

**Royal Summer Jam**  
**Parent Handbook 2019**



# wavechurch™

## Royal Summer Jam Parent Handbook 2019

Hello! Thank you for taking interest in our program for middle school and high school students. We are confident that your young person will have an amazing time with us this summer! We have many fun and exciting activities planned. Best of all, our staff has experience and a genuine desire to see your child grow and succeed over the course of their time with us.

### Admission Procedures:

All forms must be completed and signed before your child can begin the program. One registration packet must be filled out for **each** child. Acceptance is based on availability so please return all forms on or before the start of the program, **June 22<sup>nd</sup>, 2019** to secure his/her registration. Space is limited!!!

### General Policies:

- Dates Open: June 22<sup>rd</sup> – August 19<sup>th</sup>
- Hours of Operation: 9am-5pm, Friday
- 

### Accessibility and Security:

Upon arrival, the child must be accompanied into the building and signed in by his/her legal guardian. Children must also be signed out by an authorized person. If someone besides the parent will be picking your child up, IDs will be checked to match the names on the list.

### Medication:

Should the child need to take a prescription medication over the course of their time with us, it must be accompanied by a doctor's note. All medication must be in the original container and labeled with the child's name, name of medication, dosage amount, and times to be given.

### Health Information:

**Royal Summer Jam Program Admittance Policy: Please don't admit your child to any of the programs if they exhibit any of the following:**

- Fever within the last 24 hours

- Colored mucous emanating from nose
- Lethargic behavior
- Diarrhea or loose stools within last 24 hours
- Vomiting within the last 48 hours
- Signs of illness other than allergies
- Any symptoms of an infectious/contagious disease, such as measles, chicken pox, strep throat, etc...
- Common cold
- Any unexplained rash
- Head lice, pinworms, pinkeye, ringworm, impetigo, etc...

## Transportation/Field Trips:

Field trips are a fun part of our program. Our primary mode of transportation will be fully insured buses operated by Wave Church. Your child will be expected to follow the safety rules and guidelines provided by our staff. Should a child not comply with safety rules, they may be temporarily suspended from the program. In the event of inclement weather, we reserve the right to reschedule outdoor field trips without notice.

## Summer Jam Supply List:

### Daily Supplies

1. Lunch or money to purchase lunch
2. AM-PM Snack or money to purchase snack
3. Bathing Suit, Towel, and Sunscreen
4. Water Bottle
5. Tennis shoes (If you choose to wear sandals)

### Optional Supplies

1. Sports equipment
2. Board game/deck of cards
3. Video game system/games

**Please write names on all personal items. We are not responsible for lost, stolen, or broken items.**

## Summer Jam 2019 Tuition:

- Summer Rate: **\$150**
- Daily Rate: **\$25**

**\*\*\*The cost of field trips is not included in the tuition. Participants in the program will be expected to bring additional funds in order to participate in the various events. The costs of the trips are highlighted in our Summer Jam Schedule.**

## STANDARDS:

The following standards are put in place to ensure the enjoyment of everyone who attends Summer Jam. While you are here at Summer Jam we expect you to respect our staff, our facility and other participants. Thank you for your cooperation.

- No cursing or use of derogatory language
- No public displays of affection
- No fighting or verbal antagonizing of others will be tolerated
- No tobacco, alcohol, drugs or weapons are allowed on Wave Church property
- Everyone is expected to respect all staff and leadership
- Clothing needs to be modest
- No asking for money from other participants or staff to buy lunch, snacks etc... (Please come prepared with the appropriate amount)

**Failure to abide by these standards may result in suspension or expulsion from Summer Jam without refunds.**

I acknowledge that I have read and agree to abide by the Summer Jam Standards outlined on this form.

Youth Signature \_\_\_\_\_

(PLEASE FILL OUT THIS FORM AND TURN IN FOR REGISTRATION WITH PAYMENT)

PARENT/GAURDIAN'S NAME: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_

CHILD'S DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ MALE / FEMALE (PLEASE CIRCLE)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PAYMENT (PLEASE CIRCLE):    CASH        CHECK        CREDIT CARD

(CREDIT CARD DETAILS)

NAME ON CREDIT CARD: \_\_\_\_\_

VISA MASTERCARD AMEX DISCOVER                      TOTAL \$: \_\_\_\_\_

CARD #: \_\_\_\_\_ EXP DATE: \_\_\_\_\_

I (PARENT/GUARDIAN) UNDERSTAND AND AGREE TO FULFILL ALL REQUIREMENTS AND STANDARDS LAID OUT IN THIS SUMMER JAM PARENT HANDBOOK.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

**WAIVER OF LIABILITY AND ASSUMPTION OF RISK**

Wave Church (the "Church"), a Virginia nonprofit corporation, is organizing or planning a various events, trips, or general activities that shall occur on a recurring basis (hereafter "Activities"). I wish to participate in the Activities. This Release is effective beginning the date it is signed and I may be required to sign a new release on an annual basis. In consideration of being allowed to participate in any way in the Church's Activities, the undersigned acknowledges, appreciates, and agrees that:

**This paragraph to be completed if the Participant is under 18 years of age:**

I, \_\_\_\_\_, hereby certify that as parent/guardian with legal responsibility for \_\_\_\_\_ ("Participant"), I have given my consent to the Church for my Child to participate in the Activities held by the Church. I am aware that these Activities include risks of physical injury to my child and other participants. I hereby certify that I am at least eighteen (18) years of age and legally competent to sign this Waiver on behalf of my Child. I hereby certify that my Child is able to participate in the Event. *For the purposes of the following provisions, the term "I, my or Participant" shall refer to the individual on whose behalf this Waiver has been executed, whether an Adult or a Minor Child.*

1. I hereby acknowledge that my participation in the Activities is entirely voluntary.
2. If I am injured or need medical attention while participating in the Activities, I give the Church, its employees and volunteers, permission to seek medical diagnosis and treatment which in their best judgment they deem to be necessary or appropriate under the circumstances.
3. I agree to pay for any and all medical expenses incurred as a result of the use of this consent.
4. I also agree to assume all risk, fully release and hold harmless the Church, its pastors, employees, agents, borrowed servants, contractors and other workers, paid or volunteer, or their heirs and assigns, from any and all injuries, claims, liabilities or causes of action which may arise from my participation in the Activities.
5. I understand that it is my obligation to inform the management of Wave Church of any and all health considerations or medical conditions that would restrict my participation in any and all Activities.
6. I acknowledge that I am not aware of any condition or limitation that would prevent my participation in the Activities. I will not allow myself to participate in the Activities should I become aware of any such condition or limitation and will not allow myself to participate in the Activities should I have any illness or disease which

I reasonably understand to be contagious to others or would put others in jeopardy of contracting such illness or disease.

7. I have fully informed myself of the contents of this WAIVER OF LIABILITY AND ASSUMPTION OF RISK by reading it before I signed it.

**PARENT OR GUARDIAN:** I represent that I am the parent and/or legal guardian of the above-named Minor. I agree that we both shall be bound by this Agreement.

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

Signature: \_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date:

**Medical Information**

Name \_\_\_\_\_

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

Parent/Guardian Pager or Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
(Other than parent/guardian and participating in event)

Emergency Contact Phone Number \_\_\_\_\_

General Health \_\_\_\_\_

1. Is Child-Participant Currently Taking Medication? (Yes) \_\_\_\_\_ (No) \_\_\_\_\_

If Yes, What Type \_\_\_\_\_

2. Is Child-Participant Allergic To Any Medication (Yes) \_\_\_\_\_ (No) \_\_\_\_\_

If Yes, What Type \_\_\_\_\_

3. Is Child-Participant Allergic To Any Particular Foods (Yes) \_\_\_\_\_ (No) \_\_\_\_\_

If Yes, What Type \_\_\_\_\_

The following information will remain confidential. Writing it would speed any emergency care, should any be necessary.

Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_

Physician \_\_\_\_\_

Phone Number \_\_\_\_\_

July 5th -Summer camp!

July 12th - Water Country / Ocean Breeze

July 19th - Top Golf

July 26th - Busch Gardens

Aug 2nd - Wave Conference

Aug 9th - Mall / Movie

Aug 16th - Bowling / Putt Putt

Aug 23rd - Student Choice