

# PARENT HANDBOOK



**BODYWORKS**  
FAMILY SPORTS CENTERS

# INDEX

Bodyworks Mission and Vision .....	3
Camp Registration .....	4
Welcome To Camp .....	5
Camp Staff .....	6
Camp Curriculum .....	7
Camp Curriculum .....	8
Arrival & Departure .....	9
What To Bring.....	10
Camp Tuition Rates & Policies .....	11
Health & Safety .....	12
Child Safety .....	13
Child Code Of Conduct .....	14
Parent Code Of Conduct .....	15
Termination Of Care .....	16
Camp Communication .....	17
Forms That Need To Be Completed .....	21-35



### **OUR MISSION**

To love, honor and serve God in all we do.

### **OUR MISSION STATEMENT**

To be God's hands and feet by serving our members and one another.

### **OUR CORE VALUES**

Love, Service, Integrity, Generosity, Fun

Ultimate Bodyworks Experience (UBE)

Creating positive, uplifting, fun and meaningful encounters that people will want to recreate or know more about, any time anyone comes in contact with a part of Bodyworks.

### **OUR VISION**

To be God's church disguised as a health club.

# CAMP REGISTRATION

## Please read carefully for instructions on how to complete the registration process correctly

Thank you for picking up a registration packet! We are excited to welcome your family into the Bodyworks Camp program! Please be sure to pick up a separate folder for EACH child, as required by our licensing regulations. Here are a few tips to help you while you complete your registration packet:

- ◇ All forms must be completed in order for your child to attend Bodyworks Camps
- ◇ Camp is for ages 6-13 ONLY. Children may not attend camp until they are 6 years of age. No exceptions.
- ◇ Admission Form Pg 1: Be sure to include the name, address and phone number for your emergency contact. This must be someone other than the primary guardian.
- ◇ Admission Form pg 2 & 3: We must have the name, address and phone number for the school that your child attends.
  - ◇ As long as we have the complete information for your child's school, and the school has a current immunization record, we do not need a copy of the immunization records.
- ◇ Pick-Up Slip: Please list any person that may pick your child up from camp ( this includes mom & dad ). Please list their name and phone number, and if possible, their drivers license number. Camp staff will check the drivers license EACH DAY of whoever is picking up your child from camp.
- ◇ Camp Calendar ( SUMMER CAMP ONLY ): This form allows you to select which weekdays that your child will be attending camp. If you will be using camp for the full week, please check the box indicating all week. If you are using a partial week, please place a check mark in the box indicating which days your child will be using camp. Please leave any unneeded weeks blank.
- ◇ Camp Payment: Camp payment and registration packet drop off must be taken during a scheduled registration date. A camp staff member must review each packet prior to enrolling your child. These dates will be updated online at [www.gobodyworks.com](http://www.gobodyworks.com). At the time of registration the one-time enrollment fee and the child's first week payment will be taken.

Please contact Mia Benson for further questions, more information and registration dates!

**MIA** BENSON  
CAMP DIRECTOR



(806) 687-4242



[camps@gobodyworks.com](mailto:camps@gobodyworks.com)



5402 4th Street  
Lubbock, TX 79416



[GoBodyworks.com](http://GoBodyworks.com)

# WELCOME TO CAMP

## BODYWORKS CAMP HISTORY

Bodyworks began hosting a small youth summer camp program in 2002. This first youth program took place at Bodyworks Fitness and Wellness Center on 34th and Loop 289 and included around 30 children. The summer youth camp expanded in 2006 when our Bodyworks Family Sports Center opened on 82nd and Slide. Moving the camp program to our Family Sports Center allowed our campers to enjoy an access to a basketball court, play in our 3 story indoor kids maze, climb our 26 foot Spider Climber, play on our CyberZone gaming equipment and of course, swim in our Indoor Water Park and Year-Round Pool. This was the same year our Spring Break camp was introduced. When our newest location opened in 2011, we had yet another chance to expand our spring and summer Youth Camp Program. This location is our Family Life Center on 4th and Slide, and allows campers to participate in activities on our basketball court, indoor turf field, trampoline basketball, indoor ropes course, indoor rock wall and 2-level Lost City Laser Tag arena. This was our first year to have camp at two locations. Over the summer of 2011, our camp became a licensed child care program through the Texas Department of Family and Protective Services. This licensing process holds our camp and camp directors to a high standard of excellence and safety to ensure the best environment for our campers. Over the years our camp programs have changed and increased, and we hope to continue growing our camp program to reach even more children through the coming years!

## CAMP PHILOSOPHY

We believe that childhood should be celebrated through active play, physical challenges, creative outlets and supportive relationships with peers and adults. We strive to provide a safe, engaging, active and fun environment for our youth campers. We hope to encourage and promote growth in the child's mental, physical and emotional skill set, enriching their mind, heart, body and spirit.

## CAMP VISION

Throughout the course of our camp, we strive to provide the following goals and skills for each of our campers.

- ◇ Teach skills that develops the child's mind, heart, body and spirit
- ◇ Promote a healthy lifestyle through exercise and nutrition
- ◇ Encourage creativity
- ◇ Develop friendships
- ◇ Expand the child's view of community and responsibility
- ◇ Create a physically, mentally, and emotionally safe environment

# CAMP STAFF

Our camp staff team members are held to a high standard of safety and excellence. Before ever working with your children, our staff undergoes a criminal history check as well as an FBI fingerprint check. Team members receive training on State standards and policies, Bodyworks standards and policies, and are required to attend 24 hours of annual training. This annual training includes a variety of classes, such as child development, nutrition, physical fitness, discipline and guidance, teacher/child interaction and age-appropriate curriculum.

All of our camp team members receive training in CPR, First Aid, Identification and Reporting of Child Abuse and Neglect, and the Preventing the Spread of Communicable Diseases. We look for camp team members that are highly motivated and passionate about working with children. While many of our team members have studied in fields such as child development and education, we welcome team members who have studied business, exercise and sports science, nutrition and many other topics. We feel that having a variety of staff from different backgrounds helps us create a well-rounded environment for our campers. While our staff may come from various backgrounds, we look for camp team members who believe in and adhere to the Vision, Mission and Guiding Principles of Bodyworks and Bodyworks Camps.

*“Make each day  
your masterpiece”*

- JOHN WOODEN

# CAMP CURRICULUM

## CAMP GROUPS

We divide our campers into groups based upon age, gender and type of activity. Typically, groups are as follows: 6-7 year olds, 8-9 year olds, 10-13 year old boys, 10-13 year old girls. We strive to provide age-appropriate activities for each camp group.

## REQUIREMENTS

Children must be fully potty-trained to attend camp. Due to the nature of certain events we do not allow children in diapers to attend camp. We also require campers to have all immunizations completed before attending camp for safety of all children. Parents may provide us with either the copy of immunization records or the name and phone number of the camp the child attends so that staff can easily attain immunization records.

To claim exclusion for reasons of conscience, including a religious belief, a signed affidavit must be presented by a child’s parent or legal guardian, stating that the child’s parent or legal guardian declines vaccinations for reasons of conscience, including because of the person’s religious beliefs. The affidavit will be valid for a two-year period. The child who has not received the required immunizations for reasons of conscience, including religious beliefs, may be excluded from camp in times of emergency or epidemic declared by the commissioner of public health.

## CAMP RATIOS

We strive to keep our staff to child ratios: 1:15, which involves more staff than is required by the state. Each group has a Group Leader that will be a consistent camp counselor for your child’s group throughout camp. In most cases, groups larger than 15 will also have a Group Assistant. In addition to the camp counselors dedicated to each specific group, we have a camp counselor “float” staff that assists groups as needed. The Site Director will be present during the majority of camp hours.

<b>4th St. Family Life Center</b>	<b>82nd Family Sports Center</b>
<ul style="list-style-type: none"> <li>• Indoor Ropes Course</li> <li>• 2-Level Lost City Laser Tag Arena</li> <li>• Full Court Basketball Gym</li> <li>• Indoor Turf Field</li> <li>• Trampoline Park</li> <li>• Rock Climbing Wall</li> <li>• Active Sports Specific Classes</li> <li>• Cooperative P.E. Type Activities</li> <li>• Arts &amp; Crafts</li> <li>• Morning And Afternoon Snack</li> <li>• Lunch Included</li> </ul>	<ul style="list-style-type: none"> <li>• Indoor Water Park</li> <li>• Year Round Swimming Pool</li> <li>• 26ft. Spider Climber</li> <li>• Basketball Court</li> <li>• Play In Our Kids Club</li> <li>• Cooperative P.E. Type Activities</li> <li>• Arts &amp; Crafts</li> <li>• Morning And Afternoon Snack</li> <li>• Lunch Included</li> </ul>

# CAMP CURRICULUM

## MORNING ACTIVITIES

Upon arrival campers will get signed in and will venture into the morning play area. At 8:30 A.M. the campers will be divided into their respective groups and will begin their morning schedule. Campers will rotate through activities lead by their Group Leader. Scheduled activities range form 30-60 minutes in length, and include cooperative P.E. type games, sports specific classes, character development classes, creative development classes, and use of facility attractions. At 4th Sports Camp this includes our 2-level Lost City Laser Tag, Indoor Ropes Course, Indoor Rock Climbing Wall, Turf Field, Full Court Basketball, Trampoline Basketball and Ping Pong. At our 82nd St. Splash Camp this includes our Basketball Court, 26 Foot Spider Climber, Indoor Water Park and Year-Round pool.

## SPLASH CAMP AQUATICS

Our campers will have the choice of playing in our Indoor Water Park (1ft deep) or in our Year-Round Pool. All campers use the aquatics areas from 11:00 A.M. - 3:00 P.M.. Before using the year-round pool, campers must complete a swim test. If they are able to complete the swim test unassisted they will be able to swim in the year-round pool without a life jacket. If they do not pass the swim test or choose not to complete the swim test, they will be required to wear a life jacket at all times while in the year-round swimming pool. We will provide your child with a special wristband that lets all of our staff know a life jacket must be worn while in the year-round pool. When our campers are using the aquatics areas, our Aquatics Director, Head Lifeguard, lifeguard staff and camp counselors are on the pool deck.

## LUNCH & REST TIME

Our youngest two groups have lunch and rest time together and the oldest two groups have lunch and rest time together. Through the morning snack, afternoon snack, and lunch, your child will be served fruit, vegetables, whole wheat, protein, dairy and very limited sugar. If your child has any dietary restrictions please let your Site Director know as soon as possible so that we can accommodate your child. After lunch our groups have a rest time. During this time campers lay down in a quiet environment. We play age appropriate movies during this 45-90 minute rest time. Campers are not required to sleep but they are required to lay down quietly.

## AFTERNOON ACTIVITIES

After rest time the campers divide into their groups and begin their afternoon schedule. Campers will rotate through the various camp activities until 4:30 P.M. From 4:30-5:30 P.M., the remaining campers will combine into one space to create a smooth pick-up process.



# ARRIVAL & DEPARTURE

## ARRIVAL PROCEDURES

Upon arrival to the Bodyworks Camp Facility, the parent or guardian must escort the camper(s) inside. Parents will go to our Camp Sign-In table located near the front desk and will write in the time of arrival for each child, any special instructions for their child, and will initial on the sign in form. Campers will receive a colored wristband that indicates which color group your child is a part of. Your child's swimming belongings will be placed into a labeled mesh water bag and put into the "swim buckets". Your child's nap belongings will be placed into a separate labeled plastic bag and put into the "nap buckets". After the check in process camp counselors will direct the children to their first morning activity. Groups participate in free play until 8:30 A.M.. Then the groups are divided up into their color groups and begin their scheduled activities. If you arrive after 8:30 A.M., the groups will be separated throughout the gym. Our sign-in table is put away at 9:00 A.M.. If you arrive after 9:00 A.M., please go to the front desk and they will page a camp team member to assist you. Please be aware that if you arrive after 9:00 A.M. it will take a few minutes to get your child signed into camp.

## DEPARTURE PROCEDURES

The parent or guardian must present their driver's license upon pick-up each day. Camp team members will verify the driver's license with the name and driver's license number on the pick-up form that you have provided. Only the people written on this pick-up list will be permitted to pick up your child. After the name has been verified as an acceptable pick-up guardian, the guardian will write the sign out time and initial on the sign-out form. Any incident reports (recording injury) or action forms (recording behavioral issues) will be available to review and to sign at the time of pick up. Swim items are to be taken home and washed each day. Nap items may stay throughout the week, but must be taken home and washed each Friday. The camp sign-out table will be ready at 4:30 P.M. each day. If you arrive before 4:30 P.M., please go to the front desk and they will page a camp team member to assist you. Please be aware that if you arrive before 4:30 P.M. it will take a few minutes to get your child signed out of camp. Late pick-up is available until 5:30 P.M. For each minute after 5:30 P.M. there will be a late pick-up fee per child of \$1 per minute that will be required to be paid before the next drop off.

# WHAT TO BRING

## Please bring the following items to camp:

- ◇ Athletic Shoes are required
- ◇ Flip Flops are optional - **only use for at the pool**
- ◇ Athletic apparel
  - ◇ Clothing that will allow your child to comfortably participate in physical activities
- ◇ Small pillow and blanket for rest time
  - ◇ Must be labeled with your child's first and last name
  - ◇ Items will be placed into a plastic bag and labeled each week at camp to help prevent the spread of communicable diseases
  - ◇ Sleeping bags, full size pillows, stuffed animals, and oversized blankets are **not permitted**
  - ◇ Items may be left at camp throughout the week
  - ◇ Items **MUST** go home each Friday and washed
- ◇ A fantastic, enthusiastic and contagiously positive attitude
- ◇ At 82nd Splash Camp Only
  - ◇ Appropriately fitting swim suit
  - ◇ Items will be placed into a mesh wet bag provided by Bodyworks ( replacement bags are \$5 ) and labeled each day at camp to prevent the spread of communicable diseases
  - ◇ All items must be labeled with child's 1st and last name. If items are not labeled a camp team member will label with a sharpie marker.

## Please leave the following items at home:

- ◇ **Any electronic device** including, but not limited to:
  - ◇ Cell phones ( If a camper needs to bring a cell phone for after camp activities, it can be checked in with a director upon drop off and checked out upon pick up )
  - ◇ iPod or MP3 Player(s)
  - ◇ Gaming Device(s)
- ◇ In-appropriate clothing including, but not limited to:
  - ◇ Skirts are not appropriate for camp activities
  - ◇ Shorts should be appropriate length
  - ◇ Clothing and swim suits should not be see-through
  - ◇ Inappropriate or vulgar words and/or images on clothing will not be tolerated for children or parents
  - ◇ Girls shirts should cover the stomach and chest appropriately
  - ◇ Boys are not permitted to wear ribbed tank tops in substitute of a t-shirt
- ◇ Toys from home including, but not limited to:
  - ◇ Pool Toys
  - ◇ Figurines, books, cards, games, nail polish, jewelry, etc
- ◇ Whining, complaining, laziness

# CAMP TUITION RATES

## Payment Options

- ◇ Registration fee: \$20 per family
- ◇ Members: \$125.00 for first child, \$119.00 for each additional
- ◇ Non-Members: \$135.00 for first child, \$129.99 for each additional
- ◇ Receive \$10 off registration fee for signing up before Monday March 6th

Campers are still required to pay a one-time registration fee, per family, of \$20 dollars.

## Registration Table Dates

Register your kids for camp at any of our open registration table dates, or Monday-Friday at either our 82nd or 4th st. locations.

- ◇ Monday, **February 13th** 5pm-7pm - 82nd & 4th
- ◇ Saturday, **February 18th** - 12pm-2pm - 82nd
- ◇ Saturday, **February 25th** - 12pm - 2pm - 4th
- ◇ Monday, **February 27th** - 5pm-7pm - 82nd & 4th
- ◇ Saturday, **March 4th** - 12pm - 2pm - 82nd (*Last chance for discounted registration fee!*)
- ◇ Saturday, **March 11th** - 12pm - 2pm - 4th

## Registration Process

Bodyworks is a state-licensed spring/summer camp provider. We have several state required forms that must be completed at the time of child registration.

## Drop In Rates

By the day: \$39.99 per day (no discount for members). Campers are still required to pay a one-time registration fee of \$20 per family.

# CAMP TUITION POLICIES

## What is due at registration?

Camp registration payment and the week's payment must be paid for each child upon registration. The registration fee and week's payment holds your child's place at camp.

## What if I am late picking my child up from camp?

Camp activities end between 4:30 P.M. - 5:00 P.M.. We offer late pick up until 5:30 P.M.. There is a \$1 late pick up fee for each minute after 5:30 P.M., per child.

## Does my child need to bring money to camp?

No. All snacks, lunches, crafts, and activities are covered in the weekly tuition cost.

## Non-Refundable Policy

All camp payments are final and non-refundable.

# HEALTH & SAFETY

If a child becomes ill while at camp, he/she will be isolated from the other children. The parent will be immediately notified to pick up the child within the hour. If we are unable to reach the parent, the emergency contact will be notified.

If your child presents any of the following symptoms, you will be contacted for immediate pick up.

- ◇ **Fever** of 100.0 degrees F. or higher
- ◇ **Diarrhea**
- ◇ **Vomiting**
- ◇ **Rash** that does not have a physicians note permitting the child to return to camp

If your child contracts any of the following diseases, he/she must be excluded until:

- ◇ **Chicken Pox and/or Shingles:** after all blisters have scabbed over
- ◇ **Ear Infection:** after 24 hours
- ◇ **Fever:** after fever has subsided for at least 24 hours without the aid of fever reducing medication
- ◇ **Head Lice:** after one complete treatment and removal of all nits
- ◇ **Pink Eye:** after the child has been on medication for 24 hours and there is no visible sign of pink eye
- ◇ **Ringworm:** after medical treatment with a fungicidal ointment and note from a physician
- ◇ **Strep Throat:** after the child has been on medication for 24 hours

If your child contracts any communicable disease, please inform your Site Director. If your child is exposed to a communicable disease while at Bodyworks Camp, a notice will be posted.

While in our care, campers are watched and supervised carefully. However, as children play, incidents may occur. In the instance of an incident involving physical injury, an Incident Report will be completed and available for you to look over and sign upon pick up. In the instance of moderate injury, a parent will be immediately notified, and will decide if they would like to pick the child up early from camp or seek medical treatment. In the instance of serious injury, the parent and emergency care units will be notified immediately.

## **NOTICE: IF YOUR CHILD MUST TAKE MEDICATION**

If your child must take medication while at camp you must comply with the State guidelines for dispensing medication. The authorization for Dispensing Medication Form is attached and must be completed accurately; include the medication in its original container, labeled with the child's name and with directions to administer the medication. Prescribed medication must also include the date and name of physician. If the required information is not provided, we will not be able to administer medication to your child during camp. Medication will only be dispensed by the Site Director or Operation Director.

# CHILD SAFETY

## REPORTING ABUSE & NEGLECT

Texas law requires caregivers to report any suspected child abuse or neglect to the Texas Department of Family and Protective Services or law enforcement. Call 1-800-252-5400 to make confidential reports. Failure to report suspected abuse or neglect is a crime. Employers are prohibited from retaliating against caregivers who make reports in good faith.

### **Keep Children Healthy:**

Protect your children from illness and disease:

- ◇ Wash your hands and children's hands often
- ◇ Keep ill children at home
- ◇ Make sure that children drink plenty of water
- ◇ Discuss special-care needs with caregivers

## GANG FREE ZONE

A gang-free zone is a designated area around a specific location where prohibited gang related activity is subject to increased penalty under Texas law. The specific locations include child care centers. The gang-free zone is within 1,000 feet of a child care center. The purpose of gang-free zones is to deter certain types of criminal activity in areas where children gather by enforcing tougher penalties.



# CHILD CODE OF CONDUCT

## Code of Conduct:

- ◇ Swearing or cursing is prohibited by staff, children, and parents
- ◇ Threatening of staff, parents, or children will not be tolerated
- ◇ Physical or verbal abuse will not be tolerated
- ◇ Quarreling with other campers or staff will not be tolerated
- ◇ Campers must wear appropriate clothing
- ◇ Inappropriate/vulgar language or images on clothing worn by parents or children will not be tolerated
- ◇ Weapons, including pocket knives, are not permitted on Bodyworks premises
- ◇ Campers will leave ***all*** electronic devices, toys from home, playing cards, stuffed animals, etc. at home
- ◇ Cell phones will ***not*** be permitted at camp for any reason. If a camper needs to bring a cell phone for after camp activities, it can be checked in with a director upon drop off and checked out upon pick up
- ◇ Campers must stay with their group leaders at all times
- ◇ Campers will participate in camp activities with a positive attitude
- ◇ Campers will be responsible for their personal belongings
- ◇ Campers will help maintain a safe environment
- ◇ Campers will treat fellow campers, Bodyworks staff, and parents with respect
- ◇ Any child involved in physical violence or threats of physical violence will be immediately sent home on a 3 day suspension from camp. Any repeated offense upon readmission to camp will require the child to be immediately expelled from camp without a refund.

Any breach of the Child Code of Conduct will be documented and addressed by the camp counselor, Site Director or Operations Director in a respectful and courteous manner. These documented Action Forms will be available for parents to review and sign at the end of each camp day. If a child repeatedly breaks the code of conduct, suspension or expulsion from camp is possible. Law enforcement or the Department of Family and Protective Services will be contacted as needed.

We want to ensure that your Bodyworks camps provide a physically and emotionally safe environment. Thank you for abiding by the Child Code of Conduct to help create this welcoming and safe environment.

Please contact Mia Benson for any questions or concerns regarding this matter.

**MIA** BENSON  
CAMP DIRECTOR



(806) 687-4242



[camps@gobodyworks.com](mailto:camps@gobodyworks.com)



5402 4th Street  
Lubbock, TX 79416



[GoBodyworks.com](http://GoBodyworks.com)

# PARENT CODE OF CONDUCT

## Prohibited Behaviors on Bodyworks Premises:

- ◇ Swearing or cursing is prohibited by staff, children, and parents
- ◇ Threatening of staff, parents, or children (including your own children) will not be tolerated
- ◇ Physical or verbal punishment of any child, including your own children, will not be tolerated
- ◇ Positive discipline is always encouraged
- ◇ Smoking is prohibited on Bodyworks premises
- ◇ Quarreling with other parents or staff will not be tolerated
- ◇ Parents may not come to pick up their child if they are not appropriately dressed ( no shirt, no shoes, etc )
- ◇ Inappropriate/vulgar language or images on clothing worn by parents or children will not be tolerated
- ◇ Weapons, including pocket knives, are not permitted on Bodyworks premises
- ◇ Taking photos of any children other than your own is not permissible
- ◇ Posting images of any child other than your own online and/or on any social media website will result in your child being expelled from camp

Any breach of the Parent Code of Conduct will be documented and addressed by the camp counselor, Site Director or Operations Director in a respectful and courteous manner. These documented Action Forms will be available for parents to review and sign at the end of each camp day. If a parent repeatedly breaks the code of conduct, suspension or expulsion from camp is possible. Law enforcement or the Department of Family and Protective Services will be contacted as needed.

We want to ensure that your Bodyworks camps provide a physically and emotionally safe environment. Thank you for abiding by the Parent Code of Conduct to help create this welcoming and safe environment.

Please contact Mia Benson for any questions or concerns regarding this matter.

**MIA** BENSON  
CAMP DIRECTOR



(806) 687-4242



[camps@gobodyworks.com](mailto:camps@gobodyworks.com)



5402 4th Street  
Lubbock, TX 79416



[GoBodyworks.com](http://GoBodyworks.com)

# TERMINATION OF CARE

In the event that you find it necessary to remove your child from camp, we request that you give a written and dated notice of cancellation to the Site Director as soon as possible. Camp payments previously paid are non-refundable. Payments for future weeks are not required upon termination of care.

**Bodyworks reserves the right to dismiss any child for disruptive and/or damaging behavior. No refund(s) will be provided.**

If after a period of time, and conferences between the parent and Director, a child is unable to adjust to the routine and policies of Bodyworks Camps and is causing disruptive and/or damaging behavior to persons and/or property, the child will be asked to leave. This policy is without regard to race/sex/creed/religion and is instituted so that we can ensure that the children attending Bodyworks Camps are in a safe and comfortable atmosphere.

**Any child involved in physical violence or threats of physical violence will be immediately sent home on a 3 day suspension from camp. Any repeated offense upon re-admission to camp will require the child to be immediately expelled from camp.**



# CAMP COMMUNICATION

## DAILY COMMUNICATION

Please feel free to ask your child's camp counselor how their day was. We encourage our camp team members to talk to parents about exciting things that happened throughout the camp day. If there have been any behavioral issues or incidents, our staff will complete an Action Form or Incident Report for you to look over and sign upon pick-up. This is to create open and clear communication about your child's experience at camp.

## MINIMUM STANDARDS

We adhere to the State Minimum Standards in order to make camp as safe as possible. These standards may be viewed at [www.dfps.state.tx.us](http://www.dfps.state.tx.us). You may also ask to see a copy of the standards for your review.

We want to be available to discuss any specific questions, comments, or suggestions you might have in regards to your child's camp experience. There may be times that the Site Director or Operations Director set up a meeting with you to discuss your child's experience. We strive to create and maintain open communication with our parents throughout the spring/summer camps.

Please know that whenever a policy or routine is changed in anyway, you will be notified in writing. We will allow ample time for you and your family to adhere to the changes and will be flexible as needed.

**MIA** BENSON  
CAMP DIRECTOR



(806) 687-4242



[camps@gobodyworks.com](mailto:camps@gobodyworks.com)



5402 4th Street  
Lubbock, TX 79416



[GoBodyworks.com](http://GoBodyworks.com)



PLEASE READ & SIGN THE ATTACHED DOCUMENTS



# ADMISSION INFORMATION

Operation Name		Director's Name	
Child's Full Name		Child's Date of Birth	Child's Home Telephone No.
Child's Home Address			
Date of Admission	Date of Withdrawal		
Parent's or Guardian's Name		Address (if different from child's address)	
List telephone numbers below where parents/guardian may be reached while child will be in care:			
Mother's Telephone No.	Father's Telephone No.	Guardian's Telephone No.	Cell Phone No
Give the name, address and phone number of person to call in case of an emergency if parents / guardian cannot be reached:			Relationship
I hereby authorize the childcare operation to allow my child to leave the childcare operation <b>ONLY</b> with the following persons. Please list name & telephone number for each. Children will only be released to a parent or a person designated by the parent/guardian after verification of ID.			

<b>CHECK ALL THAT APPLY:</b>		I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give		– consent for my child to be transported and supervised by the operation's employees:	
<b>1. <input type="checkbox"/> TRANSPORTATION:</b>		<b>Walk home</b>		<input type="checkbox"/> for emergency care <input type="checkbox"/> on field trips <input type="checkbox"/> to and from home <input type="checkbox"/> to and from school	
<b>2. <input type="checkbox"/> FIELD TRIPS:</b>		I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give		– my consent for my child to participate in Field Trips:	
<b>Parent's Comments:</b>					
<b>3. <input type="checkbox"/> WATER ACTIVITIES:</b>		I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give		– my consent for my child to participate in Water Activities:	
		<input type="checkbox"/> sprinkler play <input type="checkbox"/> splashing/wading pools <input type="checkbox"/> swimming pools <input type="checkbox"/> water table play			
<b>4. <input type="checkbox"/> RECEIPT OF WRITTEN OPERATIONAL POLICIES:</b>		I acknowledge receipt of the facility's operational policies including those for discipline and guidance.			
<b>5. I UNDERSTAND THAT THE FOLLOWING MEALS WILL BE SERVED TO MY CHILD WHILE IN CARE:</b>					
<input type="checkbox"/> None <input type="checkbox"/> Breakfast <input type="checkbox"/> AM Snack <input type="checkbox"/> Lunch <input type="checkbox"/> PM Snack <input type="checkbox"/> Supper <input type="checkbox"/> Evening Snack					
<b>6. MY CHILD IS NORMALLY IN CARE ON THE FOLLOWING DAYS AND TIMES:</b>					
<input type="checkbox"/> Mondays	from:		to:		
<input type="checkbox"/> Tuesdays	from:		to:		
<input type="checkbox"/> Wednesdays	from:		to:		
<input type="checkbox"/> Thursdays	from:		to:		
<input type="checkbox"/> Fridays	from:		to:		
<input type="checkbox"/> Saturdays	from:		to:		
<input type="checkbox"/> Sundays	from:		to:		

<b>AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:</b>		
In the event I cannot be reached to make arrangements for emergency medical care, I authorize the person in charge to take my child to:		
Name of Physician:	Address:	Ph. #:
Name of Emergency Medical Care Facility:	Address:	Ph. #:
I give consent for the facility to secure any and all necessary emergency medical care for my child.		
_____ Signature - Parent or Legal Guardian		

List any special problems that your child may have, such as allergies, existing illness, previous serious illness, injuries and hospitalizations during the past 12 months, any medication prescribed for long-term continuous use, and any other information which caregiver's should be aware of:

---

Child daycare operations are public accommodations under the Americans with Disabilities Act (ADA), Title III. If you believe that such an operation may be practicing discrimination in violation of Title III, you may call the ADA Information Line at (800) 514-0301 (voice) or (800)-514-0383 (TTY).

\_\_\_\_\_  
Signature – Parent or Legal Guardian

\_\_\_\_\_  
Date



# ADMISSION INFORMATION

**SCHOOL AGE CHILDREN:**

My child attends the following school:

\_\_\_\_\_ Name of School and Address \_\_\_\_\_ School Ph.#

**CHECK ALL THAT APPLY:**

His / her immunization record is on file at the school and all required immunizations and/or tuberculosis test are current. Vision and Hearing screening records are also on file.

My child has permission to:  walk to or from school or home,  
 ride a bus, and/or  be released to the care of his/her sibling(s) under 18 years old.

Name of sibling(s): \_\_\_\_\_

**IMMUNIZATION RECORD:**

I have provided the childcare operation with a copy of my child's most current immunization record.

**ADMISSION REQUIREMENT:** If your child does not attend pre-kindergarten or school away from the child-care operation, one of the following must be presented when your child is admitted to the child-care operation or within one week of admission.

Please check only one option:

1.  HEALTH-CARE PROFESSIONAL'S STATEMENT: I have examined the above named child within the past year and find that he / she is able to take part in the day care program.

\_\_\_\_\_ Health Care Professional's Signature \_\_\_\_\_ Date

2.  A signed and dated copy of a health care professional's statement is attached.

3.  Medical diagnosis and treatment conflict with the tenets and practices of a recognized religious organization, which I adhere to or am a member of; I have attached a signed and dated affidavit stating this.

4.  My child has been examined within the past year by a health care professional and is able to participate in the day care program. Within 12 months of admission, I will obtain a health care professional's signed statement and will submit it to the child-care operation.

Name and address of health care professional: \_\_\_\_\_

\_\_\_\_\_ Signature - Parent or Legal Guardian \_\_\_\_\_ Date

<b>VISION</b>	R 20/ _____	L 20/ _____	<input type="checkbox"/> PASS <input type="checkbox"/> FAIL
SIGNATURE _____		DATE _____	
<b>HEARING</b>	<b>1000 Hz</b>	<b>2000 Hz</b>	<b>4000 Hz</b>
<b>R</b>			
<b>L</b>			
SIGNATURE _____			<input type="checkbox"/> PASS <input type="checkbox"/> FAIL
DATE _____			

\_\_\_\_\_  
Signature – Parent or Legal Guardian

\_\_\_\_\_  
Date





# ADMISSION INFORMATION

## HEALTH REQUIREMENTS

<b>Name of Child:</b>	<b>Date of Birth:</b>

Age ▶ Vaccine ▼	Birth	1 mos	2 mos	4 mos	6 mos	12 mos	15 mos	18 mos	19-23 Mos	2-3 Yrs	4-6 Yrs
Hepatitis B											
Rotavirus											
Diphtheria, Tetanus, Pertussis											
Haemophilus influenzae type b											
Pneumococcal											
Inactivated Poliovirus											
Influenza											
Measles, Mumps, Rubella											
Varicella											
Hepatitis A											
Meningococcal											

<b>TB TEST</b> (if required)	<input type="checkbox"/> Positive	<input type="checkbox"/> Negative	Date:
------------------------------	-----------------------------------	-----------------------------------	-------

Signature or stamp of a physician or public health personnel verifying immunization information above.

Signature	Date
-----------	------

Varicella (chickenpox) vaccine is not required if your child has had chickenpox disease. If your child has had chickenpox, please complete the statement: My child had varicella disease (chickenpox) on or about (date) \_\_\_\_\_ and does not need varicella vaccine.

" \_\_\_\_\_ "

Parent's signature	Date
--------------------	------

I am excluding my child from the immunization requirements for reasons of conscience, including a religious belief. I have attached an official notarized affidavit form developed and issued by the Department of State Health Services. I understand this affidavit is valid for 2 years.

For additional information regarding immunizations contact the Department of State Health Services at  
[www.dshs.state.tx.us/immunize/public.shtm](http://www.dshs.state.tx.us/immunize/public.shtm)

Signature – Parent or Legal Guardian	Date
--------------------------------------	------





# CAMP POLICIES & PROCEDURES

Must be signed prior to using Kids Camp services

Please complete one form for each enrolled child.

## BASIC RULES

1. No hitting, biting, or otherwise abusive behavior towards another child or Instructors.
2. Respect and mind all Instructors and Bodyworks Team Members.
3. Toys, video games, phones and personal items are not to be brought to camp unless the teacher instructs you to do so; items will be taken up until the end of the day.
4. No destruction of property (toys or other), whether it belongs to Bodyworks or another person.
5. Bodyworks is not responsible for personal items that are left behind or lost.
6. Medication must be in accordance to DFPS forms.

## Hours of Operation

Monday - Friday

Early Drop Off ..... 7:30 AM - 8:30 AM  
 Camp Activities ..... 8:30 AM - 5:00 PM  
 Late Pickup ..... 5:00 PM - 5:30 PM

*There will be a \$1 fee for every minute you are late picking your child up after 5:30PM*

## KIDS' CAMP POLICIES

Kids' Camp is designed to educate and keep your children healthy and active. These guidelines are given to you for your information and your child's safety when using our services. Please read over them and become familiar with them. If you have any questions, please ask. Your cooperation and support, to keep a happy and safe environment for your children and others, are appreciated by Bodyworks Management and Team Members.

1. Kids' Camp is for children from the age of 6-13.
2. Parents are required to escort their child into the gym and sign them in each day.
3. Parents are required to sign their child out each day. When signing your child out you will be required to show your drivers license. If you designate another adult to pick up your child, you must put their name down on the pick up list for your child and they are required to show their driver license.
4. Sick children are not allowed to come to camp. If your child becomes sick while at camp you will be called to come and get him/her; they must be fever free for 24hrs before returning. We can request a doctor's note at our discretion.
5. Lunch is provided daily; if you choose to send lunch we request that you do not send items that need to be heated.
6. Children must wear or bring athletic shoes everyday; flip flops/sandals can be brought for pool time. Shorts and shirts are required; athletic wear is acceptable. Clean socks are required everyday. If your child does not wear the appropriate clothing/shoes they will have to sit out during certain activities.
7. Towels will be provided for your child during our pool / waterpark time. Swimsuits are required for pool/waterpark time and must fit your child appropriately.  
Do not send goggles, face mask or pool toys with your child.
8. After lunch we have movie time, naps are not required however we do have the children sit quietly; you can send a small blanket and pillow for your child. Label any item that you send; these will be stored until the end of the week. It is your responsibility to collect your items at the end of each week. Your child's belongings will be placed in plastic bags each day.
9. Camp hours are 7:30am-5:30pm; activities start at 8:30 am. Children will not be checked in before 7:30am and there is a late charge of \$1.00 per-child every minute you are late picking your child up.
10. Children are not allowed in the workout area unless they are attending a structured class.
11. Negative talk by your child about or to another child will not be tolerated.
12. All children are encouraged to participate in activities with a positive attitude.
13. No refunds will be given for camp.

## PAYMENT INFORMATION

1. Registration fee and first week's payment are due at time of registration.
2. Payments for the next week are due the prior Wednesday.

## DISCIPLINE PROCEDURES

1. Two verbal warnings or request to stop behavior.
2. If warnings are ineffective, the child will sit out for the next activity and a Kids' Camp Action Form will be filled out to inform the parent.
3. If the problem is still not resolved, a call will be placed to the parent and the issue will be discussed, the parent may be asked to come and get the child.
4. If there are frequent problems with a particular child, the parent will be asked to not bring the child back to Kids' Camp-payment for camp will not be refunded.

## ALL CAMP PAYMENTS ARE NON-REFUNDABLE

By signing this statement, I understand that all camp payments are final and non-refundable.

I have read, understand and agree to these Camp Policies and Procedures.

Printed Name - Parent or Legal Guardian

Parent or Legal Guardian's Signature

Date





Child Name \_\_\_\_\_ Age \_\_\_\_\_

Child Name \_\_\_\_\_ Age \_\_\_\_\_

Child Name \_\_\_\_\_ Age \_\_\_\_\_

**PERMISSION PICK UP SLIP • KIDS' CAMP**

**Parent Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

I, \_\_\_\_\_ give the following people permission to pick up my child(ren) \_\_\_\_\_ from the Kids' camp at Bodyworks.

	<b>Name</b>	<b>DL# - Required</b>
1.		
2.		
3.		
4.		
5.		
6.		

**Liability Waiver:** By signing this form, you assume all responsibility for any and all injuries and release Bodyworks, its employees and agents from any and all liability, including acts of active or passive negligence.

I certify these are my children or I am the court appointed legal guardian.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date



# Discipline and Guidance Policy for \_\_\_\_\_

\_\_\_\_\_  
Name of Operation

- ◆ Discipline must be:
  - (1) Individualized and consistent for each child;
  - (2) Appropriate to the child’s level of understanding; and
  - (3) Directed toward teaching the child acceptable behavior and self-control.
  
- ◆ A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:
  - (1) Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
  - (2) Reminding a child of behavior expectations daily by using clear, positive statements;
  - (3) Redirecting behavior using positive statements; and
  - (4) Using brief supervised separation or time out from the group, when appropriate for the child’s age and development, which is limited to no more than one minute per year of the child’s age.
  
- ◆ There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:
  - (1) Corporal punishment or threats of corporal punishment;
  - (2) Punishment associated with food, naps, or toilet training;
  - (3) Pinching, shaking, or biting a child;
  - (4) Hitting a child with a hand or instrument;
  - (5) Putting anything in or on a child’s mouth;
  - (6) Humiliating, ridiculing, rejecting, or yelling at a child;
  - (7) Subjecting a child to harsh, abusive, or profane language;
  - (8) Placing a child in a locked or dark room, bathroom, or closet with the door closed;
 and
  - (9) Requiring a child to remain silent or inactive for inappropriately long periods of time for the child’s age.

Texas Administrative Code, Title 40, Chapters 746 and 747, Subchapters L, Discipline and Guidance

My signature verifies I have read and received a copy of this discipline and guidance policy.	
_____ Signature	_____ Date
Check one please:	
<input type="checkbox"/> parent <input type="checkbox"/> employee/caregiver <input type="checkbox"/> household member of child-care home	





# TRAMPOLINE FITNESS PROGRAM

## 4TH & SLIDE CAMP

I authorize my child or children to be signed out of camp for the purpose of participating in a trampoline fitness program.

Child/Children's Name: \_\_\_\_\_

Parent or Authorized Guardian Signature: \_\_\_\_\_

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



# CAMP INVOICE

**CAMP LOCATION**

( Please circle one )

4TH      82ND

**BODYWORKS MEMBER**

( Please circle one )

YES      NO

Camper's Name: \_\_\_\_\_

Camp Code: \_\_\_\_\_

Member Price: \$125.00  
 Additional: \$119.00 \_\_\_\_\_

Non- Member Price: \$135.00  
 Additional: \$129.00 \_\_\_\_\_

Early Registration Fee \$10 (By March 6th)  
 Late Registration Fee \$20 \_\_\_\_\_

TOTAL: \_\_\_\_\_

REC #: \_\_\_\_\_