

2024

Mission Summer Camp

June 3 - August 2

Date: \_\_\_\_\_  
Time: \_\_\_\_\_  
Staff: \_\_\_\_\_  
For Office Use Only





## General Camp Information

The Mission Summer Camp (MSC) at the Powell Community Center is designed to be a fun, happy and safe experience for your child. Our ***purpose*** is to provide a quality camp experience to support parents in their desire for their children to grow to their fullest potential. To meet this goal, we utilize Behavior Based Programming techniques to provide games and activities that will foster each child's development:

- Friendship Skills: making friends and maintaining relationships.
- Independence: Relying less on adults and other people for solving day to day problems.
- Teamwork: To become more effective when working in groups of their peers.
- Family Citizenship: Encouraging attributes that are important to being a member of a family.
- Perceived Competence: Believing that they can be successful in things they do.
- Interest in Exploration: Being more curious, inquisitive, eager to learn new things.
- Responsibility: Learning to be accountable for their own actions and mistakes.

We believe each child has talents and skills to develop, energy to put to use, and huge reservoirs of creativity that need to be encouraged. Our program provides Kindergarten-12 year-olds with chances to unwind, explore and experiment, discover new ideas, work cooperatively in small groups and enjoy large group activities.

## Mission Summer Camp (MSC) (Kindergarten-12 y/o)

**160 openings each week**

**\$161** - Resident/Member/Mission Business Rate

**\$171** - Non-Resident/Non-Member Rate

## Camp Activities include:

- Weekly Themes
- Indoor/Outdoor Games
- Free Swim
- Arts & Crafts
- Science & Cooking
- Sports (Soccer, Basketball, Badminton, Volleyball, etc.)
- Field Trips

## Hours of Operation

MSC operates Monday-Friday from 7:30am-5:30pm. These are the hours we are licensed by KDHE.

**Open House - Saturday, June 1 from 8:30am-11 :30pm**

**Powell Community Center: Presentations: 9:30 AM**

**Come meet the camp staff and submit all camp documents and get to know other families that will be attending camp! There will be a quick presentation.**

**\*\*\*Mandatory for ALL New campers attending summer camp\*\*\***

## Camp Staff Training

As an accredited camp by the Kansas Department of Health & Environment (KDHE), we take pride in hiring highly motivated and enthusiastic staff who will mentor your child. Candidates must meet qualifications established by the City of Mission and KDHE. All staff members must pass a KBI criminal and sex offender background check, are trained in child abuse recognition and prevention, CPR/First Aid & Epi-Pen Administration, and Camp Directors are also certified for Childhood Medication Administration. The camp also adheres to and strives to exceed the required KDHE 1:15 counselor-to-child ratios to ensure that appropriate supervision is maintained throughout the duration of the program -our counselor-to-child ratios may fluctuate between 1:6 to 1:15 at any time.

## Daily Environment

### We strive to provide:

- A safe and healthy environment for your child.
- A high quality, positive camp experience.
- A staff firmly committed to providing a positive camp experience for each and every camper.

### In return, we expect the following from our parents & campers:

- Attention to the daily needs of your child in preparing him/her to come to camp
  - Dressed in appropriate clothing, with a **water bottle & nutritious lunch** (we're very active!)
- Cooperation with our stated and written policies; and willingness to act in concert with camp staff to maintain or restore appropriate behavior and courtesy; and commitment to the well-being of the entire camp community
  - Such as keeping an unwell or over-tired child at home

## Communication

We offer a camp cell phone number that allows parents to call for general camp information, daily schedules, and changes to schedules due to weather. Parents will also be able to leave a text messages for the Camp Director & Assistant Directors on the appropriate number. The voicemail will be checked **approx. every 30 minutes** during normal business hours (7:30am-5:30pm). The phone numbers will be available to all parents on your first day of camp.

*In addition to the numbers, parents may choose to check the MyCampApp for announcements, updates, and pictures (a completed photo release forms required for all campers).*

If at any time, you have a question or concern about our day camp, we ask you to please speak with the The Camp Director or Assistant Camp Director. No question or concern is too small for you to bring it to our attention. All of our policies are included in all of the camp paperwork; additional copies may be requested at any time.

## Registration & Payment Options

To register, a parent must **PAY IN FULL** or elect to be put on a **PAYMENT PLAN** at the time of registration. Payment for the first attended week and any add-on programs is required at time of registration if the payment plan is selected. Proof of residency or proof of employment at a Mission Business is required for the discounted resident rate. Examples of computer-generated documentation include: driver's license, utility bill, paycheck stub, etc.

### Register:

In-person: at PCC with Misty Town  
Mail: 6200 Martway, Mission, KS 66202  
E-mail: mtown@missionks.org

### Payment Plan:

**You must sign-up for the Payment Plan by FRIDAY, May 31, 2024.** Payments are charged/debited on the dates listed below. Your receipt will be emailed to you after each payment. It is your duty to keep all card information current. A declined payment will be attempted twice, followed by an email. A lack of payment will forfeit your child's spot in camp.

**Payment for your child's first week of camp is due upon registration.**

**2024 Payment Plan detail are located on page 15!**

**\*\*\* NOTE: The first week your child attends camp is due upon registration.\*\*\***

*\*You're only required to pay for the weeks your child is enrolled. See detailed payment chart, on page 18.*

### Changes & Cancellations:

**We ask that all cancellations be submitted in writing or e-mail. If you cancel on or before May 31, 2024, you will receive a refund of any monies paid. Starting June 1, 2024, the cancellation fee is \$25 per week per child.**

There is zero tolerance at Powell Community Center (PCC) disruptive/inappropriate behavior. *No refunds will be made for children sent home due to: homesickness, disruptive behavior/actions or possession, use or sale illegal substances.*

There will be no fees charged for medical conditions that affect attendance to the camp, though a Doctor's note is required.

**Confidentiality Clause:** All contents of a camper's files, including health history, medication forms, correspondence from parents, etc., are confidential documents. File contents are not duplicated, distributed, discussed or viewed by anyone other than the parent/guardian, program staff, law enforcement officers, KDHE designee, and emergency medical personnel. Parent/Guardian reserves the right to make their camper's records available to designated parties through signed permission. Campers' records are kept on file for the camp season; once the season has ended, they are securely disposed of.

## Child Forms

The following forms contain pertinent information that will help us keep your camper safe. It is required that all campers have each of the following forms on file, **BEFORE** they attend camp:

- Registration Form
- Health History (2 *pages*) - If there are any environmental changes, tools or tricks to help your child adjust to new settings, specific behavior triggers, please let us know on page two.
- Authorization for Emergency Medical Care
- Addendum Form (1 *page*)
- Field Trip authorization (*camp specific & multiple pages*)
- Medication Form (*if applicable*)
  - Inhalers – you will need to complete the Self-Administration Medication Form

## Medication

The Camp Director or Assistant Camp Director will administer all medication. Medication is stored in a locked box at the director's table. All **prescription** medication must come in a pharmacy bottle with a legible pharmacy label. The label must contain the participant's name, the pharmacy number, the name of the medication, dose and frequency required of the medication and the doctor's name. All **non-prescription** medications must be submitted in a **new, sealed** container with the participant's name and expected frequency of use and dose written on the bottle. We are **not** allowed to 'just give them medication'.

## Allergies

Please include allergy information of any kind on your child's medical forms. The PCC does not allow campers to share food due to a variety of food allergies. If your child has food allergies or dietary restrictions, please pack two snacks for your child each day.

## Sick Child Policy

If your child becomes ill while at camp, you will be called and arrangements must be made to pick up your child immediately. If we send your child home with a fever, he/she may not return to the program until they have been fever-free for 24 hours. **Please keep your child home if he/she has:**

- Reoccurring vomiting or diarrhea
- Symptoms of a communicable disease
- Temperature of 100 degrees or above
- Heavy nasal discharge
- Head Lice

## Camp Preparation...

### What your camper should expect...

- Each child will be assigned a group with other campers of similar age/grade.
  - Monkeys, Panthers, Zebras, Bears, and Lions.
- Each group has their own designated tables where campers will place their belongings. On the first day, we will show campers their tables and the bathrooms.
- Each child will be expected to be courteous and respectful to others, as well as to follow our rules.
- Each team will go over camp rules with team leaders (Head Counselors & Counselors) each morning of camp; please assist us in reinforcing these rules.
- Please show your child how to apply his/her sunscreen. **We can only help your child apply sunscreen if you sign the permission form. NO SPRAY SUNSCREEN IS ALLOWED AT CAMP!**
- Make sure your child understands that she/he **cannot** bring the following items to camp:
  - ⇒ Animals – pets included
  - ⇒ Firearms/ammunition
  - ⇒ iPods/iPads
  - ⇒ Knives
  - ⇒ Electronic devices, games
  - ⇒ Other potentially dangerous items
  - ⇒ Personal treasures
  - ⇒ Cell phones\*
  - ⇒ Valuable items

\*MSC camper cell phones are to be left at home. The Camp Directors have a phone, should any parents need to be contacted. If a parent/guardian needs to contact their child or camp staff for any reason, please contact the appropriate Camp Number or the Parks & Recreation Department front desk at 913.722.8200. If a MSC camper must bring a cell phone, all cell phones must remain in the camper's backpack during camp hours. **MSC Campers are not permitted to carry cell phones during camp hours nor on field trips.**

## How should my child dress & what should he/she bring?

### Your child should:

- ⇒ Dress for the outdoors & playing games – clothes that can get dirty (play clothes!)
  - Remember...the nature of camp is to get outside and have fun, which often means getting dirty!
- ⇒ Bring a **Sunscreen** bottle with their name on it as we will apply it multiple times a day!
  - You may direct your child to keep their sunscreen in their backpack if you wish to do so.
- ⇒ **Wear camp shirt - MUST BE WORN EACH DAY.**
  - **Each camper receives (2) shirts at the Parent Orientation Meeting; additional shirts will be available for purchase.**
- ⇒ Wear comfortable running/walking shoes:
  - Open-toed shoes can be a safety hazard to your child. Therefore, close-toed shoes are required for all children to participate in the camp program.
  - FLIP FLOPS- may be carried to the pool to wear at the pool only.

### Please apply sunscreen each morning at HOME before arriving at camp.

- ⇒ **Sunscreen (30+), no spray sunscreen.**
  - **Staff will reapply sunscreen if the parent/guardian has given us permission on the Addendum Form.**
  - **Please discuss & show your child how to apply sunscreen.**

### A backpack with the following:

- **Lunch:** a nutritious and filling, non-refrigerated (an ice-pack is recommended to keep food cool) that produces as little trash as possible. (Mission is the Green Corridor of Kansas!) ***Due to potential food allergies, children are not permitted to share food. If there is a severe nut allergy on your child's team, parents will be notified; if necessary, a nut free table will be created.***
- **Water Bottle:** a reusable water bottle; please do not freeze the water bottle; the ice won't melt fast enough to give your child enough water to drink. **PLEASE WRITE YOUR CHILDS NAME ON THEIR WATER BOTTLE.**
- **Shoes:** comfortable athletic shoes or ***or closed toed sandals.***
- **Sunscreen:** with your permission, we will help reapply & apply. No spray sunscreen
- Bring a hat for sun protection – especially for those that are fair-skinned.
- Bring a rash guard/swim shirt – especially for those that are fair-skinned.
- Pack a sweatshirt or jacket – it can get cool outside & in the different rooms in PCC.
- Younger children may want to bring a spare set of clothes in case of an “accident”.
- **LABEL, LABEL, LABEL! Please label all of your child's belongings.**

## Field Trips

All campers will participate in scheduled field trips if they are in camp that day. The cost of the field trip has been included in the registration fee. **It is NOT recommended that campers bring money on field trips. Mission Summer Camp is NOT responsible for money that is lost or stolen.** Please make sure that your camper is wearing clothing that matches the weather conditions. **Each child is required to wear his/her Camp T-shirt on field trips.** This helps the staff more effectively monitor and identify the campers. Failure to wear the current camp T-shirt will result in your account being charged a fee to purchase a new shirt. **The Camp Directors will carry the camp cell phone on all field trips.**

Our field trips include, but are not limited to: in building conference center rooms - A,B,C,D,E, party room, breakout room, Beverly Street Park, Andersen Park, Mission Family Aquatic Center, and our normal off-site field trips. **Each camper must have a completed Field Trip Permission Form.** Field Trip Permission Forms will be available at the Open House and the first day of camp.

## Pool Trips

All weekly pool trips will be made to the Mission Family Aquatic Center. The facility is 3 blocks from the community center and participants will walk to and from the pool.

### **Mission Summer Camp (Ages K-12... Monday, Tuesday, Wednesday and Thursday)**

12:00 - 2:00 pm... Monkeys and Panthers

2:00 - 4:00 pm... Zebras, Bears and Lions

## Pool Wristbands

To better identify campers and provide better supervision, MSC campers will be required to wear a wristband each day at the pool. The wristband colors are **Red**, **Yellow**, and **Green**. Each child must complete a swim test in order to swim and must do so with MFAC Lifeguards. The approved lifeguards will be in the water alongside each child during each swim test.

- **Red Band:** A child that needs assistance, hangs on to the wall or chooses not to complete the swim test will receive a red wristband. The Red wristband will only be allowed in the splash pad area & kid pool area. MSC swim tests will be held on the first swimming day – June 3, 2024 and then each Monday of camp, as needed.
- **Yellow Band:** A child that swims about half the distance of the pool, with little or no assistance, will receive a yellow wristband. The Yellow wristband allows the child go into the spray pad & kid pool area and in the shallow portion main pool, with no permission to go off the diving boards.
- **Green Band:** A child that swims one full length of our lap pool with little or no assistance will receive a green wristband; this allows them to swim in all approved areas, including the diving boards, of the Mission Family Aquatic Center (MFAC).

## Pool Concession Cards

**Concession Cards are sold in \$5 increments.** Cards are used at the concession stand at the MFAC during summer camp hours only. You are able to limit the amount spent daily and/or the type of food they can purchase. Cards will be kept and distributed by the Camp Director, Assistant Camp Directors, or Head Camp Counselors. Menus will be available at the Open House. You may pre-purchase concession cards with your initial camp registration (*payment is due at that time*) or they are available for purchase at either entry desk, through the duration of camp.

**All cards expire on the last day of camp.**

## Pool Weather

The air temperature must be above 72 degrees in order for camp to go swimming. When the heat index is over 100, camp may opt to change or reduce the duration of pool or field trips.

## Camp Discipline Procedures

The camp staff in charge of a child or group of children shall be responsible for their discipline in keeping with the discipline policy and will be handled with kindness, consistency and understanding. Too often discipline is thought of synonymously with punishment; it involves much more. We want to approach it with a positive action so appropriate behavior is reinforced and a learning process takes place as natural growth and development. Attention will be given to each specific camper at the same time, and then they will be encouraged to become part of the group and participate.

**Typical discipline interventions are as follows:**

1. Observe and listen in order to prevent conflict by anticipating any inappropriate behavior.
2. Redirect the child to another activity.
3. Talk to the child individually.
4. Separate the child from his/her group.
5. Discuss the situation with the child.
6. Document the situation and discuss it with the parents daily.

## Camp Rules

1. Respect all Campers, their belongings, and their personal space.
2. Respect yourself.
3. Respect the Camp facilities, equipment, and supplies.
4. Follow the directions.
5. Good manners & courtesy are required of all campers & staff.
  - a. No foul language, bullying, or ridicule is tolerated.
  - b. Refrain from doing something that might hurt someone's feelings.
6. Keep your hands, feet, and other objects to yourself.
  - a. Fighting is not tolerated & is viewed as an automatic Incident Report, and may result in suspension or expulsion from Camp.
7. Campers must always be within sight of a staff member.
8. Silence is expected and required during announcements, when receiving directions, and when visitors or other individuals are speaking.

9. Clean up after yourself
10. No fireworks, guns, or knives allowed at camp

## Hallway Rules

1. No talking.
2. Single file line.

## Pool Rules

1. Walk.
2. Campers must wait to enter the pool until Counselors are in the water.
3. No horseplay: dunking, splashing, kicking, etc.
4. Lifeguard & staff's words are final.
5. Campers must listen to all rules.
6. No hanging on lane ropes.
7. No playing around stairs.
8. No water wings.

## RULES REVIEWED DAILY WITH CAMPERS

**C... Care for yourself and others.**

**A... Act respectfully.**

**M... Make good choices.**

**P... Participate.**

**S... Sunscreen.**

**W... Water and wristbands.**

**I... I will listen to the lifeguards.**

**M... Make it better than you found it.**

### Lost and Found:

All lost and found items will be placed on a table in each camp. If it is properly marked, we will attempt to return the item(s) to the appropriate family. All unmarked items that are still unclaimed after one week, will be donated to a charitable organization.



## Camp Add-ons: Lessons & Enrichment

Camp participants have the option to enhance their skills. These programs are NOT included in the camp fee and are offered at an additional cost. **Space is limited!**

### Swim Lessons: Monday/Wednesday - 10:00 - 11:30 am

June 3 - 26 and July 8 - 31 @ \$50 per person.

We will not offer swim lessons Week 5 (5/1-5/3). Assigned swim instructors will walk them to and from the indoor pool.

**PLEASE HAVE YOUR CHILD DRESSED  
IN THEIR SWIMSUIT WHEN THEY ARRIVE TO CAMP.**

### Tennis Lessons: Tuesday/Thursday - 9:30 - 11:30 am

June 4 - 27 and July 8 - August 1 @ \$50 per person.

These lessons will focus on the development of basic skills and refining mechanics while having lots of tennis fun! Lessons take place at Andersen Park.

**(All campers in tennis need to be at camp by 9:00 am.)**

### You Hoop Basketball: Tuesday/Friday - 10:00 - 11:00 am

June 4 - 28 and July 9 - August 2 @ \$50 per person.

These lessons will focus on the development of basic basketball skills while running drills and shooting hoops.

### Karate Lessons: Thursday- 10:00 - 11:00 am

June 4 - 27 and July 9 - August 2 @ \$25 per person.

Sensei Tyler Murphy from KC Shizoku Karate-Do.

### Tennis Lessons: Tuesday- 9:30 - 10:30 am

June 4 - 25 and July 9 - 30 @ \$25 per person.

These lessons will focus on the development of basic skills and refining mechanics while having lots of pickleball fun!

### The Knight School - Chess Camp: Week 3

June 17 - 21 @ \$160 per person.

Keep the brain sharp during the summer while having a blast in this fun, friendly and high-energy Chess Camp! Learning made fun through videos, music-driven puzzles, movies and more.

**Morning Session: 9:00 am - 12:00 pm**

### LEGO Camps! Play-Well Technologies: Week 7

July 15 - 19 @ \$170 per person.

#### Pokémon Engineering LEGO® Ages 5-7

Calling all Pokémon trainers! With the Pokémon Championship approaching, join our enthusiastic Play-Well Instructors as we build and catch our favorite Pokémon, rescue Pikachu from Team Rocket, take a ride on the S.S. Anne to uncover rare and mystic Pokémon, and battle to see who will hold the title of Pokémon Master. Come along on our journey to catch 'em all!!  
9:00AM-12:00PM

#### Bash 'Em Bots using LEGO® - Ages 7-12

Design your custom LEGO® bot to take on any challenge. Mix and match chassis designs using wheels, treads, or walking legs. Combine these with tools like drills, hammers, and battering rams as you refine your masterpiece by sparring with friends and overcoming obstacles. Apply real-world engineering and physics concepts to help you bash and crash your way to victory!  
1:00-4:00PM

(With a concurrent enrollment into the LEGO and Chess Camp, you'll receive **\$25 off their MSC Camp registration fees that week.** Please indicate which session on your camp enrollment form and enrollment will be processed payment at time of camp registration.)

## Other Items:

- **If you camper will not be attending camp** for any reason (illness, family commitments, etc.) or if he/she is going to be significantly late, please call us on the camp cell phone –*the numbers will be confirmed at the Open House Nights*. Please keep your camper home if he/she is not feeling well, overtired, etc. Sick or tired kids won't enjoy camp and risk infecting other campers. Parents of sick campers will be called and be requested to pick up their child. For information medication administration, please refer to the Medical Information section.
- **DONATIONS!!** – We are often in need of supplies for various ooey gooey activities, science, cooking, arts/crafts projects! If you have any supplies or other materials that you think we could utilize to help in making Camp an EXCITING experience for your child, don't hesitate to bring them with us!
- **Go Green!** Please support us this summer by adopting some "green" practices! Pack lunches with reusable containers, avoid juice boxes if possible, and pick up a reusable water bottle. Visit [www.wastefreelunches.org](http://www.wastefreelunches.org) for more ideas on how to pack waste-free lunches. Some families walk or bike to Camp! Consider the environment when planning your transportation and try to carpool when possible. Mission has been named Kansas' Green Corridor...let's keep up the good work!

**Any questions? Please contact:**

**Misty Town, Recreation Coordinator, at 913.722.8223 or at [mtown@missionks.org](mailto:mtown@missionks.org).**





## HEALTH HISTORY FOR CHILDREN AND YOUTH ATTENDING SCHOOL AGE PROGRAMS

As required by K.A.R. 28-4-590(d) (1), each operator shall obtain a health history for each child or youth, on a form supplied by the department or approved by the secretary. Each health history is to be maintained in the child's or youth's file on the premises. As required by K.A.R. 28-4-590(d)(2), each operator shall require that each child or youth attending the program has current immunizations as specified in K.A.R. 28-1-20 or has an exemption for religious or medical reasons.

**Complete one form for each child or youth attending the School Age Program.**

<b>First and Last Name of the Child or Youth</b>	<b>Gender (M or F)</b>	<b>Date of Birth (MM/DD/YYYY)</b>	<b>First day at this program: (MM/DD/YYYY)</b> 6/03/2024
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<b>First and Last Name of the Child's Guardian #1</b>
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<b>Guardian #1 - Home Street Address</b>	<b>City</b>	<b>Zip Code</b>	<b>Home Phone #</b> ( )
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<b>Guardian #1 - Work Place Name &amp; Street Address</b>	<b>City</b>	<b>Zip Code</b>	<b>Work Phone #</b> ( )
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<b>First and Last Name of the Child's or Guardian #2</b>
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<b>Guardian #2 - Home Street Address</b>	<b>City</b>	<b>Zip Code</b>	<b>Home Phone #</b> ( )
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<b>Guardian #2 - Work Place Name &amp; Street Address</b>	<b>City</b>	<b>Zip Code</b>	<b>Work Phone #</b> ( )
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<b>Names and ages of other children in the Child or Youth's Family (Attach additional page if needed.)</b>
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<b>Person(s) authorized to pick up the Child or Youth in case of emergency. Include first and last name and Street Address. Attach additional page if needed.</b>	<b>Address</b>	<b>City and Zip Code</b>	<b>Phone Number (during program hours):</b>
1.			
2.			
3.			

<b>First and Last Name of Physician &amp; Street Address</b>	<b>City</b>	<b>Zip Code</b>	<b>Phone Number</b> ( )
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<b>Name of Hospital Preference in case of emergency.</b>
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Yes	No	N/A	<b>Complete the following information about medications for this child or youth.</b>
			Will this child or youth need to take any nonprescription or prescription medication during their time at the program?
			If yes above, is there signed permission on file?

Circle any of the following conditions or difficulties that affect this child or youth.			
Allergies	Frequent sore throats/ colds	Ear Infections or Aches	Heart or Lung Conditions
Skin Problems	Asthma	Headaches	Diabetes
Vision	Speech/Communication	Hearing	Emotion/Behavior
Other: Please describe.			

If you circled any of the above conditions, please provide additional information that will help the staff members meet the child's or youth's needs while attending the program. (Attach additional page, if needed.)

Provide additional information about your child or youth that might affect him/her while at the School Age Program including any special needs, restrictions to activities, major changes at home or special instructions. (Attach additional page, if needed.)

Complete the following information about this child's or youth's immunization status.

Yes	No	
		Did this child or youth attend a public or accredited non-public school in Kansas, Missouri or Oklahoma the previous year?
		If yes, are this child's or youth's immunizations current?
		If yes to both of these questions, you do NOT need to complete the immunization history below. If no to either of the above questions, you must complete the immunization history below for this child or youth or attach a copy of the child's or youth's immunization history.

Please give dates in the space below for ALL immunization series completed by this child or youth. Record MM/DD/YYYY.

		1	2	3	4	5
DPT, DT*, TD (*DT only if child is allergic to DTP)		/ /	/ /	/ /	/ /	/ /
POLIO		/ /	/ /	/ /	/ /	
MMR		/ /	/ /			
Single Dose Only	RUBEOLA (MEASLES)	/ /	/ /			
	MUMPS	/ /	/ /			
	RUBELLA (GERMAN MEASLES)	/ /	/ /			
	HIB (Hemophilus Infl. B) *RECOMMENDED	/ /	/ /	/ /	/ /	
HBV (Hepatitis B Vaccine) *RECOMMENDED		/ /	/ /	/ /		
VAR (Varicella-Chicken Pox) *RECOMMENDED		/ /				

Print the First and Last Name of the Person Completing this Health History form	Relationship to the Child/Youth	Date Completed
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If the Health History form was completed by a person other than a Parent/Guardian, who provided you with this information?	What is that person's relationship to the child/youth?
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I attest, under penalty of perjury, that to the best of my knowledge, the information provided on this form is true and correct.	
Signature of person completing this form	Date Signed





# 2024 ADDENDUM FORM

## Mission Summer Camp

### Aquatics:

I understand MSC involves swimming at various pools.  
Does Participant know how to swim?

Yes \_\_\_\_\_ No \_\_\_\_\_  
If so, approx. what level?

### Field Trips:

I give permission for my child to participate in all  
Fieldtrips and to be transported as authorized by  
Mission Parks + Recreation Department.

Yes \_\_\_\_\_ No \_\_\_\_\_ Initials \_\_\_\_\_

### Sunscreen Permission:

The Kansas Department of Health and Environment prohibits camp staff from applying sunscreen to children without a parents or doctors' approval. Therefore, without your permission, camp instructors will not apply sunscreen to your child. Please apply waterproof sunscreen to your child before camp, each day. If you have a preferred sunscreen, please send it with your child, as the staff will remind children to re-apply sunscreen to themselves throughout the day.

I authorize the MSC Camp Staff to apply sunscreen to my child and supply extra sunscreen as needed.

Yes \_\_\_\_\_ No \_\_\_\_\_ Initials \_\_\_\_\_

### Media Release:

I hereby grant the Mission Parks + Recreation Department permission to record my child/ward's or their likeness and/or voice for use in television, films, radio, or printed media to further the aims of the Parks + Recreation Program in related campaigns and magazine articles, booklets, posters, social media and in other ways they may see fit.

Yes \_\_\_\_\_ No \_\_\_\_\_ Initials \_\_\_\_\_

### Release of Liability:

I, the undersigned, as a participant or parent/guardian of the participant in the above named program and any swimming or tennis lessons offered in conjunction with this program, I do understand that, in consideration of the Parks + Recreation Department, City of Mission, KS, do release them, their officers, agents or employees from all liability demands or claim for loss, or damage of injury resulting from participating in the above, as there is no insurance provided. I recognize and understand that the above program requires that the participant be in good health, and I warrant and declare that the participant is in good health. If the participant is a minor, I also give my consent for his/her participation in the above program, and for any necessary emergency medical treatment. I hereby give authority to any hospital or doctor to render immediate emergency aid/or any medical surgical or hospital care, treatment and procedures as might be required at the time for my child's health and safety. I also give permission for my child to be transported by ambulance or aid car to and emergency center for treatment. I understand that any expense for this service is my responsibility.

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Name of Parent or Guardian Registering Camper

Date

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Signature of Parent or Guardian Registering Camper

Date

**Please return ALL forms to Misty Town to complete registration.**

**Mail:** 6200 Martway, Mission, KS 66202

**Email:** mtown@missionks.org



**This form must be completed for each child.**

**Diving Permission Form:**

I give my child, \_\_\_\_\_, permission to use the diving boards during Mission Summer Camp, so long as he/she has passed the required swimming test administered by the certified testing lifeguards employed by the City of Mission, Parks + Recreation Department.

**Yes**

**No**

\_\_\_\_\_  
Parents name ***PRINTED***

\_\_\_\_\_  
Parents name ***SIGNED***

\_\_\_\_\_  
***Date***

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# 2024 Camp Fees Detailed

## Mission Summer Camp (MSC)

Week #	Dates	Members/Mission Residents/Mission Business Workers	NonMembers & NonResidents	Payment Due
1	6/3-6/9	\$161	\$171	Due at Registration
2	6/10-6/14	\$161	\$171	9-Jun
3	6/17-6/21	\$161	\$171	14-Jun
4	6/24-6/28	\$161	\$171	21-Jun
5	7/1-7/3 <small>No Camp July 4th and 5th</small>	\$97	\$107	28-Jun
6	7/8-7/12	\$161	\$171	3-Jul
7	7/15-7/19	\$161	\$171	12-Jul
8	7/22-7/26	\$161	\$171	19-Jul
9	7/29-8/2	\$161	\$171	26-Jul
<b>Total:</b>		\$1,385	\$1,475	

**Payment for your child's first week at camp is due at the time of registration. You must sign-up for a Payment Plan by Friday, May 31, 2024.** After that, any weeks you're enrolling into must be paid in full. Any lack of payment will forfeit your child's spot in camp.

Once your child(ren) are registered, you're able to see all of your weekly receipts, as well as the ability to print out your tax statement.  
(Any & all transactions under your account will also be visible.)

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## 2024 REGISTRATION FORM

Sizes: YXS | YS | YM | YL | AS | AM | AL | AXL | AXXL

Please circle one & attach proof (for the business rate):

Mission Resident/Member | Mission Business Owner/Employee | Non-Resident

Child #1: \_\_\_\_\_ DOB: \_\_\_\_\_ Shirt Size: \_\_\_\_\_ | Child #2: \_\_\_\_\_ DOB: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Camp Weeks	Dates	Res/Member or MB Rate	Non-Res Rate	Child #1	Child #2
Week 1	6.3 - 6.7	\$161	\$171		
Week 2	6.10 - 6.14	\$161	\$171		
Week 3	6.17 - 6.21	\$161	\$171		
Week 4	6.24 - 6.28	\$161	\$171		
Week 5	7.1 – 7.3	\$97	\$107		
Week 6	7.8 - 7.12	\$161	\$171		
Week 7	7.15 - 7.19	\$161	\$171		
Week 8	7.22 - 7.26	\$161	\$171		
Week 9	7.29 – 8.2	\$161	\$171		

Camp Weeks	\$
Sports Add-On (BB or PB)	\$
Specialty Add-On (Lego & Chess)	\$
Tennis Lessons	\$
Swim Lessons	\$
Extra T-shirts (\$6.50/each)	\$
Concession Card (\$5/each)	\$
Total Due at Registration	\$

	PBall Child #1	PBall Child #2	LEGO Child #1	LEGO Child #2	Chess Child #1	Chess Child #2	Tennis Child #1	Tennis Child #2	Swim Lessons Child #1	Swim Lessons Child #2	B-Ball Child #1	B-Ball Child #2
June Session			X	X								
July Session					X	X						

### Payment Agreement:

I understand and agree that my one-time payment or weekly payments will be taken in full or as indicated in the Camp Fees Detailed Tale in the Parent Handbook. I understand that an invalid card or card with insufficient funds will result in my child being removed from the program and that all future registrations will be forfeited until outstanding balances are paid in full.

Payors Signature: \_\_\_\_\_

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

### Payment Details:

Payer's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I hereby authorize the use of my:

Visa MasterCard Discover

Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_\_ - \_\_\_\_\_ CVV: \_\_\_\_\_ Zip: \_\_\_\_\_

Print Name as it appears on the card: \_\_\_\_\_

Payer's Email Address: \_\_\_\_\_

Payment Options – Please circle one:

Pay in FULL

Pay Plan (sign up by May 31)