



Zing Zumm Camp Participant Registration and Release Form

Registration and Refunds:

Registration and payment for Zing Zumm Camp must be completed and submitted online at www.zingzumm.org. Full payment is required at the time of registration to reserve the child's space. Due to limited space and pre-planning, **refunds will not be given**. Participants may only register for full weeks. Whether or not the child attends all days, there will be no proration of fees for any days a child participant cannot attend. Registration is open for all members and non-members.

Age Guidelines:

Zing Zumm Camp is for children ages 5-10 years old and no exceptions will be made. Children **MUST** be potty-trained and able to use the restroom without any assistance.

Location:

Zing Zumm summer camps are located at Montessori Children's School, 714 Bates Street Jacksonville, NC 28540.

Hours of Operation:

Zing Zumm Camp hours are Monday-Friday 9am-4pm, with drop off no earlier than 8:30am and pickup no later than 4:01pm. If attention is needed during the day, please call Taylor Stevenson (Camp Staff Leader) at (910)-518-0072 or Samantha Plocica (Zing Zumm Executive Director) at (910)-375-9494.

Pick up/Drop Off Procedure:

Due to limited parking, drop off/pick up will occur at the roundabout in the front of the school where parents will pull up and a Zing Zumm staff member will greet family, parent will sign in/out child and child will be led into camp/to car by staff member. No Exceptions will be made. **DO NOT BLOCK THE DRIVEWAY OF ANY NEARBY RESIDENCES**. Parent/guardian must also provide the name of the adult picking the child up that day and photo identification will be checked prior to the child being released. **CHILDREN WILL NOT BE RELEASED TO ANY PERSON NOT ON THE PICKUP FORM. NO EXCEPTIONS.**

Late Drop Off Policy:

Camp Staff will remain outside at the roundabout for drop off until 9:05 am - no child will be admitted late to camp without PRIOR approval from camp staff.

Late Pick-Up Policy:

There will be a late-fee assessed for children who are picked up after 4:01 pm. The late fee is \$1.00 for each minute past 4:01 pm. (if you are already in line for pick-up past this time, late pick-up charges will not apply). Repeated late pick-ups may result in the removal of the participant from the program, with no refund for pre-paid programs.

Medical Needs/Allergies:

Zing Zumm Camp is not permitted to administer medication to program participants. In the event of a medical emergency, Zing Zumm Camp will administer first aid, CPR, and rescue in the best interest of the child. Parents will be contacted if care is administered. Allergy medications may be administered if directed in writing by the child's parent/guardian. Parents must alert staff to any and all known allergies as well as any medical conditions which require special dietary needs or exceptions (ie Diabetes, Crohn's Disease, etc.).

Special Circumstances:

Parents and Guardians are required to inform the Zing Zumm Camp Staff in writing of any special circumstances which may affect the child's ability to participate fully and within the guidelines of acceptable behavior, including, but not limited to, any serious behavioral problems or special circumstances regarding psychological, medical, or physical conditions. Once the notice is submitted, a conference will be scheduled with the parent/guardian to discuss the special circumstances and whether Zing Zumm can accommodate.

Dress Code:

Children should dress appropriately for the activities scheduled. Zing Zumm recommends "play clothes" and some sort of athletic footwear. **We do not recommend wearing any clothes that would be devastating to have ruined via staining or rough play.**

Personal Belongings:

Please put the child's name on any items that will be left (book bag, snack bag, etc.). Children should NOT bring toys, cellphones, electronic devices, jewelry, money, or any possession of value with them to day camp. **Children will not be permitted to use any electronic devices during camp.** Zing Zumm is not responsible for any lost, unapproved items.

Behavior Management/Discipline Policy:

Zing Zumm Camps are educational programs and all participants are expected to participate in programming to the best of their ability. Camps do not include free-play in the museum. If your child is not interested in the educational activities of camp we recommend that you not sign them up. Refunds will not be given due to lack of interest in the programs.

Zing Zumm Camp will create a fun and safe environment for participants in the program. Praise and positive reinforcement are used as effective methods of behavior management. Children who do not respond to these methods or who are destructive to others or to property will be approached in a professional, positive, and timely manner to correct the behavior. The following procedures will be followed for behavioral management. All incident reports will be discussed privately with parents/guardians and a copy of each report will be kept on file at Zing Zumm.

1. In the event a child's behavior is a repeated behavior and cannot be corrected by Zing Zumm Staff with a verbal warning or other form of behavior modification, a first incident report will be written to document and correct behavior. A copy of the report will be given to the parent/guardian the same day as the incident.
2. A second incident report will be filed if the behavior is repeated or new behavior incidents occur. This report will follow the same process as the first, but the child may be removed from that day's program as well as the rest of the week's programs and no refund will be provided for the suspended days. A copy of the report will be given to the parent/guardian the same day as the second incident.
3. We have a ZERO tolerance policy for physical violence. If your child physically assaults another child or camp staff for any reason, your child will be removed from camp for the remainder of the week and no refunds will be given.

Note: Immediate dismissal from the program can occur at any time given severe circumstances. Refunds for missed days due to a discipline dismissal will not be granted.

Nutrition/Snacks:

Campers are **REQUIRED** to provide their own lunch if you have not ordered one through Zing Zumm. Please bring lunches in a non-glass container and must be clearly labeled with the child's name. Please do not send gum. Parents must alert staff to any and all known allergies as well as any medical conditions which require special dietary needs or exceptions (ie Diabetes, Crohn's Disease, etc.). Please send a labeled water bottle for your child to stay hydrated throughout the day.

Waiver and Informed Consent:

If you choose not to sign this consent form, your child may NOT attend camp.

I, as parent/guardian of _____ (“Child”), hereby assume all risks and hazards incidental to the conduct of the activities at Children’s Museum of Jacksonville, Inc. dba Zing Zumm. My child is fit for the program(s) in which I have enrolled him/her. I HEREBY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS RELEASEES FROM EVERY CLAIM AND ANY LIABILITY THAT I OR MY CHILD MAY ALLEGE AGAINST RELEASEES (including reasonable legal fees and costs) AS A DIRECT OR INDIRECT RESULT OF INJURY OR DEATH TO ME OR MY CHILD BECAUSE OF MY CHILD’S PARTICIPATION IN CHILDREN’S MUSEUMS OF JACKSONVILLE’S DAY CAMP PROGRAM, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERS TO THE MAXIMUM EXTENT PERMITTED BY LAW. I PROMISE NOT TO SUE RELEASEES ON MY BEHALF OR ON BEHALF OF MY CHILD REGARDING ANY CLAIM ARISING FROM OR RELATED TO MY CHILD’S PARTICIPATION IN ANY CHILDREN’S MUSEUM OF JACKSONVILLE, INC.’S PROGRAMS.

I ACKNOWLEDGE THAT, BY SIGNING THIS DOCUMENT, I AM RELEASING CHILDREN’S MUSEUM OF JACKSONVILLE, INC. AND ITS REPRESENTATIVES, AGENTS, EMPLOYEES, VOLUNTEERS, MEMBERS, SPONSORS, PROMOTERS, AND AFFILIATES (COLLECTIVELY “RELEASEES”) FROM LIABILITY, AND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. THIS SIGN UP AND RELEASE FORM IS A CONTRACT WITH LEGAL AND BINDING CONSEQUENCES AND IT APPLIES TO ALL ACTIVITIES IN WHICH MY CHILD ENGAGES DURING THE DAY CAMP AT CHILDREN’S MUSEUM OF JACKSONVILLE, INC. REGARDLESS OF WHETHER SUCH ACTIVITY IS A PART OF A FORMAL PROGRAM. I HAVE READ THIS RELEASE CAREFULLY BEFORE SIGNING. I UNDERSTAND WHAT THIS RELEASE MEANS AND WHAT I AM AGREEING TO BY SIGNING.

I understand that no insurance coverage for participants in these activities is provided by Children’s Museum of Jacksonville, Inc. By registering for this program, I understand and agree that if a portion of the program is unable to be completed due to unforeseen circumstances under responsibility of Children’s Museum of Jacksonville, Inc., I will receive a prorated credit on my account for the uncompleted portion of the program. I also understand that no refunds or proration will be given for any other reason.

Signature: _____

Date: _____

Printed Name: _____

CONSENT TO USE PHOTOGRAPHS AND VIDEOS

I _____ (name) give permission for photos/videos of me (or my child) taken at _Children's Museum of Jacksonville 625 New Bridge Street Jacksonville, NC 28540(location) to be used by _Children's Museum of Jacksonville, Inc. dba Zing Zumm for educational materials, exhibits, websites, and publications. I wave any rights of compensation or ownership.

Do you agree to participate? Yes _____ No _____

Name of Participant (please print):

Signature of Participant (n/a if participant is a minor):

Name of Parent/Guardian if a minor (please Print):

Parent/Guardian's Signature:

Signature of person that is testifying: _____

Date: _____

****If you choose not to sign this consent, you will receive no pictures from camp.**

Participant Information

Child's Full Name:

Nickname:

Sex: M F

Participant Date of Birth:

Age During Camp:

Parent/Guardian Name:

Phone Number:

Is this child allergic to anything or have any medical conditions? If yes, please explain.

Is this child currently taking medication that we should be aware of? If yes, please explain.

Does this child have special needs? If yes, please explain?

*programs are provided for people of all abilities. If there is a need for reasonable modification, please YES above and speak to the Director prior to the start of camp. Each compliance will be assessed in compliance with the ADA.

Emergency Contact Information

*please provide another adult contact information in case of emergency

Name:

Phone Number:

Relationship (to child):

Name/Relationship of Person(s) allowed to pick up this child:

1.

2.