

BERNARDS TOWNSHIP SCHOOL DISTRICT

PROCEDURES FOR OPERATING SUMMER CAMPS

1. Approval process

- Camp director(s) prepares Request to Operate Summer Camp
- Camp director(s) completes Application for Use of Facility Form and submits to the Business Administrator with all required documentation for review by April 1
- Business Administrator will prepare a recommendation to approve the camp and submit request to the Superintendent of Schools
- Camp director(s) will be notified of the Superintendent of Schools decision
- Certificate of Insurance and the Waiver and Release Statements signed by every parent or guardian of the children participating in the camp must be sent to the Business Administrator prior to the camp start date
 - Failure to provide these documents will result in the automatic cancellation of the camp

2. Payment by camp participants

- Payment must be made by check payable to the camp, not an individual

3. Final accounting and close out of camp

- The camp director(s) will prepare a final account of receipts and disbursements and submit it to the Business Administrator by September 1

BERNARDS TOWNSHIP SCHOOL DISTRICT

Request for Approval to Operate Summer Camp

General Information

Camp director(s): _____

Submission date: _____

Mission of camp: _____

Age group: _____

Number of camp participants per adult supervisor(s): _____

Facilities requested: _____

Camp dates: _____

Daily start time: _____

Daily dismissal time: _____

Fee per camper: _____

Include with this camp application:

- a copy of tentative daily camp schedule with room number or facilities noted and time of usage
- camp brochure (must include the following statement “While this program may be consistent with the mission of the Bernards Township Board of Education, it is not a Board of Education endorsed or sponsored program. The program is a private enterprise, entirely separate from the Bernards Township Board of Education.”)

Request for Approval to Operate Summer Camp – General Information
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Will there be any out of district trips during the camp: _____

If so, list all information: _____

Note: special needs/concerns about your camp: _____

Equipment requested: _____

Meal arrangements: _____

**BERNARDS TOWNSHIP SCHOOL DISTRICT
Summer Camp
Financial Statement**

Projected camp enrollment: _____

Total estimated camp income: _____

Projected expenses:
(i.e. T-shirts, giveaways, etc.)

Cost

_____	_____
_____	_____
_____	_____
Camp expenses subtotal:	_____

Instructors Please check the appropriate box
below.

<u>Name</u>	Employee	RHS Student	Adult+	<u>Salary</u>
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_____				_____
_____				_____
_____				_____
_____				_____
_____				_____
_____				_____
_____				_____
_____				_____
_____				_____
_____				_____
_____				_____
_____				_____
_____				_____

Estimated salary expense: _____

Total estimated camp expenses: _____

+Note: A fingerprint clearance letter for any adult instructor who is not a Bernards Township employee must be submitted with this application & checklist

RELEASE AND HOLD HARMLESS FORM

Please Read Carefully Before Signing

We/I, the undersigned, are/am the parent or guardian of a student participating in the _____ summer camp.

We acknowledge that the summer camp is a positive activity which benefits our child. We also acknowledge that there are certain risks associated with our child's participation in the camp, including the risk of personal injury or property damage, and we assume the risks of participation in the camp.

Although the summer camp is being held on the property of the Bernards Township Board of Education ("Board of Education"), we understand and acknowledge that the Board of Education does not control, sponsor or supervise the camp.

In consideration for the Board of Education permitting this positive activity to be held on its property, we hereby waive and release the Board of Education and its members, agents and employees from and against any and all liability or damage of any kind sustained by our child as a result of his or her participation in the summer camp, including, but not limited to, any claim for personal injury, disability, death, property damage or property loss.

We also agree to indemnify and hold the Board of Education and its members, agents and employees harmless from and against any and all liability or damage of any kind caused by our child in connection with his or her participation in the summer camp, including the payment of reasonable attorney's fees associated therewith.

Student's Name

Parent/Guardian Signature

Parent/Guardian Signature

Date

BERNARDS TOWNSHIP SCHOOL DISTRICT

Request for Approval to Operate Summer Camp

Check List

- Request for Approval to Operate Summer Camp
- Use of Facility Form
- Insurance Certificate (due 30 days prior to the start of camp)
- Financial Statement
- Camp Brochure to be Reviewed by Superintendent of Schools
- Registration Form
- Waiver & Release Statement (one for each child participating in camp)
- Required Fingerprint Clearance Letters

Business Office Use Only

- Summer Camp approved
- Flyer approved for District Friday Folder (may be sent home once)

Rod McLaughlin, Business Administrator

Date