



Camper Registration Form
2018

Camper Information

_____	Age _____	Birthdate _____/_____/_____
Name _____	T-Shirt Size (Please Circle one)	
Address _____	2T 3T 4T 5T	
City _____, TN _____	Zip _____	

Parents/Legal Guardian

Name _____	Relation to the Camper _____	Emergency Contact _____
(call this person first)		
Name _____	Relation to the Camper _____	Emergency Contact _____

Emergency Contact Information

House Phone /VP: _____	Cell Phone (Text): _____
Email _____	Other: _____
Work Number: _____	

What pre-school does your child attend: _____

What hearing devices will child wear while at camp: _____

The Deaf Church and Camp SummerSign staff and volunteers cannot be held liable for any lost, stolen or damaged hearing aide or visual aide devices. We prefer these be left at home if at all possible especially on water days and amusement park days.

Camp Dates are June 5– July 27, 2018 on Monday AND Friday ONLY for 9am to 1pm. No camp on June 11-15 and July 2-6. The cost of the camp is \$240.00 for the summer and includes: Summer Yearbook, Camp t-shirt, CSS Bag, Snacks, and Supplies.



Transportation Form 2018

- Unfortunately Camp Summer Sign will not be able to provide transportation for the Mini Camp, due to car seat needs for this age group. Each family will be responsible for dropping off and picking up their child each day. Drop off/ Pick up will take place in the semi circle at the Inman Deaf church entrance. Each family will be provided a name card for their child to put on the dashboard of their vehicle so the camp workers will know which child to bring out as the cars pull up. Each parent **MUST** get out of the car and buckle their child in their car seat.

I. Brentwood Baptist Deaf Church

Inman Deaf Chapel Door
7777 Concord Rd
Brentwood, TN 37027

Drop off time: 8 :45—9:00AM

Pick up time: 12:45-1PM



Medical Information & Authorization

Camper Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Parent (s) Name _____

Parent (s) Phone # Day: _____ Night _____

Physician's Name _____ Phone # _____

Allergic Reactions: Bee Stings _____ Penicillin _____ Other _____

Restricted Activities _____

Cause of Deafness: _____

My Child is currently taking the following medicines:

Name of Medicine	Dose Amount

Date of last Tetanus Shot: _____ Medical Insurance Number _____

(must have this information)

Provider: _____

Medical Authorization

IN case of Medical Emergency, I hereby give my permission to the staff member in charge to: Hospitalize, and/or secure services of a licensed physician, surgeon, or anesthesiologist in providing the necessary care for my child as named on this application. I certify that my child is in good physical condition, and is able to participate in the entire summer program except for activities listed as "restricted".

Signature of a Parent or Legal Guardian _____ Date _____

State Of Tennessee County of _____

Before me, the undersigned, a Notary Public and for said County and State, personally appeared

_____, with whom I am personally acquainted (or proven to me

on the basis of satisfactory evidence), and who, upon oath, acknowledged himself/herself to

be _____.. Witness my hand and seal at

_____, Tennessee this _____ day of _____, 20__

Notary Public

My Commission Expires: _____



Camper Photograph/Video Release 2018

WE aim to capture your child and this camp for all to see! Each week we show a short video of their previous week. Children enjoy seeing themselves on video. We also cover our walls with pictures weekly and children enjoy seeing photos of themselves and friends. We also would like to document your child's summer activities by photographing and/or filming the children. The pictures are put together to make slide shows, make a photo year book, and to promote CSS through the STARS-Nashville and The Deaf Church, and TBC and other avenues. The children perform the evening of the last day of camp and we capture this on film and video. They are also used in newsletters, projects, and on our websites and YouTube. We would also like to provide these wonderful videos and programs to neighboring programs such as residential schools and other organizations to benefit Deaf students.

_____ Yes, you may photograph or film my child and use the pictures.

_____ No, I do not want my child photographed or filmed.

Child's name _____

Date _____

Parent/Guardian signature _____

Please take a look on YouTube: Alone in a Hearing World short film by CSS campers.

CSS photo is on the cover of a book: Turning the Tide by Dr Gina Oliva and Dr. Linda Lyle (both professors from Gallaudet University)

Most recent published article will be coming out spring of 2015 in the American Society for Deaf Children Journal.



Below is a list of things your child will need throughout the summer for CSS:

- **CSS shirts will be worn each day to camp. If your child loses the t shirt then we ask you purchase another one at \$15.** we would have to special order a shirt.
- A sack lunch needs to be brought to camp daily. Please bring an appropriate cup, utensils, and bib for your child each day.
- Your child will need to bring a small backpack or diaper bag to camp each day that includes one days supply of diapers and wipes and a change of seasonal appropriate clothes incase of accidents.
- Campers will need to wear tennis shoes daily; flip flops are acceptable on swim days and water game days. This is a safety issue.
- If needed (write on Medical Form), campers will need to remember to bring inhaler, epi-pen, or any allergy medication with them to camp for emergencies or daily use.
- Please provide case or zip lock bag for all hearing aide devices for swim/ water game days and amusement park field trips. Deaf Church is not liable for broken, stolen, lost or damaged devices.
- Each day check your child's backpack for a daily progress report that will include information on your child's day and learning experience.



Camp Summer Sign Rule
Recognition
Parental
2018

I have read the Camp SummerSign rules and I acknowledge that my son and/or daughter will abide by these rules and that the breaking of these rules is grounds for suspension. I also hereby understand that Camp SummerSign, its staff and volunteers can in no way be held responsible for loss or damage to any electronic devices brought to camp. We highly recommend that these devices be left at home. I also understand the Deaf Church and Camp SummerSign staff/volunteers cannot be held liable for damage, loss or stolen hearing aide devices, such as Cochlear implants, hearing aides, and other devices along with visual aide devices.

(Camper Signature)

Date

(Parent/Legal Guardian)

Date



Camp SummerSign Rules and Consequences 2018

Rules of Respect:

Respect Staff & Campers
Respect property
Tell Staff where you are going
No running unless part of a game
No gum
Any other display of disrespect
No two piece swim suits (belly cover is an acceptable two piece)/boys swim trunks
Shorts/Pants pulled up to waist
No sharing food at lunch or at snack time due to allergies.
No Biting
No Hitting

Consequence for breaking rules of respect:

Children of this age will be given several warnings and detailed explanations of behavior expectations.

We will also be using the “time out spot” method for rule breaking. Children will be expected to sit one minute for each year old they happen to be. For example if your child is 2 years old and they must sit in time out they will sit for 2 minutes.

If your child is involved in a “biting” or “hitting” incident a parent will be called EVERY TIME for notification. We are prepared to treat minor injuries on site.

If your child is biting or hitting their name will remain confidential and you will be notified to help problem solve.

If your child is just having a bad day and is having persistent behavior issues you may be notified to come in and help support your child or to take them home for the day. PLEASE KNOW, IF YOUR CHILD GOES HOME EARLY FOR THE DAY THEY ARE ALWAYS WELCOME TO RETURN THE FOLLOWING CAMP DAY AND TRY AGAIN. WE ARE ALL IN THIS TOGETHER!!

All disciplinary issues will also be documented on your child take home communication sheet in their back pack each day.

Our mission is to have strong communication with all of our children’s parents and to work together as a team to Address any issues that may arise. WE ARE ALL ONE TEAM SERVING YOUR CHILD!!

Rules of Safety:

Must wear the Camp t-shirt on designated field trip.
Seatbelt must be worn on BBDC vehicles
No fighting with staff or campers (includes hitting, kicking, or biting)
No running away from staff
No stealing
No Weapon of any kind
No dangerous acts at the swimming pool—pushing a camper in the pool, holding a child under water
Any other act that is harmful to the child or to others

Any of the above is grounds for suspension; however, first offense will probably see one of the following consequences for breaking rules of safety:

Call parent to pick up child for that day.
Inform parent child is not to attend camp the following day.
Inform parent the child will not be able to attend a Thursday outing (which will be decided by staff).

Rules for Hearing aide and visual devices:

Camper responsible to safely secure all devices especially on water days and amusement park days.
Camper will have a case or water proof container for devices. Back packs end up on wet floors many times.



Camp SummerSign Sunscreen Release Form

Parents are responsible for providing sunscreen for their child to use at camp. Parents are expected to apply the first coat of sunscreen in the morning before bringing children to camp. Camp SummerSign staff will apply **spray** sunscreen to any children that ask one time in the afternoon as needed on field trips. You will need to provide the facial sun screen and your child will need to apply it to their face. Staff cannot assist with sunscreen to their faces.

Please complete the information below if you wish to give permission for Camp SummerSign Staff to apply spray sunscreen for your child.

Note: Children will only be able to use the sunscreen you send. Only siblings may share.

Permission to Administer Sunscreen

Child's Name _____

Please list any known allergies to sunscreen _____

I understand that Camp SummerSign campers will spend 80% of their time on Thursdays and Fridays outside and that the use of sunscreen may not prevent my child from being sun burnt but will aid in the protection against harmful sunrays.

I hereby give permission to CSS staff to apply the **spray** sunscreen I provide to my child during my child's participation while at Camp SummerSign throughout the summer.

Signature of Parent/Guardian _____ Date _____