

Child's Name: Last: \_\_\_\_\_ First: \_\_\_\_\_

**Check all camps that apply:**

- |   |  |   |  |  |                                 |                                    |
|---|--|---|--|--|---------------------------------|------------------------------------|
| <input type="checkbox"/> Camp Goodtimes on the Road             | <input type="checkbox"/> Week 1                | <input type="checkbox"/> Week 2                   | <input type="checkbox"/> Week 3            | <input type="checkbox"/> Week 4            | <input type="checkbox"/> Week 5 | <input type="checkbox"/> All Weeks |
| <input type="checkbox"/> L.A.R.K. (Lake Anne Art Rave for Kids) | <input type="checkbox"/> Week 1 (6/25-7/1)     | <input type="checkbox"/> Week 2 (7/9-7/20)        | <input type="checkbox"/> Week 3 (7/23-8/3) | <input type="checkbox"/> Week 4 (8/6-8/17) |                                 |                                    |
| <input type="checkbox"/> Road Rulz                              | <input type="checkbox"/> Week 1                | <input type="checkbox"/> Week 2                   | <input type="checkbox"/> Week 3            | <input type="checkbox"/> Week 4            | <input type="checkbox"/> Week 5 | <input type="checkbox"/> All Weeks |
| <input type="checkbox"/> Winter Break Fun Zone                  | <input type="checkbox"/> Spring Into Road Rulz | <input type="checkbox"/> Spring Break Travel Club | <input type="checkbox"/> Spring Into LARK  | <input type="checkbox"/> YAT               |                                 |                                    |
| <input type="checkbox"/> Speciality Camp (Name): _____          |  |   |  |  |                                 |                                    |



# RESTON COMMUNITY CENTER

## CAMP PROGRAM GUIDELINES & REQUIREMENTS



### CODE OF CONDUCT FOR ALL PARTICIPANTS IN RCC SUMMER PROGRAMS

Signatures of the participant and the parent are required affirming both have read and agree to abide by all elements of the Code of Conduct below and the RCC's General Code of Conduct posted in our buildings.

#### PARENT REQUIREMENTS

- Provide all required documentation and forms by the deadline or the space for your child/ren will be forfeited.
- Sign-in and sign-out child/ren per age guidelines and program requirements on time and with any required identification. Penalty fees will be applied for late pickups and participants may miss key program elements such as field trips if they are not brought to program sites on time.
- Alert the program director if participant(s) will not be attending prior to the start time of the day's program activities.
- Support the behavior requirements of the Code of Conduct.
- Pick up or arrange for authorized person(s) to pick up a sick participant as soon as possible if the participant has become ill.
- Pick up or arrange for authorized person(s) to pick up a participant as soon as possible if the participant's conduct is disrupting activities or he/she has been dismissed from the program.
- Pick up or arrange for an authorized person to pick up participant on time each day.

#### PARTICIPANT REQUIREMENTS

- At all times, participants in RCC programs must abide by the RCC's General Code of Conduct, and must treat all staff, participants and all others in program areas, with respect.
- Participants will treat others as they would want to be treated.
- Participants will follow instructions given by program leaders.
- Participants will maintain personal hygiene, wear safe and suitable clothing, and remain with their program group.
- For safety reasons, RCC requests that participants wear close-toed shoes, no "Heelys," crocs, or similar type of shoes, and no jewelry while participating in RCC programs.
- In order to guard against loss, participants must not bring valuables such as iPods, gaming systems or other expensive items. RCC is not responsible for personal property of participants.
- Eating and drinking will be permitted only in designated areas.
- Due to individual allergy sensitivities, participants are prohibited from sharing food and drink under any circumstances.
- Participants will not borrow money from other participants; should the need arise, staff will make appropriate arrangements.

#### GROUND FOR DISMISSAL FROM RCC PROGRAMS

- Possession of any item used as a weapon, and/or physical attack upon another person.
- Harassment, verbally abusive language or similarly aggressive behavior toward any participant, staff member, or member of the general public. This includes inappropriate and/or unwanted touching.
- Vandalism, destruction of property or proven theft by any participant.
- Possession of any alcohol, tobacco, pharmaceutical or other unauthorized drug or substance by a participant.
- Repeated violations of participant or parent requirements above.
- Signatures of both the parent and participant below signify agreement to abide by these requirements.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

#### BY SIGNING THE RCC REGISTRATION FORM, PARENTS HAVE AGREED TO THE FOLLOWING: DATE STAMP

I recognize that there are some inherent risks to participating in certain programs/activities and, accordingly, agree to hold the Center, the governing Board of the Center, the Fairfax County Board of Supervisors, the employees of the Center and its volunteers, harmless from any and all liability for property damage, harm or bodily injury, which may result from my participation. I acknowledge that I have been advised to carry my own insurance while participating in this program. In registering a child, I represent that I am the parent/legal guardian of the child being enrolled. I also recognize that the Reston Community Center may take photographs and/or videotapes of its programs for either archival or public relations purposes. My signature releases the Reston Community Center from any and all liability and/or obligation to me and/or my child/ren for the use of such documentation.

Child's Name: Last: \_\_\_\_\_ First: \_\_\_\_\_

**Check all camps that apply:**

- |   |  |   |  |  |                                 |                                    |
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| <input type="checkbox"/> Speciality Camp (Name): _____          |  |   |  |  |                                 |                                    |



# RESTON COMMUNITY CENTER

## EMERGENCY CONTACT FORM



**NOTICE: THIS FORM MUST BE COMPLETED EACH YEAR IN FULL AND SIGNED**

**PLEASE PRINT CAMPER'S NAME** \_\_\_\_\_

Home Address: \_\_\_\_\_

Street/Apt. # \_\_\_\_\_

Town/City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Birthdate: \_\_\_\_\_ Sex: ☐ M ☐ F Age: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

**EMERGENCY INFORMATION: Please give two contact names in the event that parents cannot be reached.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_

**ADDITIONAL QUESTIONS**

☐ Yes ☐ No ☐ Does your child have any allergies? If yes, please specify: \_\_\_\_\_

What should be done if your child comes into contact with an allergen? Please attach instructions in a letter.

☐ Yes ☐ No Does your child require any special accommodations? If so, please attach in a letter.

☐ Yes ☐ No Does your child take medications? If yes, you must submit the Medication Authorization Form.

Child's Swimming Level: ☐ Non-Swimmer ☐ Beginner ☐ Experienced Does your child know how to ride a bike? ☐ Yes ☐ No

What grade will your child enter in September? \_\_\_\_\_

**MEDICAL TREATMENT AUTHORIZATION**

Parent's/Guardian's Authorization: The health form as submitted is correct as far as I know and the participant has permission to engage in all camp activities. In the event my child becomes ill during camp, I will pick up my child immediately. In the event I cannot be reached immediately during an emergency, I give permission to the physician selected by the Reston Community Center to obtain necessary medical treatment (e.g. hospitalize, order injections and/or anesthesia, order surgery for the participant) if needed, except as noted in the exceptions line below.\* I understand that I will be responsible for any and all medical expenses incurred on behalf of the participant. In the case of an emergency, the Reston Community Center will use the closest available emergency medical facility. \*If parent or guardian has an objection to seeking emergency medical care, a statement to this effect must be noted in the exceptions line below and the reason for the objection clearly stated.

Medical Exceptions: \_\_\_\_\_

Child's Name: Last: \_\_\_\_\_ First: \_\_\_\_\_

**Check all camps that apply:**

- |   |  |   |  |  |                                 |                                    |
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## RESTON COMMUNITY CENTER MEDICATION AUTHORIZATION



For outdoor programs please be sure your child/ren have applied sunscreen prior to arrival.

**Notice : This form must be completed for prescription and non-prescription medications. Medication, including over the counter medication, will be given to a child only with a parent's or guardian's completed written consent.**

**PLEASE PRINT CAMPER'S NAME:** \_\_\_\_\_ **Date:** \_\_\_\_\_

RCC Camp Staff have my permission to administer the following drugs and medications (must be in their original containers): **Medication and/or Prescription Number:** \_\_\_\_\_

**Dosage:** \_\_\_\_\_

Has the camper taken this medication before? If not, the first full dose must be administered at home to ensure that the camper does not have a negative reaction.

**First dose given:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Times to be given** (State the exact time increments or prescriber direction on the container.) \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

**This authorization is effective from:** \_\_\_\_\_ **to:** \_\_\_\_\_

**(Must not exceed 10 days unless otherwise prescribed by child's physician)**

DATE	TIME	MEDICINE/DOSE	STAFF



Fairfax County is committed to nondiscrimination on the basis of disability in all county programs, services and activities. Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a Reston Community Center program, service, or activity, should contact the ADA representative, Pam Leary, as soon as possible but no later than 48 hours before the scheduled event. Please note that accommodations that require staffing and/or transportation alterations may require up to 10 days advance notice. To request a reasonable accommodation, please call 703-476-4500 or 800-828-1120 (TTY).

Child's Name: Last: \_\_\_\_\_ First: \_\_\_\_\_

**Check all camps that apply:**

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## RESTON COMMUNITY CENTER DROP-OFF/PICK-UP INFORMATION FORM



**PLEASE NOTE: THIS FORM IS REQUIRED FOR ALL RCC CAMPS**

The Reston Community Center follows Fairfax County Department of Family Services guidelines for unsupervised children:

7 years and under:	Should not be left alone for any period of time.
8 to 10 years:	Should not be left alone for more than 1 1/2 hours and only during daylight and early evening hours.
11 to 12 years:	May be left alone for up to 3 hours during daylight and early evening hours.
13 to 15 years:	May be left unsupervised during daylight or evening hours, not late at night or after RCC is closed.

**All participants must have the following information completed, initialed and/or signed by a guardian:**

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Will arrive to camp site at \_\_\_\_\_ a.m./p.m. and will depart from camp site at \_\_\_\_\_ a.m./p.m.  
No child may be dropped off prior to 8:00 a.m. unless the program itinerary requires it.

### AUTHORIZATION TO PICK UP CHILD

#### PERSONS AUTHORIZED TO PICK UP:


#### PERSONS NOT AUTHORIZED TO PICK UP:


**Please initial how your child will arrive and depart from Camp (you may select multiple options):**

☐ I understand that children 8 years and older enrolled in camps held at Hunters Woods or Lake Anne, will be under general staff supervision beyond the scheduled hours of the camp program in which they are enrolled.  
\_\_\_\_\_ My child may not arrive or depart with anyone other than myself or authorized escorts.  
My child has permission to use: ☐ Public Transportation ☐ Bicycle ☐ Walking  
**Please Initial:** \_\_\_\_\_ My child has permission to arrive/depart from RCC Programs without an escort (not applicable to those under 8 years of age). I understand that RCC accepts no responsibility for the safe arrival or departure of my child if I elect not to provide an escort.

### PLEASE NOTE

\*RCC does not provide child care and the statement "general staff supervision" does not imply any legal child care certifications and/or child care qualifications on the part of staff members. All RCC staff members have fulfilled a Criminal Background Check as a condition of their employment. RCC staff members observing children in our facilities are performing other duties; children should remain in designated areas and not disturb others. For all participants, it is imperative that parents drop-off and pick-up their child/ren on time. RCC reserves the right to enforce late drop-off or pick-up penalty fees.

## CAMP CAR POOL LIST

Are you interested in being placed on a car pool list? ☐ Yes ☐ No

Parent/Guardian Name: \_\_\_\_\_

Camper Name(s): \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

### CAR POOL DISCLAIMER

This service is provided solely as a referral service for potential carpool partners. Information shared is limited to name, phone, and/or email addresses of possible car pool partners. This service does not assess the suitability of individuals participating in a car pool program nor does it match participants. Participants are solely responsible for determining whether and when it is appropriate to meet with or share personal information with potential car pool partner(s). Participation in a car pool program is an individual decision. It is solely your responsibility to notify your insurance provider of your intent to carry passengers and insure that you are adequately covered to protect yourself and your passengers. Completion and submission of this form does not obligate you to join a car pool. It is an expression of your interest in exploring car pool options available to you and allows RCC to publish and share your information with other interested parties.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# RCC CLASS/WORKSHOP/CAMP REGISTRATION INFORMATION



## 4 EASY WAYS TO REGISTER:

By Fax: 703-476-2488 • In Person • By Mail: Reston Community Center, 2310 Colts Neck Rd, Reston, VA 20191

Online: [www.restoncommunitycenter.com](http://www.restoncommunitycenter.com) • Please Note: Online registration is not available during priority registration period.

## REGISTRATION SCHEDULE

Fall: August 1 Reston/August 8 Non-Reston

Winter/Spring: December 1 Reston/December 8 Non-Reston

Summer Camp: February 1 Reston/ February 8 Non-Reston

Summer: May 1 Reston/May 8 Non-Reston

### SMALL DISTRICT 5

- Residents and employees in Small District 5 are eligible for priority registration and reduced program rates.
- Residency status is determined by whether the patron resides or works within the boundaries of Small District 5.

### PRIORITY RESIDENT REGISTRATION

- Priority registration for Small District 5 Reston and/or employees will be the 1st-7th of each scheduled registration month.
- Registration received during this time will be processed daily by a randomized lottery.
- Due to the large number of registrations received, availability is not immediately known.
- RCC will not process your payment until your enrollment has been confirmed.

### NON-RESIDENT REGISTRATION

- Non-Reston registration follows the end of priority resident registration and will be processed using a randomized lottery.

### PROGRAM FEES

- Program fees are listed in this guide as Reston/non-Reston (e.g., \$2/\$4).
- Seniors (ages 55 and up) receive a 20% discount on class fees (except in cases where the class fee is payable to someone other than RCC). This discount does not apply to Senior Programs, Adult & Family trips, or drop-in programs.
- Patrons under age 55 can register for Senior Programs if space is available after priority registration. Program fees will be doubled.

### REGISTRATION FORM

- Family members living in the same household should complete a single registration form.
- Patrons residing in separate households who wish to enroll in the same class must complete separate registration forms and staple them together.

### PAYMENT

- Payment is required upon registration.
- Pay by cash, check (payable to the Reston Community Center), money order, MasterCard or VISA.
- Cash payments cannot be accepted during priority registration.
- Unless stated, supply fees are in addition to registration fees.

### CONFIRMATION

- Confirmation for registrations will be provided.
- The confirmation will indicate if you are waitlisted or enrolled.

### CLASS CANCELLATION

- If the minimum enrollment has not been met 7 days before the camp starts, RCC reserves the right to cancel the camp.
- A full refund will be issued.
- RCC reserves the right to substitute instructors without notice.

### REFUND/CANCELLATION POLICY

- Written refund requests received 14 days or more prior to the start of a camp will receive a full refund less a 20% processing fee.
- Refund requests received less than 14 days before the start of a camp will be granted (less a 20% processing fee) only if another registration is received in its place.
- No refunds given for any camp with a fee of \$10 or less.
- Refunds will be credited to credit card on file or a check will be issued by Fairfax County in 4-6 weeks.

### INCLEMENT WEATHER POLICY

RCC follows Fairfax County Govt. and Public Schools inclement weather decision-making with respect to all staff-led and registered programming. Rental activities, RCC events, trips and tours are affected individually and typically we make every attempt to honor those commitments if we can do so safely and the County has not closed all facilities. We advise our patrons and rental clients to call the RCC at 703-476-4500 for the most complete information.

#### If Fairfax Co. Govt declares unscheduled leave for employees:

- Early bird swimming and all classes are cancelled.
- Make-up classes will be scheduled if possible.
- No refunds will be issued.
- Rental activities are unaffected unless cancelled by the rental client.

#### If Fairfax Co. Govt. or Public Schools are delayed in opening:

- Early bird swimming and all classes scheduled prior to Noon are cancelled.
- No refunds will be issued.
- Normal programming and operating hours resume at Noon.
- Rental activities are unaffected unless cancelled by the rental client.

#### If Fairfax Co. Govt. or Public Schools declare "early closing":

- All classes/workshops scheduled after 5 p.m. are cancelled.
- No refunds will be issued.
- Normal programming and operating hours resume the next day pending other weather-related announcements.
- Rental activities are unaffected unless cancelled by the rental client.

#### If Fairfax Co. Govt. is closed:

- RCC will be closed.
- All classes are cancelled; Make-up classes will be scheduled if possible.
- No refunds will be issued.

### ADA ACCOMMODATIONS

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### CLIENT SATISFACTION

Our goal is to make your experience at a RCC a positive one. Please let us know if you have any concerns or issues.



RCC USE ONLY	
DATE STAMP	