

PARENTAL AUTHORIZATION

My child has permission to participate in the Lafayette Parks and Recreation Summer Enrichment Program. I understand that he/she is expected to attend on a regular basis and to obey the rules and regulations of the program.

You have my permission to administer first aid or seek medical attention in the event my child is injured or becomes ill and the Summer Enrichment Program personnel is unable to contact me.

PARENTAL CONSENT FOR OFF-PLAYGROUND PARTICIPATION IN RECREATIONAL ACTIVITIES

I hereby request and consent that my child/ward

while a patron on the playground under the jurisdiction of the Lafayette Parks and Recreation Department be permitted to participate in any of the off-playground activities.

I understand that such activities may be conducted in the playground buildings, on public properties, or school premises, or away from the program site and that such activities may be engaged in during playground hours or at other times.

I further understand that the activities are carried out under the direction or sponsorship of recreation leaders employed by the Lafayette Parks and Recreation Department.

I also understand that in traveling from one playground to another, or to the place of the activity, a playground employee will accompany the group.

I also understand that photographs may be taken and used for various camp / Lafayette Parks and Recreations Department Purposes.

The consent shall remain in force until revoked by me by written notice to the Lafayette Parks and Recreation Department

SIGNATURE OF PARENT / GUARDIAN

DATE

LAFAYETTE CONSOLIDATED GOVERNMENT -- PARKS & RECREATION DEPARTMENT THERAPEUTIC RECREATION SUMMER PROGRAM PARTICIPANT APPLICATION

NAME: _____ SEX: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
AGE: _____ DOB: _____ WEIGHT: _____ HEIGHT: _____
SCHOOL: _____ T-SHIRT SIZE: (adult) _____

PARENT/GUARDIAN/AGENCY INFORMATION

NAME: _____ PHONE: _____ (DAY) _____ (CELL) _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
EMAIL ADDRESS: _____

PARTICIPANTS PERSONAL INFORMATION

DIAGNOSIS/DISABILITY: _____
DO YOU REQUIRE ANY TYPE OF SPECIAL CARE? _____ YES _____ NO
IF, SO PLEASE SPECIFY CARE NEEDED: _____

IS A SPECIAL DIET REQUIRED? _____ YES _____ NO **** IF YES, PROVIDE DOCTOR'S ORDER.**

PERSONAL CARE ATTENDANTS NAME:(if attending) _____
PCA'S AGENCY NAME: _____ AGENCY PHONE _____

IN CASE OF EMERGENCY, CONTACT:

NAME: _____ PHONE: _____

HEALTH HISTORY

CHRONIC/RECURRING ILLNESSES: ALLERGIES:

EAR INFECTION _____ HAY FEVER _____
HEART DISEASE _____ INSECT STINGS _____
ASTHMA _____ POISON IVY, OAK, ETC. _____
CONVULSIONS _____ FOODS (NAME) _____
DIABETES _____
BEHAVIOR _____
OTHER (SPECIFY) _____

PLEASE LIST ALL OPERATIONS AND/OR SERIOUS INJURIES, INCLUDING DATES: _____

SPECIAL MEDICAL AND/OR DIETARY REGIMENT TO BE FOLLOWED: _____

SPECIAL BEHAVIORAL TECHNIQUES APPROPRIATE TO CAMPER: _____

LIST MEDICATION DOSAGE AND TIMES (TO BE ADMINISTERED AT CAMP): _____

PARENT/GUARDIAN/AGENCY SIGNATURE: _____ DATE: _____

CAMPER WILL ATTEND:

7:15 - 9:00 (\$75) _____
9:00 - 4:00 (\$250) _____
4:00 - 5:30 (\$75) _____
LATE FEE (\$15) _____
TOTAL _____

LAFAYETTE PARKS AND RECREATION THERAPEUTIC RECREATION SUMMER PROGRAM

PROGRAM FEES

PROGRAM . . . 9:00 AM - 4:00 PM . . . \$250.00
FEE AFTER MAY 12 . . . \$265.00

ADDITIONAL FEES IF APPLICABLE

EARLY DROP-OFF . . . 7:15 AM - 9:00 AM . . . \$75.00
LATE PICK-UP . . . 4:00 PM - 5:30 PM . . . \$75.00

MAIL-IN REGISTRATIONS Former Campers Only

ALL APPLICATIONS MUST BE FILLED OUT COMPLETELY,
OR APPLICATIONS WILL BE RETURNED

CHECK OR MONEY ORDERS

MADE PAYABLE TO:
LAFAYETTE PARKS & RECREATION DEPARTMENT

T-SHIRTS AND RECEIPTS WILL BE ISSUED AT CAMP

**** NO ON SITE REGISTRATION FIRST DAY OF CAMP ****

REFUND POLICY

LAFAYETTE SPECIAL POPULATION SUMMER CAMP

A full refund of program fees will be made if the request is received **IN WRITING** by 5:00 p.m. June 10, 2016.

A 50% refund will be made if the request is received **IN WRITING** by 5:00 p.m. -- June 17, 2016. Late fee not refundable.

No refund will be given after June 17, 2016.

FOR MORE INFORMATION, PLEASE CONTACT

PARKS & RECREATION -- 337-291-8362
LAFAYETTE CONSOLIDATED GOVERNMENT
PARKS & RECREATION DEPARTMENT
CAMP WE CAN DO
P.O. BOX 52113
LAFAYETTE, LA 70505



PARKS & RECREATION DEPARTMENT THERAPEUTIC SUMMER PROGRAM

CAMP WE CAN DO

Heymann Recreational Center

Across from Paul Breaux Middle School

1500 S. Orange Street
Lafayette, LA 70501
337-291-8381

CAMP DATES

June 3 - July 26, 2016
MONDAY - FRIDAY
9:00 AM - 4:00 PM

HOLIDAY BREAK

June 29 - July 5, 2016

EXTENDED CARE

EARLY DROP-OFF 7:15 AM - 9:00 AM
LATE PICK UP 4:00 PM - 5:30 PM

REGISTRATION FEE

Girard Park Administrative Offices
May 3-5 , May 10-12
3:00 PM - 6:00 PM
TUESDAY - THURSDAY

EARLY MAIL-IN REGISTRATION

Former Campers Only
April 18 - 28, 2016
"Camp We Can Do"
P.O. Box 52113
Lafayette, LA 70505

EARLY REGISTRATION BY APPOINTMENT

April 18 - April 22, 2016
Call 337-291-8127

ELIGIBILITY

7-25 years old with a mental, emotional,
or physical disability. Must toilet independently

This camp is for people with special needs. All disabilities are welcome. We have a highly motivated, experienced, and trained staff. We believe there are no limits to what can be accomplished. Please call 337-291-8381 or 337-291-8127 if you have any questions.

Personal care attendants are required to attend with campers, if the camper cannot function independently.

SPONSORED BY

LAFAYETTE CONSOLIDATED GOVERNMENT
PARKS & RECREATION DEPARTMENT

MAYOR PRESIDENT-- JOEL ROBIDEAUX

CAO -- LOWELL DUHON

DIRECTOR -- GERALD R. BOUDREAUX

The Mission of Lafayette Consolidated Government is to enhance the quality of life in our community by providing high quality, cost-effective services that meet the needs and expectations of the public.

CAMP WE CAN DO
Heymann Recreation Center
1500 S. Orange St
Lafayette, La 70501
291-8381

On behalf of Lafayette Recreation and Parks, Ms. Denise Ferguson, Therapeutic Recreation Supervisor/Camp Director, and the camp staff, would like to welcome everyone to our camp. We are looking forward to a fun summer. In order to have the camp run as smoothly as possible, there are certain procedures that need to be followed. Camp We Can Do staff appreciates your cooperation in making this happen.

1. Parents must check each child in daily, & sign out when picking the camper up.
2. Campers attending camp 9:00-4:00 **may not enter before 9:00, staff is not on duty** before that time.
3. Camp notices/communications will be posted above the sign in board as needed. Please read notices when posted.
4. **Everyone** must dress appropriately. No sagging, no revealing clothing. Sneakers or closed toe shoes please
5. All campers must go to lunch and receive a tray.
6. Campers with special dietary needs must provide a Doctor's order to the camp director.
7. Any medication to be administered at camp **MUST** be in a prescription bottle, well labeled with dosing instructions and times.
8. **Any item brought to camp must be well marked with camper's name.** Please limit what is brought, as we are not responsible for it
9. Electronic devices are not allowed during camp hours (9:00-4:00), Allowed during quiet time, & early & late pickup. **This includes phones.**
10. Campers should bring a snack daily in an insulated bag with camper's name in a prominent location.
11. Quiet time will take place after lunch daily; campers may lie down at this time. Campers may bring something to lie on/cover themselves. All blankets, etc must be taken home weekly and washed.
12. All campers will treat each other with respect.
13. Field trips **may** start the 2nd week of camp.
14. Campers **must wear camp T-shirt** on all field trips (except swimming).
15. Field trip money must be **paid in advance, according to the appropriate deadline**, cash only please.
16. **All swim suits must be appropriate/not revealing.**
17. Campers may wear flip-flops on swim days ONLY. All swimming items, (swim suit, towel, etc) **must be labeled** & put in backpack or strong plastic bag.
18. Camp is **CLOSED** for July 4th holiday June 29-July 5, 2016
19. **Parents must be on time each day to pick up campers. Parents picking up campers late will be assessed a late penalty as follows**
 1-15minutes.....\$15
 16-30minutes.....\$30
 31-45minutes.....\$45
 46-60minutes.....\$60
 \$1 per additional minute over 60 minutes.

I understand these expectations & my camper & I will abide by them.

Parent/Guardian Signature

Date