phone	
Name	
Secondary Phone	
5 , 1	ranted for the administration of emergency first aid by the Fitness and erious accident when the child's parents are not available, permission is an appropriate hospital.
Signature of Parent/Guardian	Date
Name of Parent/Guardian (Print)	



### **Health Information Form**

\*Please Note: A physical examination of the camper must have been conducted during the preceding 18 months.\*

\*If your pediatrician provides their own form, we can accept that in place of this form.\*

Name of Child	Birth Date		
Address			
Name of Parent/Guardian			
Name of Parent/Guardian			
**Please provide a copy of the chil **PLEASE INCLUDE CONFIRMATION OF COVID VAC			RDS**
**The remainder of this form needs to be	filled out by your c	hild's physic	ian.**
<ol> <li>Has this child had a complete health assessment this year inc pressure, urinalysis, T.B. test, vision and hearing, and blood</li> </ol>		hysical examina Yes	
2. Is this child able to participate in all physical activities withou		Yes	
If no, please explain:			
3. Has this child received all immunizations appropriate to their	age?	Yes	No
<b>4.</b> Does this child have significant health, emotional, or develop	mental problems that th	e camp should k Yes	
If yes, please explain:			_
5. Are there any known food or drug allergies?		Yes	No
If yes, please explain:			
Doctor's Name	Office Telephone		
Office Address			
City	State		
Doctor's Signature	Date		



# **Permissions and Releases**

Name of Child	
I give permission for my child to go on field trips/special events sponsore Recreation, and Dance during Camp Terrier.	d by the Department of Physical Education,
Parent/Guardian Signature	Date
Parent/Guardian Name (Print)	_
I give permission for photographs and/or video-audio recordings of my ch Terrier and to be used for promotional purposes in future publications.	nild to be taken by staff members during Camp
Parent/Guardian Signature	Date
Parent/Guardian Name (Print)	_
I give permission for the Camp Terrier staff to assist my child as he/she apmy child applies their own sunscreen and lip balm as needed.	oplies sunscreen and lip balm or to ensure that
Parent/Guardian Signature	Date
Parent/Guardian Name (Print)	



## **Drop-off / Pick-up Authorization**

All children 15 years of age and under must be accompanied by an adult within the Fitness and Recreation Center at all times. An authorized adult must accompany their child into and out of the building.

The following people are authorized to either drop-off or pick-up my child from Camp Terrier. Please include yourself on this list! Should there be any changes to this list, please notify the camp staff in writing as soon as possible. These people will be required to present picture identification before any child will be released.

Child's I	Name		
1. Nan	ne	Relationship	Tel
Add	lress		
2. Nan	ne	Relationship	_Tel
Add	lress		
3. Nan	ne	Relationship	_Tel
Add	lress		



### **Camp Terrier Code of Conduct**

Our staff at Boston University Camp Terrier wants to ensure that every camper has an enjoyable and safe experience at camp. In order to do so, every camper must act in an appropriate and respectful manner at all times. Campers are responsible for following these specific guidelines.

### DO:

- 1. Be respectful of others this includes other campers and all staff members.
- 2. Follow directions and listen carefully.
- 3. Use appropriate and polite words.
- 4. Keep your hands and feet to yourself.
- 5. Take turns and share with others.

#### DO NOT:

- 1. Bully or tease other campers Camp Terrier has a zero tolerance policy for bullying.
- 2. Steal or damage anyone else's property.
- 3. Put any other camper or staff member's health and/or safety at risk.
- 4. Exhibit violent, disruptive, or inappropriate behavior.
- 5. Bring any valuable personal items cell phones, iPads, trading cards, etc. are not allowed at camp.

#### IF A CAMPER FAILS TO FOLLOW THE RULES:

- 1. A counselor will remind the camper to be respectful of the guidelines that are in place.
- 2. If the camper continues to act inappropriately, their counselor will discuss the behavioral issues with the Assistant Camp Director or Camp Director. In addition, the incident(s) will be documented in the daily communication log and discussed with the parent/guardian.
- 3. If the problem persists following a discussion with a parent/guardian, a member of the Senior Camp Staff may find it appropriate to make a phone call and have the camper get picked up early.
- 4. If the camper's behavior puts anyone's safety at risk, the camper's parent/guardian will be immediately notified and expected to pick up their child at that time.

These rules are important to ensure a positive camp environment for all. If any camper has difficulty following these rules, they are subject to removal from camp.

It is the responsibility of the parent/guardian to review and discuss the Camp Terrier Code of Conduct with their child.

I have reviewed the Camp Terrier Code of Conduct with my child. We understand that failure to abide by these rules may result in disciplinary action and/or removal from the camp program.

Parent/Guardian Signature	Date
Parent/Guardian Name (Print)	



### **Paperwork Checklist**

ALL CAN	MP FORMS ARE DUE MO	NDAY, MAY 2, 2022. Completed forms may be submitted via email to: <a href="mailto:bucamps@bu.edu">bucamps@bu.edu</a> .
	☐ Emergence	Information
	☐ Health Info	ormation Form <mark>(must be dated within the last <u><b>18 months</b>)</u></mark>
	Immunizat	ion Records <mark>(must include COVID-19 vaccines)</mark>
	Authorizat	ion to Administer Medication to Camper (if applicable)
	Permission	and Release Form
	☐ Drop-Off/F	Pick-Up Authorization Form
	Camp Terr	ier Code of Conduct
Campe	r Checklist	
	Medication (must be ac	companied by paperwork from the child's physician and Authorization to Administer medication)
	A healthy lunch (glass	pottles are not allowed)
	Two snacks (one for th	e morning & one for the afternoon)
	Properly Fitting Face M	lask (Please Note: Gaiters, bandanas, scarves & masks with exhalation valves are not permitted)
	Refillable Water bottle	
	Socks & sneakers (flip-	lops are not allowed)
	Appropriate athletic cl	othing
	One-piece bathing suit	(Tankinis are not permitted)
	Towel (and a plastic ba	g to store the wet suit/towel)
	Goggles & Swim cap	
	Sunscreen & Hat (for s	un protection when outdoors)
	Shoes with backs for sa	ailing (should be able to get wet)
	Sweatshirt (building ca	n get chilly when campers are wet from swimming)
	•	ure that all of your child's belongings are clearly labeled. Also, please do not send your as they are not allowed to buy food or drinks from vending machines. Please do not allow

This camp must comply with regulations of the Massachusetts Department of Public Health (105 CMR 430.000) and be licensed by the City of Boston Board of Health.

your child to bring any valuables to camp. Thank You.