



# City of SeaTac Parks and Recreation Payment Policies for C.A.M.P.S.

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

All fees and paperwork must be completed and paid prior to enrollment into the program. The \$25 annual registration fees are due once per calendar year.

ABC...123 Preschool fees are due monthly and listed in the quarterly department brochure, on a first come first served basis.

Mid-Winter, Spring, Winter Break Camps and NO School Day fees must paid upon enrollment to the camp. Before & After School, Early Dismissals and Conference Days will all be paid through punch cards. Summer Day Camp a holding fee of \$10 per week will hold your child's spot for the week, with remainder due one week prior to camp enrollment. All fees paid after one week prior to enrollment week, will be the weekly fee plus the deposit that was lost. The above camp hours will be 7 am – 5 pm, with extended hours from 6-6 available off a punch card.

Punch cards must be purchased in advance of attendance at the front counter of the SeaTac Park Community Center, or Bow Lake Elementary CAMP room during business hours.

**The Sign In sheets and a staff monitored Excel spreadsheet will be used to monitor hours of use, therefore it is of utmost importance that BOTH you and your child sign in and out on the appropriate date line and along with the correct time of day, or the full days hours may be charged to your card.**

**AT NO TIME will your child be allowed to attend with a negative balance of hours.**

**Time will be charged for hours used, and rounded to the nearest quarter hour. There is no time charged if a child does not attend.**

Hourly Minimums:

- School Days.....2 hour minimum
- Early Dismissal Days ..... 3 hour minimum
- No School Days ..... 6 hour minimum
- Extended Hours for all break CAMPS.....Actual time used for ea ¼ hour

Fees— All weekly and hourly fees will be announced in the current brochure of the department and may change with announcement.

Late Fee--\$1.00 per minute for those children picked up between the hours of 6:00 PM and 6:30 PM, after 6:30 PM a \$2.00 per minute fee will be charged until pick up has been made, and King County Child Protective Services may also be called.

Transportation Fee \$1.50 per trip, per family if school is not being services by the Highline School District Transportation. This will include but not limited to Cedarhurst, Hazel Valley, Southern Heights and Boulevard Park at Glendale, Seattle Christian.

Bus Fee -- \$10/day if child misses bus or van at school and city must go pick them up.

The adult signing the folder and payment policies will be the adult responsible and contact and questions will be directed to them. Third party payment arrangements may be made with Coordinator in charge.

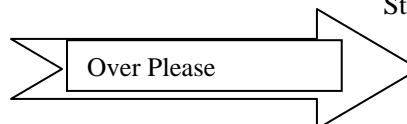
SeaTac Parks and Recreation Department and the Youth camps programs reserves the right to modify any of the conditions of this agreement upon 30 days written notice to the parents or guardians.

By signing below I acknowledge that I have read, understand and agree to comply with aforementioned polices.

X \_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff





# City of SeaTac Parks and Recreation Liability Release for C.A.M.P.S.

**AUTHORIZATION OF ACCEPTANCE:**

I hereby give my permission for \_\_\_\_\_ to attend and participate in any of the following CAMP programs: *ABC...123 Preschool, Before School, After School, Mid-Winter Break, Spring Break, Early Dismissal Days, No School Days, Conference Days, Winter Break Camp and Summer Camp.*

**PARTICIPATION:**

I hereby give permission for my child to participate in all activities and field trips.

**MEDICAL TREATMENT:**

I hereby give permission that my child may be given emergency treatment, to include First Aid and CPR by a qualified staff member. I also give permission for my child to be transported by ambulance, treated by aid car personnel and/or transported to an emergency center for treatment.

In the event I cannot be contacted, I further authorize and consent to the medical, surgical and hospital care, treatment and procedure to be performed for my child by a licensed physician or hospital selected by the Program Director when deemed immediately necessary or advisable by the physician to safeguard my child's health. I waive my right of informed consent to such treatment.

I certify that I am the parent or legal guardian of the above mentioned child and that I have authority to authorize such activities and actions.

**DISCRIMINATION STATEMENT:**

The City of SeaTac Parks and Recreation Department does not discriminate based on race, creed, color, ethnicity, national origin, sex, age, marital status, or sexual preference.

**CPS STATEMENT:**

The City of SeaTac Parks & Recreation department is mandated to report all suspected and visual signs of child abuse or neglect to the Department of Social and Health Services division of Child Protective Services.

\_\_\_\_\_  
**Print Name of Parent/Guardian**

\_\_\_\_\_  
**Signature of Parent/Guardian**

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

By signing the above, I hereby waive and release any and all rights and claims that may be had or might arise against the City of SeaTac Parks and Recreation Program, rental agencies, agents, or representatives for any and all losses suffered while competing in or in connection with the programs sponsored or co-sponsored by SeaTac Parks and Recreation. The City of SeaTac is not responsible for any personal articles lost or stolen. I also allow photographs to be taken during Parks and Recreation activities to be used in the promotion of future City programs.

**This form must be completed 24 hours prior to enrollment in any of the SeaTac Parks & Recreation Youth Camp Programs.**



Access # \_\_\_\_\_  
Date \_\_\_\_\_

Excel \_\_\_\_\_  
Sign In Sheet \_\_\_\_\_