



Seven Hills Summer Day Camp Parent Information Packet

Recreation Director – Jennifer Burger
Camp Director: Brooke Stimetz
Assistant Camp Director: Angelina Bordonaro

Welcome to Summer Camp 2024

The Seven Hills Summer Camp Team has been planning an enjoyable and safe camp experience for each camper. Our Summer Camp gives campers opportunities to make new friends and create new memories. We strive to provide a friendly and safe environment for each of our campers.

To make camp a positive experience for every camper, we ask campers not to bring electronics. **If a child chooses to bring their phone/tablet, they will not be permitted to use it during camp hours*. There will be NO social media usage. This includes Tik-Tok, Instagram, and Snapchat.** If the camper does not follow these rules, we will ask the child to leave their phone/tablet in the office. It will be returned at pick-up. This is for the safety of all children. We also need to be aware of other people's children and requests regarding camera usage.

*Teen campers will be allowed to have their phone during certain times that will be decided by the teen camp counselors and the Camp Directors.

This parent packet provides all the necessary information for your summer to run as smooth as possible. We will have daily camp meetings with all campers. This provides information to your camper of the day's events, so they know what to expect. We go over Camp Motto, Respect, Golden Rule, Building / City Rules, and a daily schedule. This gives the campers an understanding and holds them accountable for the expectations we have set.

Please read the parent packet thoroughly and discuss with your camper!

Let's have an amazing summer!

-Seven Hills Camp Admins

Dates and Times

June 17th – August 23rd, 2024

Camp Hours- 6:30am – 6:00pm

Campers can be dropped off no earlier than 6:30am and must be picked up by 6pm; a late fee will be added to your account as follows:

\$5 for every 15 minutes past 6:00pm.

Staff Information

Points of Contact:

Camp Director: Brooke Stimetz / Assistant Camp Director Angelina Bordonaro
216-524-6262 Ext. 408 sevenhillssummercamp@gmail.com

Recreation Director – Jen Burger - 216-524-6262 Ext. 401
jburger@sevenhillsohio.org

If you need to have direct communication with your camper, please call 216-524-6262 and your child's counselor will be paged. Your child will be accompanied to the phone (remember, throughout the day, they may be outside, in the pool, doing an activity, etc...).

In case of emergency or for immediate information, please have the receptionist page the Manager on Duty and they will respond appropriately. If transferred to voicemail, please call back immediately.

Counselor Info

Counselors have camp experience and training.

Counselors and all Recreation Center staff are Adult, Infant, & Child CPR, First Aid, AED, and Epi-Pen certified by the American Red Cross.

All employees have passed background checks.

Enrollment Policies

Full payment for camp must be paid by the Thursday before the week that you are requesting. We now offer payment plan options if you pay via credit card.

Payments for camp and field trips must be made at the front desk or online at www.sevenhillsohio.org.

Field Trips must be paid for **2 weeks ahead** of the trip to accommodate transportation. We **cannot** accept week of payments for field trips.

Emergency Medical Authorization Form must be completely filled out before your camper attends camp.

We plan our staff schedule based on campers each day. We cannot switch between full time / part time and we are unable to change camp days each week. **We cannot refund due to staff scheduling requirements.**

Health Policies

Please remember that if your child is sick, he/she should not be at camp. Campers MUST be fever-free for 24 hours without medication before returning to camp after any illness. Keeping children home when they are sick is critical to prevention.

Illness:

Children are checked each day upon arrival at the center for any sign of illness. The OAC rule 5101:2 recommends that the following precautions be taken for a child who looks ill:

1. Signs of illness that may be threatening:

Severe coughing, high pitched whistling (barky) sound, redness or blueness in face, difficulty or rapid breathing.

Vomiting with other signs such as headache or fever.

Apparent fever when in combination with any other sign of illness such as lethargy, abnormal activity, vomiting, extreme tiredness, and difficulty to wake.

Difficulty breathing and swallowing.

Actions: Call Parents / 9-1-1 if necessary.

2. Signs of a Probable illness:

Sore Throat

Redness, swelling, drainage of eye

Unusual spots/rash with fever or itching

Crusty, bright yellow, gummy skin sore

Diarrhea (more than two times a day)

Vomiting (more than two times a day)

Yellow skin and white eyes

Clay colored stools or tea colored urine

Actions: Call Parents. **Parent must pick up child**

3. Signs of possible illness or a mildly ill child: Earache, check for fever or discharge

Headache

Itching of scalp (isolate until verified or treated)

Fever

Fussiness

Runny nose

Mild cough

Actions: Watch child closely and take notes. Notify and discuss signs with parent.

***If your child is ill, please do not send them!**

4. For a life threatening and probable illness that might be communicable, according to ODHS rule 5101:2-12-50 the child needs to be isolated and discharged. The administrator will call and discuss the child's illness with the parents. **Parent must pick child up immediately.**

If the child is isolated for discharge and/or observation, the following steps must be observed:

1. The child will be placed in the back office away from the other children.
2. The child will be supervised by a designated staff member.
3. The child will be kept comfortable and supervised.
4. The staff member will maintain continued observation.
5. The staff member will record the observations on the Camp Incident Form.

Medication Administration:

Prescription medications will only be administered under these circumstances:

1. Medications must be placed in a LABELED bag
2. The labeled bag must include the name of medication, dosage, dated instructions, and signature from a licensed physician.
3. Prescription medication will not be administered after the expiration date stated by the physician.

Non-prescription fever-reducing medications that do not contain aspirin or non-prescription cough or cold medications that do not contain codeine may be administered by the center under these circumstances:

1. Must include written instructions from the parent or guardian on the form.
2. The form shall include the name of the medication, name of the child, birth date of the child, date, time administered and the parent or guardian's signature.
3. The label shall specify appropriate dosages based on the child's age or weight.
4. The dosages administered by the center shall not exceed the manufacturer's recommended dosages.
5. The medication is to be administered by the center for no longer than three days at one time.



Non-prescription topical ointments, creams or lotions may be administered by the center under these circumstances:

1. Must include written instructions from the parent or guardian on the form.
2. Name of the medication, name of the child, birth date of the child, date, and the parent or guardian's signature.
3. Written instructions shall be valid for no longer than three months.
4. Authorization for administration of the ointment, cream, or lotion may be canceled by written request of the parent at any time.
5. When used for skin irritations or manifestations of skin irritations, the ointment, cream, or lotion shall be administered by the center for no longer than fourteen consecutive days at any one time.

Staff Responsibilities Regarding Medication

Medications, ointments, creams, or lotions shall be kept in a safe location where children cannot reach it. A medication requiring refrigeration shall be refrigerated immediately upon arrival at the center and shall be stored so as not to contaminate foodstuffs- Parents are asked to convey medication requirements at drop off.

The staff member responsible for administering medication, ointments, creams, or lotions shall verify administering the medication, ointments, creams, or lotions by completing the form provided by the director each time the medication is given.

Written instruction from the physician or parent or guardian shall be kept on file at the center for a period of one year following administration of medication, ointments, creams, or lotions and shall be available for review by the director, upon request. (Only Summer Camp Director or Head Counselor will administer drugs.)

No vitamins, modified diets, or supplements will be administered unless instructions to do so are written, signed, and dated by a licensed physician and prescribed for a specific child.



Discipline Policies

We urge the children to make good choices, which in turn, create positive outcomes. Our goal is to guide the children with their social skills. We will aid in talking with the child about the situation, monitoring children while they talk through a problem together, redirect them to another activity, and praise them for good behavior.

In accordance with the 5101:2-12-56 of the Ohio Revised Code, the following approaches **are not** used in our center:

1. Using cruel, harsh, or corporal punishment;
2. Using physical restraints to confine a child;
3. Confining a child in an enclosed space;
4. Humiliating or using profane language, threats, derogatory remarks, or verbal abuse;
5. Having to discipline a child for failure to eat, sleep, or toilet training accidents;
6. Techniques of discipline shall not humiliate, shame, or frighten a child;
7. Withholding food, rest or toilet use;
8. Delegating discipline to any other child
9. The center shall not abuse or neglect children.

Under the rule of 5101:2-12-45 staff members are required by law to report signs of abuse or child neglect to the local children's service agency.

Anytime a child is disciplined for any reason the staff will fill out an incident form that the child's parent or legal guardian will have to sign and return to the recreation center before that child will be allowed to participate in the camp again.

The type of discipline depends on the severity of a child's actions, and how frequently a child disobeys the rules. The general guidelines for discipline are:

1st offense- Warning

2nd offense- Calming chair / loss of pool time/activity time

3rd offense- See Camp Director or Manager on Duty, fill out an incident report.

An incident report will be signed by the parent at pick up as well.

From there, 3 incident reports will result in a suspension of 3 days without a refund.

Any further issues after suspension, camper will be asked to stay home for the rest of the summer.

Parents: these are our policies. They are non-negotiable. If your child cannot abide by the rules, they will be asked to leave camp (no refund.) We do our best, for every camper to have a great, safe summer experience.

General Information

For safety reasons, all parents will sign their campers in (morning) and out (afternoon) of camp each day.

The staff will release campers only to the persons who are on the emergency release form, which was provided by the parent, and who are 16 years of age and older. If an emergency arises, the parent must call and provide a written, signed note giving the person permission to pick up their child. Staff will check IDs of anyone they do not recognize. Please let people know about this ahead of time so they can bring a picture ID, and they are not offended.

Safety is our top priority. Here is a list of our do's and don'ts to discuss with your camper prior to camp.

Always ask permission before leaving any area.

No touching, bullying, fighting, pushing, hitting, name calling etc.

Remember the "Golden Rule."

Listen to the counselors the first time.

Use an inside voice when indoors.

Clean up after yourself.

Evacuation Procedures

In the event of an emergency where the facility must be evacuated, you will be notified by phone – pending info listed on your emergency form. We have evacuation procedures in order. **Please be sure your emergency form is up to date.**

T-Shirts

Camp T-Shirts will be available, every camper gets a shirt free of charge. Thursday is Field Trip Day, and all campers are required to wear camp shirts whether they go on the field trip or not.

Breakfast / Lunch / Snack time

We offer breakfast for purchase during before care, 6:30am to 8:30am. The cost is \$4 a day. A weekly menu will be in the newsletter.

It is the camper's responsibility to bring their own lunch and snack. Coolers are provided for the lunches.

We have a Camp Store with snacks that campers will be able to purchase from. Prices range from 50 cents to \$2. The money collected will go right back into camp!

There are also vending machines located in the Recreation Center in which children will be able to purchase snacks and drinks.

Pack a snack with a drink to have after the children go swimming – swimming makes campers “hangry”! 😊

Swimming Information

Upon signing up for Seven Hills Day Camp- all campers are signing up for all activities including swimming. If there are limitations or a child cannot participate in an activity, this must be put in writing at the beginning of camp addressed to the Camp Director.

The pool at Seven Hills Recreation Center will be used daily by camp.

Children should expect to swim every day. This means campers should always bring a swimsuit, towel, flip-flops, goggles, and a bag for wet items.

The pool is chlorinated and is kept around 84 degrees.

American Red Cross certified lifeguards are always on duty.

Counselors are required to swim with campers as well.

Field Trips/ Guests/ Special Activities

Announcements about field trips will be made in advance.

All parents will be notified before a field trip takes place. All children will have to bring field trip permission slips and payment back to the Recreation Center 2 weeks before the field trip is scheduled.

Pre- School, Day Camp and Teen Camp all attend field trips or can participate in events!

Scheduled field trips include trips to Cleveland Metroparks Zoo, Great Lakes Science Center, Seven Hills Lanes, and more!

Please have your camper at the Recreation Center at least 30 minutes before departure time listed on permission slips.

Special Activities

All parents will be notified of special activities.

Special activities include educational guests, rock walls, trips to Dairy Queen or Kona Ice Truck visits.

Special activities also include themes for different weeks (see last page), parties, and educational activities.

Incident Forms & Behavior Reports

These forms are to inform parents about minor injuries and behavior issues that occurred at camp. This includes negative and positive behavior reports. If you receive a behavior report, please sign the report and return.

These forms will be provided to the parents at the end of the camp day. The forms must be signed and returned to Summer Camp staff to be kept on file.

Appropriate Clothing/ Misc.

All children should dress comfortably for all activities.

Tennis shoes and socks are required – NO SANDALS or open toe shoes for camp activities (Flip Flops are only recommended for the swim area and bathrooms! Safety first!)

What to bring to camp:

Lunch, snack, water bottle, weather appropriate gear, sunscreen, insect repellent (wipes are best), swimsuit, beach towel, goggles, bag for wet items. Please have ALL items labeled.

What not to bring:

Cell phone, video games, pocket-knife, personal sports equipment, pokemon cards, anything that will break your heart if it gets lost, etc....

Camp Daily Schedule (Usually!)

6:30am-9am: Before Care (coloring pages, quiet activities)

8am: Breakfast, bring your own or purchase \$3

9am: Camp Meeting ~ *all camps*

9:30am-11:30am: Outdoor Activity or Art / Music Project

11:30am: Lunch

12pm-1:45pm: Group A Swims / Group B – Gym

1:45pm-3:30pm: Group B Swims / Group A - Gym

Rotate Snack and Library After Swimming

4pm-6pm: After Care ~ Counselor Choice!!

(This schedule can change due to weather or building schedule)

Seven Hills Summer Day Camp is committed to providing a safe, fun, and enjoyable experience for your children. The Seven Hills Recreation Center is not responsible for lost or stolen items.

If you have any questions, concerns, or comments please do not hesitate to call or email 216-524-6262 ext. 408 / sevenhillssummercamp@gmail.com

WEEKLY THEMES

subject to change

Week 1 (6/17-6/21)	Welcome to Summer Week
Week 2 (6/24-6/28)	All About Animals Week
Week 3 (7/1-7/5)	USA Week
Week 4 (7/8-7/12)	Into the Future Week
Week 5 (7/15-7/19)	Throwback Week
Week 6 (7/22-7/26)	Disney Week
Week 7 (7/29-8/2)	Olympics Week
Week 8 (8/5-8/9)	Wild Wilderness Week
Week 9 (8/12-8/16)	Adventure Week
Week 10 (8/19-8/23)	Sports Week

**Please return this page of the handbook, along with the
Emergency Medical Authorization PRIOR to the first day of
programming for your camper.**

Camper's Name: _____

Parents Name(s): _____

Anything you believe we should know about your camper (physical, emotional,
anything!) that would help us to better serve your family throughout the summer:

**I have read and agree with the Summer Day Camp Handbook procedures and
policies. I understand that if I do not adhere to the above, my child could lose
the privilege of attending the program, only with properly documented
notification from the Recreation Department.**

Parent / Guardian Signature: _____ Date: _____

**EMERGENCY MEDICAL AUTHORIZATION
SEVEN HILLS COMMUNITY RECREATION CENTER**

T-Shirt Size _____

Student's Name _____
Last First Initial

Address _____ Phone _____

School Attended _____

PURPOSE: To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while under Recreation Department authority, when parents or guardians cannot be reached.

RESIDENTIAL PARENT or GUARDIAN

Mother's Name _____ Daytime Phone _____ Cell Phone _____

Father's Name _____ Daytime Phone _____ Cell Phone _____

Other's Name _____ Daytime Phone _____ Cell Phone _____

Primary Contact's Email Address: _____

PART I or PART II (Must Be Completed)

~ PART I - TO GRANT CONSENT ~

I hereby give consent for the following medical care providers and local hospital to be called:

Doctor _____ Phone _____

Dentist _____ Phone _____

Medical Specialist _____

Local Hospital _____ Emergency Room Phone _____

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by above-named doctor, or, in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and (2) the transfer of the child to any hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

Facts concerning the child's medical history including allergies, medication being taken, and any physical impairments to which a physician should be alerted:

Date _____ Signature of Parent/Guardian _____

~ PART II REFUSAL TO CONSENT ~

I do NOT give my consent for emergency treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the Recreation Department authorities to take the following action:

Date _____ Signature of Parent/Guardian _____

HOME COMMUNICATIONS CARD
Please Complete ALL Items

Participant's Name _____
Last First Middle

Date of Birth _____

Address: _____

Home Phone _____ Unlisted? Yes No

**Your child will ONLY be released to the following people unless the
Recreation Center Management is otherwise notified in advance.**

1. PARENT / GUARDIAN TO BE CONTACTED FIRST:

Name _____ Daytime Phone _____

Secondary Phone _____ Cell Phone (if not already listed) _____

Address _____

RELATIONSHIP TO CHILD: _____ Parent _____ Step-Parent
_____ Guardian _____ Grandparent _____ Other

2. SECOND PERSON TO BE CONTACTED:

Name _____ Daytime Phone _____

Secondary Phone _____ Cell Phone (if not already listed) _____

Address _____

RELATIONSHIP TO CHILD: _____ Parent _____ Step-Parent
_____ Guardian _____ Grandparent _____ Other

3. THIRD PERSON TO BE CONTACTED:

Name _____ Daytime Phone _____

Secondary Phone _____ Cell Phone (if not already listed) _____

Address _____

RELATIONSHIP TO CHILD: _____ Parent _____ Step-Parent
_____ Guardian _____ Grandparent _____ Other