Revere Parks & Recreation Summer Camp Registration Form

<table>
<thead>
<tr>
<th>Child's Name</th>
<th>Child's School</th>
<th>Current Grade</th>
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<thead>
<tr>
<th>Child's Address</th>
<th>Child's Date of Birth</th>
<th>T-shirt Size</th>
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<thead>
<tr>
<th>Guardian #1 Name</th>
<th>Guardian #2 Name</th>
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<thead>
<tr>
<th>Guardian #1 Phone Number 1 (cell)</th>
<th>Guardian #2 Phone Number 1 (cell)</th>
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<tr>
<th>Guardian #1 Phone Number 2</th>
<th>Guardian #2 Phone Number 2</th>
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<tr>
<th>Guardian #1 Email Address</th>
<th>Guardian #2 Email Address</th>
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**Authorized Pick Up and Emergency Contact Information**

In addition to the guardians above, at dismissal and/or in case of emergency, the following people are authorized to pick up my child:

1. Name: __________________________ Relation: ______________ Phone Number: __________
2. Name: __________________________ Relation: ______________ Phone Number: __________
3. Name: __________________________ Relation: ______________ Phone Number: __________
4. Name: __________________________ Relation: ______________ Phone Number: __________

* Please check this box to give permission to your child to sign themselves out and walk-home. *Sixth Grade Only!*

<table>
<thead>
<tr>
<th>Week #1: July 13-16 (4 days)</th>
<th>M T W Th All Days</th>
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</thead>
<tbody>
<tr>
<td>Week #2: July 20-23 (4 days)</td>
<td>M T W Th All Days</td>
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<tr>
<td>Week #3: July 27-30 (4 days)</td>
<td>M T W Th All Days</td>
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<tr>
<td>Week #4: August 3-6 (4 days)</td>
<td>M T W Th All Days</td>
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<tr>
<td>Week #5: August 10-13 (4 days)</td>
<td>M T W Th All Days</td>
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*Due to limited capacity, preference will be given to families that sign up for the entire weeks

**Program Info**

<table>
<thead>
<tr>
<th>8:30 a.m.-2:00 p.m.</th>
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<tr>
<td>Monday-Thursday</td>
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<td>$120 per week</td>
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Signature of Parent/Guardian ________________________ Date ________________________
City of Revere
Parks & Recreation

Summer Camp Handbook
Policies & Procedures

Summer Program
Beachmont Veterans Memorial School
15 Everard Street
Revere, MA 02151

Office
Youth Center
150 Beach Street
Revere, MA 02151
(781) 286-8190
Revere Parks & Recreation Summer Program
Beachmont Veterans Memorial School
15 Everard Street
Revere, MA 02151

Hours / Important Dates
Dates: July 13 – August 14
Monday to Thursday, No Fridays
Hours: 8:30 am-2:00 pm
Cost: $30 per day / $120 per week

Eligibility Information
Students that completed 1st to 6th grade for the 2019/2020 school year.
*Kindergarteners will not be enrolled at this time.
*Financial aid available to qualifying families, contact the Director for an application*

Camp Contact Information
Email: RevereRec@Revere.org during camp hours (8:30-2:00)
Call: 781-286-8190 and your message will be relayed to staff
Emergencies: Please call Camp Coordinator directly

Director: Michael Hinojosa
(781) 286-8190
mhinojosa@Revere.org

Camp Coordinator: Charles Giuffrida
(617) 455-9079 (cell)
cgiuffrida@Revere.org

Find us on Facebook at Facebook.com/RevereRecreation

Find us on Twitter @RevereRec

Find us on Instagram @RevereRecreation
INTRODUCTION

Welcome to the City of Revere Parks & Recreation Summer Program!
We appreciate that you’ve chosen to join us and we look forward to another fun summer together.

In order to ensure your child’s well-being, your child will not be allowed to enter the building until All Forms within this packet are completed with necessary medical records and turned in to the City of Revere Parks & Recreation Department.

This summer program is a fee based program facilitated by the City of Revere Parks and Recreation Department. The camp is staffed by college, high school workers and administered by a team of dedicated recreation professionals.

Our Director, Department Staff, Program Coordinator, Instructors, and Assistant Instructors work together to provide quality programming for students in grades 1-6.

The summer curriculum offers a social distancing, increased spacing and small group based schedule. There will be limited mixing between groups as well as a staggered scheduling on all recreation and leisure activities. The program aims to ensure that the children have a safe, fun, and memorable summer.

DEPARTMENT MISSION

The City of Revere Parks and Recreation Department is committed to enhancing the quality of life for all citizens of the City of Revere by providing active recreational, educational, and cultural programming services for all age groups. It is our objective to provide parks and recreation facilities that are safe, accessible, and aesthetically pleasing to the entire community.

NON-DISCRIMINATION POLICY

The City of Revere insures against discrimination in community programs and employment on the basis of race, color, sex, religion, national origin, sexual orientation, and disability.

PROGRAM DESIGN AND SERVICES

PROGRAM GOALS & SERVICES
This year’s summer session runs July 13th – August 14th, 8:30 am – 2:00 pm.

Our Camp Goals:

- To provide a safe summer camp experience that gives opportunities for growth, development and individual success
- To create a positive atmosphere with enthusiasm, excitement and FUN!
- To create a caring, sharing environment which promotes growth and learning for both campers and staff and develops positive self-esteem and self-worth
- To provide a variety of high-quality, age-appropriate socially distant activities
- To create an experience for each child that last a lifetime

INCLUSION

We welcome children of all abilities to participate in our programs and our Camp Coordinator will work with families to develop effective ways of overcoming barriers to participation and promote effective interactions for children with specific needs. We admit participants of any race, color, ability, national and ethnic origin, religion, political beliefs or marital status to all rights, privileges, programs and activities available to participants in programs. The City of Revere Parks and Recreation Department ensures against discrimination in community programs and employment on the basis of race, color, sex, religion, national origin, sexual orientation, and disability.

DAILY ROUTINE:

Children and staff will be organized into “cohorts” that will remain together all summer or for as long as possible. Cohorts will consist of 10 children and 2 staff. These cohorts will not mix or mingle with other groups while at camp. If cohorts do mix for program activities, we will use mitigation methods such as physical distancing or face coverings to limit exposure.

All campers and staff will remain in their assigned cohort for the duration of the summer program to reducing mixing of groups. We cannot guarantee cohorts will always stay the same but we will strive to do so whenever possible and to the best of our ability.

Social distancing of 6 feet between all campers and staff will be required. If social distancing cannot be maintained, masks will be required by both staff and students. Staff will be required to wear masks the entire time indoors and anytime social distancing cannot be maintained outdoors.

Program activities will be held outdoors as much as possible to minimize potential exposure to campers and staff but temperature and attention spans will force us inside for activities as well. We will potentially utilize the gymnasium, computer lab, cafeteria, auditorium, and classrooms when inside. Spaces will be cleaned and sanitized each night and mutually shared spaces will be cleaned and sanitized in between group usage with staggered schedules.

Independent or self-directed play will take place whenever possible and electronics are allowed.

Items will be assigned to individual children where possible to reduce the quantity of items being shared. Shared items will be cleaned and disinfected between uses.
CLOTHING

Loose, cool, play clothes that are easily washable are strongly recommended; **sneakers or athletic shoes are required.** Hats with visors to keep out of the sun and all-day sun block and lip balm with an SPF of 15 or higher are also recommended.

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<thead>
<tr>
<th>BREAKFAST</th>
<th>LUNCH</th>
<th>SNACK</th>
<th>NUT FREE ZONE</th>
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Breakfast and lunch will not be served this summer; children will need to eat breakfast at home and bring their own lunch.

The program will be prepared to serve breakfast bars to any student who, for whatever reason, was unable to eat breakfast at home during the morning. The program will also have extra pre-made sandwiches available for lunch, should anything come up.

Each cohort will be provided a 15 minute window to eat their lunch inside or a 30 minute window to eat their lunch outdoors. Cohorts will be able to see each other at lunch when eating outside. Indoor lunches will be staggered so tables can be cleaned and disinfected.

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<tr>
<th>REGISTRATION PROCEDURES &amp; SCHEDULE CHANGES</th>
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All paperwork **MUST** be turned in before a child can begin. This includes medical forms and immunization records from your child's physician.

Registration forms can be returned to the Youth Center by scheduling a date/time, contact Jennifer Duggan by emailing iduggan@revere.org or via email at RevereRec@Revere.org no later than July 6th.

At this time, we are accepting children who have completed first grade through 6th grade. Kindergarteners and 7th graders are not being enrolled at this time.

**SCHEDULE CHANGES**

Schedule changes are not guaranteed. If approved, schedule changes can take anywhere from 1-5 days to implement; we strongly recommend parents enroll in advance to avoid issue.
TUITION/PAYMENTS

Tuition payments are due upon registration for the summer program.

All checks or money orders should be made out to the City of Revere and should be handed in at registration. Please be sure to include the child’s first and last name on the check/money order. Families may also pay by credit card over the phone by calling Parks and Recreation Department at (781) 286-8190. Payments cannot be made at drop off or pick up.

No portion of such fees or tuition can be refunded due to absence.

If a check is returned for non-sufficient funds, the city will notify you immediately. The city will be forced to pass on any and all charges that may result from an overdrawn account.

The City of Revere Parks & Recreation summer program does not accept vouchers.

FEE ASSISTANCE

The City of Revere Parks & Recreation Department believes that all residents should have the opportunity to participate in recreational programs. The Department will attempt to provide leisure opportunities for residents faced with financial hardship, or, in need of temporary assistance.

Financial aid is available to qualified applicants; assistance provided to Revere residents only. Financial aid forms are available at the Youth Center on Beach Street or you may contact the Director for an application to be mailed or emailed to you. Director can be reached at mbinojosa@revere.org

We accept applications on a first come, first serve basis; financial aid is awarded to a limited number of families based off of the camp’s total enrollment.

Families deemed eligible are typically awarded a 25%-75% reduction in camp costs.

The financial aid application deadline is July 6th.
Financial aid is awarded on a case by case basis, family situations are not compared to one another.

UNRECOGNIZED PERSONS POLICY

Our summer camp makes use of the field and park outside the Beachmont Veterans Memorial. While we are not able to restrict unrecognized persons from the field and park outside of our school, we are able to restrict people who are acting in an unusual and/or unsafe manner around the campers.

When an unrecognized person is observed acting unexpectedly or suspiciously (i.e. taking pictures of the campers, engaging the campers in conversation, etc.) the following protocol is followed: 1. Staff will make note of the person’s location, description, and the suspicious activity they are undertaking.
2. Staff will report the person, their location, description and activity to senior camp employees.
3. Senior staff will approach the person, report that they have been the subject of a complaint, and inquire about their suspicious activities. They will make the person aware that they are interrupting camp activities and endangering the children. The person will be asked to move to another location or to leave the park (at the discretion of senior staff pending the results of their questioning).
4. If the unrecognized person refuses to leave the area and police involvement becomes necessary, the camp will move their activities away from the person and the unsafe scene; while Revere Police investigates the situation.

**PICK-UP & DROP-OFF POLICY**

Parents will be provided a Health & Wellness checklist that must be completed and submitted daily. Forms can be turned in to staff at drop-off by parent of child.

Help us with morning drop-off by saying goodbye to your child close to or inside your vehicle as you approach. Please maintain physical distance with other parents or children if you exit your vehicle or walk to the program. Please wear a mask or face-covering at all times!

When dropping off, parents are to remain in their vehicles as much as possible. Children can be checked in at the vehicle and walked inside to wash their hands and wait for their classmates.

When picking-up, a parks & rec staff member will be outside beginning at 1:00 pm each day. You can tell that staff member who your child is and they will relay the pickup request to staffers inside the building. Your child’s group leader will then escort your child to your car outside.

Parents/guardians must notify staff when person(s) other than parent/guardian is picking up a child and the name is not listed on the family’s registration form. Additional names can be added at any time during the program. The individual must show a photo ID before the child will be released.

Emergency Situations: In emergency situations a telephone call from a parent can request a new pick up person. If a child has been picked up by individual through telephone authorization, the parent must verify the telephone call/pick up person in writing the next day. The individual must show a photo ID before the child will be released.

**EMERGENCY CLOSINGS**

Should the Parks & Rec program be required to close early in the event of extreme weather conditions, every effort will be made to notify parents/guardians in order to make alternate arrangements. In such cases, parents are asked to pick up children as promptly as possible in order to ensure the safety of all families and staff. Please be sure to keep your telephone numbers, (home, work, cell) and emergency contacts other than the parent(s)/guardian(s) up-to-date in case we have to contact you.
If circumstances require an immediate evacuation from the building (fire, toxic fumes, etc.) the children will be evacuated and transported to an alternative site. Parents/guardians will be notified by phone to pick-up children immediately. In an event of power failure or loss of heat, or water, the program will close and parents will be notified to pick up their children immediately.

**HEALTH INFORMATION**

It is imperative that parents and families provide accurate and relevant information pertaining to their child’s health. In addition to the medical forms attached to this packet, state law requires a current medical record for each child. This form must be completed by the child’s physician and returned **BEFORE** the start of summer camp (many doctors offices will issue a print out of your child’s immunizations and physical exam records). Those children without completed medical forms **will not** be allowed to begin camp and no refunds will be issued.

See health form for further information and to disclose conditions.

**HEALTH CARE POLICY & PROCEDURE**

Parents must pre-screen their child at home; please keep home if they don’t feel well!

Children who become ill during a program should be at home, and parents will be notified to pick up their child within an hour.

Refunds or credits are not issued if a child misses camp due to illness. In the event of a severe, prolonged illness, please contact Parks & Recreation Director about a credit or refund.

If campers are exposed to a serious or contagious illness while at the program, parents will be notified in person or over the phone as soon as possible. The parks and recreation department would then work with the Board of Health and parents to address the situation.

All medication prescribed to campers must be administered at home; our summer camp is not authorized to administer medicine to children. Our summer camp staff will hold inhalers or epi-pens for children in our medical box as needed.

Sunscreen, hand sanitizer and insect repellents are considered topical medications. Therefore, written authorization is required to apply these products. If you are sending from home - these products should be in a plastic zip-lock bag and marked with the child’s name in permanent ink.
BEHAVIOR

It is our responsibility to provide a safe and pleasant environment for all summer program attendees.

There are instances where a child may not be ready for the program or the program is not appropriate for a child’s growth and development. We reserve the right to suspend children. We reserve the right to withdraw a child from the summer program without notice based on behavior.

If a child is asked to withdraw, tuition charges will cease and a refund for remaining days will be granted.

Further, we stress responsibility and respect for yourself, others and equipment, maximizing the growth and development of children and protecting the group and individuals involved. Children are encouraged to use their words and report hurtful behavior to their counselors. The use of “Time Out” for repeat offenses is used, as is refusal to go on trips. At the discretion of the camp staff, a meeting between the parents, child and staff may be called and held before any child is dismissed from the program. A child who is a repeated threat to him/herself and others will be removed from the program after all avenues have been explored.

BULLYING AND CYBER-BULLYING POLICY

The City of Revere Parks and Recreation department will be following our city’s school district policy. Many children encounter bullies in their formative years, but for those children who are constantly teased, called names, picked on, excluded, harassed, or have been the object of cruel behavior by other children, the effects of bullying are hurtful and potentially long-lasting. Children and their parents need to feel that they are safe when at camp. The City of Revere Parks and Recreation Department does not tolerate bullying. When bullying is identified by staff members and or campers, both the bully and the victim(s) will be questioned and their parents will receive an incident report. If a second offense is reported and confirmed the offending child will be dismissed from camp with no refund given.

PERSONAL PROPERTY

As a rule, all non essential personal property should remain home; however electronic devices are allowed. Children are responsible for their own personal property at all times. Children can and will be told to leave personal property at home if it becomes an issue. Children must put personal property away whenever told by staff.

**Please note your child cannot start the Parks & Recreation summer program until the parent/guardian has read and signed the Parent Handbook Receipt and turned in the Medical Form**
Revere Parks and Recreation Summer Program
Parent Handbook Receipt

Computer Usage

Upon signing - Permission is given for my child to use the computers within the school during the Parks & Recreation Program summer session. I understand the access is for educational purposes and that the Revere Public School System and the Parks & Recreation department has taken precautions to eliminate controversial material from being viewed by users. However, I recognize that it is impossible to restrict access to all controversial materials. I will not hold RPS and the Parks & Rec or any staff member responsible for materials acquired over the Internet.

Watch Movies

Upon signing - Permission is given for my child to view movies (G, PG) during the summer program.

Field Trips

Upon signing - I give my child permission to travel to all field trips and walking trips scheduled by the Parks and Recreation summer program for the summer of 2020.

General Release and Consent

I, ______________________ (initial) do hereby consent to participate in this voluntary program, or allow my child to, and do forever release, acquit, discharge, and covenant to hold harmless the City of Revere, the City of Revere Parks & Recreation Department, and the officers, employees, heirs, volunteers and assigns of the city of Revere and the City of Revere Parks and Recreation Department, from any and all actions, causes of action or claims arising out of, directly or indirectly, all known and unknown personal injuries or property damage which I may now or hereafter have as the participant, or guardian of the participant, and also claims or right of action for damages which said participant has or hereafter may acquire, either before or after he/she has reached his/her majority resulting from his/her participation in the City of Revere or City of Revere Parks and Recreation Department programs including the above listed programs and or/events.

Photography

I ______ (initial) do hereby grant the Revere Parks & Recreation Department permission to use my name, likeness, image, voice, and/or appearance as such may be embodied in any pictures, photos, video recordings, audiotapes, digital images, and the like, taken or made on behalf of the Revere Parks & Recreation Department activities. I understand and agree that the Revere Parks & Recreation department has complete ownership of such pictures and material and may use them for any purpose consistent with the department's mission. These uses include, but are not limited to illustrations, bulletins, exhibitions, videotapes, reprints, reproductions, publications, advertisements and any promotional or educational materials in any medium now known or later developed. I acknowledge that I will not receive any compensation, etc for the use of such pictures and hereby release the Revere Parks & Recreation Department and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

Sunscreen, Hand Sanitizer & Bug Spray

I ______ (initial) do hereby grant the Revere Parks & Recreation Department permission to apply sunscreen, hand sanitizer and or insect repellant to my child upon request or as needed for outdoor physical activities and hereby release the Revere Parks & Recreation Department and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

I have received and read my copy of the Revere Parks and Recreation Summer Program Handbook and understand the rules, policies, and procedures. I will contact department personnel if I have any questions or concerns.

Child’s Name(s)____________________________________

School: ____________________________________________

Parent/Guardian signature ____________________________ Date ____________________________
Revere Parks and Recreation Department  
Emergency and Medical Information Form

In order for staff to better service your child, we are requesting further information about their health and emergency contacts in the event that we are unable to reach you. Be sure that the names of parents and/or legal guardians are listed on enrollment forms and the addresses are accurate.

Student’s Name ___________________________ Grade ________________

Student Health Information

Below is a partial list of medical conditions. Please complete this form and add any other relevant information about your child on the reverse side.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Hearing Loss</td>
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<td>Asthma</td>
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<td>Diabetes</td>
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<td>Vision Problems</td>
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<tr>
<td>Seizures</td>
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<tr>
<td>Other:</td>
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Medication(s) taken at home ____________________________________________

[Note: Since there is NOT a nurse on-site at this program, please arrange for your child to take his/her medication before or after attending the program.]

### Allergy Information

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<thead>
<tr>
<th>Category</th>
<th>Description</th>
<th>Reaction</th>
<th>Treatment</th>
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<tbody>
<tr>
<td>Food</td>
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<td>Drugs</td>
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<td>Other</td>
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Emergency Contacts  
Please list people to contact in the event of a medical issue

1. Name: ___________________________ Phone Number: ____________
2. Name: ___________________________ Phone Number: ____________
3. Name: ___________________________ Phone Number: ____________
4. Name: ___________________________ Phone Number: ____________

See Next Page
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<table>
<thead>
<tr>
<th>Name of Family Physician and Contact:</th>
<th>Additional Information</th>
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<th>Insurance Provider:</th>
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I hereby authorize the City of Revere Parks and Recreation staff to contact emergency services and or medical care in the event of an emergency involving my child or children.

Name: ___________________________ Date: ________________

I have provided the City of Revere Parks and Recreation Department all necessary and accurate information regarding my child’s medical history and present issues. I have provided contact information for my child’s physician, as well as, an up to date and signed medical record of my child’s current conditions and vaccinations.

In the event of an emergency requiring medical attention beyond first aid, I/We hereby grant permission to a physical or hospital personnel designated by the Revere Parks & Recreation Summer Program to attend to such minor. I have fully read and understand the terms to this release and waiver.

__________________________  ________________________
Parent/Guardian’s Signature  Date

THIS COMPLETED FORM MUST ACCOMPANY REGISTRATION OR CHILD WILL NOT BE ENROLLED.
CITY OF REVERE

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

The city of Revere Parks and Recreation Department has created new protocols and put in place preventative measures to reduce the spread of COVID-19. However, city of Revere Parks and Recreation Department cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending any program may increase your and/or your child(ren)s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to, or infected by, COVID-19 by attending the city of Revere Parks and Recreation program, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Revere Parks and Recreation program may or may not result from the actions, omissions, or negligence of myself and others, including, but not limited to, Revere Parks and Recreation employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself including, but not limited to, illness, personal injury, disability, or death, and for any damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)s attendance and/or participation at the Revere Parks and Recreation program. On my behalf, and on behalf of my child(ren)s, I hereby release, covenant not to sue, discharge, and hold harmless the city of Revere, and its Parks and Recreation Department, including, but not limited to, its employees, agents, representatives and assigns, from any and all claims, including, but not limited to, all negligence and liability claims, or any claims, actions, damages, costs or expenses of any kind arising out of or relating to myself or my child(ren)s participation or attendance in or at the Revere Parks and Recreation program. I understand and agree that this release includes any claims, including those based on the actions, omissions, or negligence of the Revere Parks and Recreation Department, its employees, agents, representatives, or assigns whether a COVID-19 infection occurs before, during, or after participation in any Revere Parks and Recreation program.

Signature of Parent/Guardian Date

Print Name of Parent/Guardian Name of Participant(s)
Revere Parks & Recreation Summer Day Program
Beachmont Veterans Memorial School

Daily Health & Wellness Check/Participant Screening

To comply with MA guidelines, every day each participant must print, complete, and bring a new copy of this wellness check PRIOR to attending a program. Extra copies will be available at programs, if needed. All responses and individual temperature check results will be maintained on file.

Participant's Name: _____________________________  Date: ___/___/2020

1. Today or in the past 24 hours, has the participant or any household members had any of the following symptoms?
   A. Fever (temperature of 100.0°F or above), felt feverish, or had chills? □ Yes □ No
      ○ Current temperature: _______ °F (taken by parent at home)
   B. Cough? ................................................................. □ Yes □ No
   C. Sore throat? .......................................................... □ Yes □ No
   D. Difficulty breathing? ............................................... □ Yes □ No
   E. Gastrointestinal symptoms (diarrhea, nausea, vomiting)? ............ □ Yes □ No
   F. Fatigue? ................................................................. □ Yes □ No
   G. Headache? ............................................................ □ Yes □ No
   H. New loss of smell/taste? ........................................... □ Yes □ No
   I. New muscle aches? ................................................... □ Yes □ No
   J. Any other signs of illness? ........................................... □ Yes □ No

*Please note fatigue alone will not exclude a child from participation

2. In the past 14 days, has the participant had close contact with a person known to be infected with the novel corona virus (COVID-19)? □ Yes □ No

..........................

I, ____________________ (parent/caregiver signature), am reporting all responses of the participant accurately. I understand that if any of the above answers are yes, my child will not be allowed to enter the facility and therefore must stay/return home with their parent or caregiver.

---------- Staff Use Only ----------

Staff Member's Name: ____________________  Group: _____  Location: ________________

1. Participants Non-Contact Visual Inspection: Complete Y / N  Time: ____ ____ AM/PM

2. Visual inspection: Do you notice any flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness? .......................................................... □ Yes □ No

Once this form is completed, reviewed, and the participant performs hand hygiene, they are allowed on site.