



Summer Camp Program Welcome Packet Summer 2024

Please fill out this packet and return to your
after school program director, or scan and email to:

Parkersbest@icloud.com

*Please use one packet per child.

Child's Full Name: _____

Martial Arts Uniform

Get ready for your child to start setting and achieving some amazing goals in our summer camp! Our Martial Arts program requires that all students purchase a Parker's Best Summer Camp and After School uniform. This custom uniform is normally sold for \$99 each, but as a member of our summer camp, you receive the special discounted price of only \$40! **Awesome!**

Your child's uniform package includes: Custom top, Pants, and White Belt!
(* Uniforms from other martial arts schools are not allowed to be worn in our program.)

Child's Size (height and weight): _____
(Our staff will help determine uniform size)

Summer Camp Program T-Shirts

Kids love showing their *Otomi Martial Arts | Parker's BEST after school and summer camp* team spirit by wearing their exclusive Summer Camp T-shirts! All summer campers are required to have 1 PBSC shirt. These shirts are on sale today only for \$15 each! **Shirts are required for participation of field trips.*

Child's Size and Number of Shirts:

Child Small # _____

Child Medium # _____

Child Large # _____

Small Adult # _____

Medium Adult # _____

Large Adult # _____

X-Large Adult # _____

I give *Otomi Martial Arts | Parker's BEST after school and summer camp* permission to apply this purchase to my method of payment of file.

Parent's Signature

Date

Awesome Summer Camp Memberships

Check one box below to choose the BEST Membership for your family!
Registration fee is only \$65(before 11.25.23) per child!

VIP Summer Camp Membership: (SAVE over \$2000 right now!)

Summer Camp is normally \$397 for the entire summer, but this membership is perfect for families that want to make one payment today of \$997 and save over \$2000 right now! This membership includes all 10 weeks of summer camp and is non-refundable or transferable. Special Bonus: as a Summer Camp member, you will receive 30-50% discount on our school year camps when your child's school is closed!

Full Summer Membership: Most popular! Only \$325 per week!

Parents love this membership! This is our most common membership and it is perfect for families that want to receive a HUGE discount. This membership includes all 10 weeks of summer camp and is non-refundable or transferable. Summer Camp is normally \$397 per week, but when you join today, your child's tuition is only \$325 per week and you SAVE \$72 per week! Special Bonus:

Weekly Membership: Only \$350 per week!

This membership is perfect for families that want to attend our exciting summer camp on a week-to-week basis. This membership may be cancelled at anytime with a 14-day notice.

Please check the boxes of which summer camp weeks your child needs: ☺

- | | |
|---|---|
| <input type="checkbox"/> Week 1: May 27-May 31(Closed May 27) | <input type="checkbox"/> Week 6: July 01- July 05 (Closed July 4) |
| <input type="checkbox"/> Week 2: June 03- June 07 | <input type="checkbox"/> Week 7: July 08-12 |
| <input type="checkbox"/> Week 3: June 10-14 | <input type="checkbox"/> Week 8: July 15-19 |
| <input type="checkbox"/> Week 4: June 17-21 | <input type="checkbox"/> Week 9: July 22-26 |
| <input type="checkbox"/> Week 5: June 24-28. | <input type="checkbox"/> Week 10: July 29 - August 02 |

Parent's Signature

Date

Payment Authorization

Parent's Name: _____

Child's Name: _____

Billing Address: (Please print neatly)

City: _____

State: _____

Zip Code: _____

Type of Credit Card: (Please Circle One Below)

Visa MasterCard Amex Discover Card

Name on Card: _____

Card Number: _____

Expiration Date: _____ **CVV#:** _____

I authorize *Otomi Martial Arts (DBA Parker's BEST)* to use this method of payment to collect all tuition payments and other future purchases that I choose make for my child.

Parent's Signature

Date

The Otomi Martial Arts (Parker's BEST) Summer Camp Permission Slip and Terms and Conditions

Thank you for registering your child in the Otomi Martial Arts (Parker's BEST) Summer Camp! We are committed to making your experience with Otomi Martial Arts (Parker's BEST) amazing! Please read the terms and conditions below and then sign and date the bottom.

Child(ren)'s name(s): _____

By signing this agreement, I am enrolling my child in the Parker's Best Summer Camp and After School. I hereby give permission to Parker's Best Summer Camp and After School for my child participate in a variety of outdoor and indoor sports activities, jumping in an inflatable bounce house, transportation to and from field trips on Parker's Best Summer Camp and After School vehicles, and other physical activities that may not be listed here. I understand that there are certain risks of injury inherent to my child in the practice and play of the physical activities that are offered by Parker's Best Summer Camp and After School, as well as in traveling on Parker's Best Summer Camp and After School vehicles and other related activities incidental to my child's participation. I am fully willing to assume these risks for my child. I hereby certify that my child is fully capable of participating in the Parker's Best Summer Camp and After School and that he/she is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as included in writing with this waiver. In addition to giving full consent for my child's participation, I do hereby waive, release, hold harmless, and covenant not to sue Parker's Best Summer Camp and After School, it's officers, coaches, employees, sponsors, supervisors, and representatives for any injury or loss that may be suffered by my child during the participation in the activities included in the Parker's Best Summer Camp and After School and or camps, whether the result of negligence or any other cause. By enrolling in the Parker's Best Summer Camp and After School, or any of the Parker's Best Summer Camp and After School sports classes; I acknowledge and agree to these policies by signing and dating this agreement below. I understand that all "VIP" single payment memberships non-refundable or transferable. If I choose to cancel my "Entire Summer Camp" membership, I agree to pay the difference in tuition for "Entire Summer" and "Weekly Rate"; \$25 per week difference. If I choose to cancel my "weekly summer camp" membership, I must give Parker's Best Summer Camp and After School a 7-day notice before the next billing cycle. A cancellation form supplied by a Parker's Best Summer Camp and After School Director must be completed to give official notice. I understand that no refunds or credits will be issued if my child misses any days of the Parker's Best Summer Camp and After School. Parker's Best Summer Camp and After School only accepts credit card payments. Cash, checks, or money orders are not accepted. If my child is sick, he/she will not be allowed to return to Parker's Best Summer Camp and After School until 24 hours have passed after my child's last symptoms. Tuition is collected by Parker's Best Summer Camp and After School 7 days prior to each weekly session. I understand that if my tuition is late due to an expired or invalid credit card, or insufficient funds, the Parker's Best Summer Camp and After School billing system will automatically charge my account a \$15 late fee. I understand that I must pick up my child by 6pm each day. At 6:05pm my account will automatically be charged \$1 per minute that I am late. On certain camp days, field trips are optional and will cost \$15 per trip. My child is required to wear an approved Parker's Best Summer Camp and After School T-shirt on each field trip. I will have the opportunity to register for field trips in person by signing the registration form at the welcome desk in the Parker's Best Summer Camp and After School lobby. Refunds or credits are not issued for missed field trips. I understand and give permission for my child to be photographed and video recorded for marketing purposes. I also agree that no monetary compensation will be given for the use of these photos or videos and they are the property of Parker's Best Summer Camp and After School. I understand that my child is required to bring a snack each day to the Summer Camp. Parker's Best Summer Camp and After School offers snacks and drinks for sale for \$1 each that my child may purchase for cash. During camp, my child is required to bring a bagged lunch and two snacks per day. My child is also required to bring a bottle of water to be refilled throughout the day. If my child does not bring a bottle, one will be provided for \$1 that will be charged to my account. To ensure the safety and security of my child, I understand that any approved adult on my emergency contact form will need to provide a proper state or government issued ID in the event that they have to pick up my child from Parker's Best Summer Camp and After School.

Parent's Signature

Date

Parker's Best After School & Summer Camp
Emergency Contacts and Medical History

Child's name: _____

Child's age: _____ Date of Birth: _____

Parent/Guardian(s) Name: _____

Parent/Guardian(s) Address: _____

Cell Phone(s): _____

Email Address: _____

Parent(s) work phone and address: _____

Are there any special instructions for contacting the parent/guardian (For example, who should be contacted first in an emergency, etc.)

List of approved adults who are allowed to pick up your child with a valid state or government ID: (Include their phone numbers and relationship to child.)

Name 1 (First and Last): _____

Address: _____

Phone Number: _____

Is this person also an emergency contact or just an authorized pick up? (answer YES or NO): _____

Name 2 (First and Last): _____

Address: _____

Phone Number: _____

Is this person also an emergency contact or just an authorized pick up? (answer YES or NO): _____

Name 3 (First and Last): _____

Address: _____

Phone Number: _____

Is this person also an emergency contact or just an authorized pick up? (answer YES or NO): _____

Name, address and phone number for: Health Care Provider

Name, address and phone number for: Dentist

Name, address and phone number for preferred Hospital in case of emergency:

Does your child have any allergies? If none, write "NONE".

Does your child have any medical conditions that we should know about? If none, write "NONE".

****A copy of your child's immunization records or exemption must be submitted prior to their first day of camp.**

Check here if you authorize our Child Care Health Consultant to retrieve your child's immunization records from the state database.

Authorization for emergency medical care and transportation: In the event of an emergency, I hereby give my permission for child care staff to access emergency medical services for my child, including transport to the nearest health care facility, to receive emergency medical or surgical care and treatment. It is understood that a conscientious effort will be made to locate me, and I accept the expense of care and transport.

Parent's Signature

Date

Topical Preparations (Preventative Permission Form)

Child' Name: _____ Parent/Guardian Name: _____

I understand that I must provide the topical preparation in the original container labeled with my child's name and that no topical preparations will be applied to broken skin or if a skin reaction has been observed. It is my responsibility to check the ingredients to make sure my child is not allergic to it. Any skin reaction observed by staff will be reported. Promptly to the parent/guardian.

Parent/Guardian Signature: _____ Date: _____

Sunscreen

I give permission for the staff at Otomi Martial Arts LLC (DBA Parker's Best) to assist with applying or apply sunscreen to my child's exposed skin including face, tops of ears, bare shoulders, arms, legs, and feet 15 to 30 minutes before outdoor activities. It is my responsibility to provide sunscreen with a minimum 15SPF.

In the event that my child does not have sunscreen with them, the school may apply "Banana Boat Sport Ultra SPF 50" to my child.

My child may NOT use any sunscreen other than the one that she or he brings.

Parent/Guardian Signature: _____ Date: _____

Media and Internet Usage Policy

At Parker's Best we prioritize physical activity. Children do not have access to the internet or any devices capable of browsing the internet. We do offer a rotation known as "kid cave" during which children will have the opportunity to play on a video game device or watch a movie. Kid cave is also a time for creative and free play in the classroom with Legos, crafts, barbies, hot wheels, etc. so screen time is not the only option.

Video game participation is closely monitored by the coach and rules and expectations are the same as for all other activities. Students are expected to share, follow rules set by their coach and treat each other kindly. No bullying or foul language is accepted.

We love to take photos of our campers having a blast! Please let us know if you do not wish for your child's image to be posted on social media or marketing.

MEDIA USE PERMISSION FORM*

Child's Name: _____ Age: _____

I do / do not give permission for my child to use or view the following: (write YES or NO)

Television Viewing: _____

Video Viewing: _____

Music: _____

Video Games: _____

Computer Use: _____

Other: _____

My child may engage in the approved activities for up to ____ total hours per day.

- Regulations for facilities caring for children require that media use is permitted only with the written approval of a child's parent or guardian, including appropriate time limits.
- These activities must not contain violence, profanity, nudity, sexual or inappropriate content.
- All children must be provided with an alternative activity once the child/children lose interest in the media activity.

Signature of Parent or Guardian: _____ Date: _____