



## **GREENJACKETS KID'S SUMMER CAMP INFORMATION AND RELEASE FORM**

### **REGISTRATION AND REFUNDS:**

Registration and payment for the Kid's Summer Camp must be completed and submitted prior to the child's first camp day. Full payment is required at the time of registration to reserve the child's space. Due to limited space, refunds will not be given. There will be no proration of fees for any days a child participant cannot attend. Registration is only permitted for children ages 5-12.

### **AGE GUIDELINES:**

The Kid's Summer Camp is for children ages 5 to 12 years old and no exceptions will be made. The participants will be divided into separate groups dependent on age.

### **HOURS OF OPERATION:**

The Kid's Summer Camp hours are Tuesday through Thursday 8:00am-1:00 pm. Please do not drop off your child prior to the start time of Camp. Children will not be allowed into the park without a parent or guardian until 8 am each day. Parents and Guardians may arrive at 5:30 am at the earliest and remain with their child until Camp starts at 8 am.

### **PICK-UP AND DROP-OFF PROCEDURES:**

Children need to arrive between 5:30-8:00 am and must be picked between 1:00-1:20 pm. Parent/guardian must park their vehicle and walk their child into the Camp and sign the child into the Camp. The check-in area for the camp will be at the Main Gate of SRP Park. Do not park any cars in the circle on Railroad Avenue or you will be towed. Parking is free until 2pm every day.

Parents/Guardians may remain on site for up to 30 minutes at the start of the Camp, but must leave the premises shortly thereafter, until pick up time.

### **LATE PICK-UP POLICY:**

There will be a late fee assessed for children who are picked up after 1:20 pm. The late fee is \$1.00 for each minute past 1:20 pm. Repeated late pick-ups may result in the removal of the participant from the program, with no refund for prepaid programs.

### **MEDICAL NEEDS/ALLERGIES:**

GreenJackets Baseball is not permitted to administer medication to program participants. In the event of a medical emergency, we will administer first aid, CPR, and rescue in the best interest of the child. Parents will be contacted if care is administered. Allergy medications may be administered if directed in writing by the child's parent/guardian.

Parent or Guardian's Initials \_\_\_\_\_

### **Special Circumstances:**

Parents and guardians are required to inform the GreenJackets Baseball in writing of any special circumstances which may affect the child's ability to participate fully and within the guidelines of acceptable behavior, including, but not limited to, any serious behavioral problems or special circumstances regarding psychological, medical, or physical conditions. Once the notice is submitted, a conference will be scheduled with the parent/guardian to discuss the special circumstances and whether the Company can accommodate the circumstances.

### **DRESSCODE, ITEMS NEEDED/PROHIBITED:**

- Children should dress appropriately for the activities scheduled.
- GreenJackets Baseball recommends shorts and a lightweight shirt or top, and some type of athletic shoe or sneaker in order to participate in recreational or athletic activities.
- Children should bring extra clothing.
- There will be water related activities, so a bathing suit and towel is required.
- Sandals, flip-flops, rubber "cros" -style shoes, and other open-toed shoes **are not recommended** as acceptable attire for active recreation activities.
- Clothing that displays political slogans, drugs, alcohol, tobacco, offensive language, excessive bagginess, or is excessively revealing **will not be permitted**.
- Children should bring a water bottle and sunscreen.
- Children should bring a baseball glove/mitt and or bat if they wish to engage in baseball related activities.

### **SUNSCREEN/INSECT REPELLENT:**

Please apply sunscreen and insect repellent prior to the start of each camp session. Children may bring sunscreen and insect repellent but must be able to reapply with staff supervision. Spray or mist sunscreen and/or insect repellent are recommended. Sunscreen and/or insect repellent must be labeled with child's name. Children may not share these items with others.

### **FOOD AND SNACKS:**

Children will be provided lunch and snacks and drinks within the day. No products with peanuts will be served. If the child has a specific food allergy, please advise in your registration information, and notify the check in manager in the morning each day.

### **PERSONAL BELONGINGS:**

Please put the child's name on all articles of clothing, bags, etc. Children should not bring toys, mobile phones, electronic devices, jewelry, money, or any possession of value with them. Children will be responsible for their belongings.

### **BEHAVIOR MANAGEMENT/DISCIPLINE POLICY:**

GreenJackets Baseball staff will create a fun and safe environment for participants in the program. Praise and positive reinforcement are used as effective methods of behavior management. Children who do not respond to these methods or who are destructive to others or to property will be dealt with in a professional, positive, and timely manner to correct the behavior. The following procedures will be followed for behavior management. All incident reports will be discussed privately with parents/guardians and a copy of each report will be kept on file at the GreenJackets Baseball.

Parent or Guardian's Initials \_\_\_\_\_

1. In the event a child's behavior is a repeated behavior and cannot be corrected by the GreenJackets Baseball Staff with a verbal warning or other form of behavior modification, a first incident report will be written to document and correct behavior. A copy of the report will be given to the parent/guardian the same day as the incident.
2. A second incident report will be written if the behavior is repeated by or new behavior problems occur with the same child. This report will follow the same process as the first, but a one-day suspension could accompany this report, and no refund will be provided for suspended days. A copy of the report will be given to the parent/guardian the same day as the second incident.
3. A third incident report will be completed using the same process as the first two. The GreenJackets Baseball staff will write this report. Staff will provide this report to the parent/guardian. Incident reports will be discussed privately with a parent/guardian by a staff member. Dismissal from a program can occur at this time.

**NOTE: Immediate dismissal from the program can occur at any time given severe circumstances. Refunds for missed days due to a discipline dismissal will not be granted.**

## **SPECIAL COVID-19 PROCEDURES AND UNDERSTANDING**

SRP Park meets the standards under OSHA, CDC and State Regulations as it relates to stopping the spread of Covid-19. Our employees are required to follow strict guidelines and management conducts safety inspections multiple times a day to ensure venue sanitation standards are upheld. Parents and/or guardians acknowledges that novel coronavirus ("COVID-19") infections have been confirmed throughout the United States, and agrees by signing this release, that the venue has followed the standards for slowing the transmission of COVID-19. Parents and or guardians agrees, represents, and warrants that their participating children nor shall they, enter the Park if they have a general feeling of being unwell, have a fever, or any of the following symptoms: fever, chills, cough, shortness of breath, difficulty breathing, fatigue, muscle or body aches body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting and or diarrhea, within 14 days exposure to any person who has a suspected or confirmed case of COVID-19, has a suspected or diagnosed/confirmed case of COVID-19.

**Parent or Guardian's Initials \_\_\_\_\_**

# RELEASES

## COVID-19 RELEASE AND WAIVER

I, as parent/guardian of \_\_\_\_\_ (Child's Name) in consideration for being permitted to enter SRP Park for Camp on behalf of myself, and in the instance of my participating children, and any personal representatives, heirs, and next of kin, hereby acknowledge, agree and represent that I accept the condition of the Park as being safe and reasonably suited for the use or participation by my applicable participating child. I fully understand and appreciate both the known and potential dangers of utilizing the Park and acknowledges that use thereof by my participating child may, despite GreenJackets Baseball LLC's reasonable efforts to mitigate such dangers, result in exposure to COVID-19, which could result in quarantine requirements, serious illness, disability, and/or death.

I hereby on my behalf and on behalf of such participating child, hereby release, waive, discharge and covenant not to sue GreenJackets Baseball LLC, its directors, officers, employees, volunteers and agents from all liability to me and my participating child, and all personal representatives, assigns, heirs, and next of kin of mine or my participating child for any loss or damage, and any claim or demands on account of any property damage or any injury to, or an illness or the death of, myself or my participating child (or any person who may contract COVID-19, directly or indirectly, from me or my, my heirs, assigns, next of kin and my participating child, whether caused by the negligence, active or passive, of GreenJackets Baseball LLC or otherwise while my participating child are in, upon, or about the premises or any facilities or equipment therein or participating in any Camp event. I further expressly agrees that the foregoing assumption of risk, release and waiver of liability, and indemnity agreement is intended to be as broad and inclusive as is permitted by the laws of the State of South Carolina, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE CAREFULLY READ AND VOLUNTARILY SIGN THIS ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE. I AM AWARE THAT BY AGREEING TO THIS AGREEMENT I AM GIVING UP VALUABLE LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES FROM GREENJACKETS BASEBALL LLC, IN CASE OF ILLNESS, INJURY, OR DEATH, INCLUDING, FOR THE AVOIDANCE OF DOUBT AND WITHOUT LIMITATION, EXPOSURE TO COVID-19 AT THE PARK, AND ANY ILLNESS, INJURY OR DEATH RESULTING THEREFROM. I UNDERSTAND THAT THIS DOCUMENT IS A PROMISE NOT TO SUE AND A RELEASE OF AND INDEMNIFICATION FOR ALL CLAIMS. IF SIGNING ON BEHALF OF MINOR: I ALSO UNDERSTAND THAT THIS AGREEMENT IS MADE ON BEHALF OF MY MINOR CHILD AND/OR LEGAL WARDS AND I REPRESENT AND WARRANT TO THE PARK AND GREENJACKETS BASEBALL LLC, THAT I HAVE FULL AUTHORITY TO SIGN THIS AGREEMENT ON BEHALF OF SUCH MINOR(S).

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NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Parent \_\_\_\_\_ or Guardian \_\_\_\_\_

## WAIVER AND INFORMED CONSENT:

By signing this form, I, as parent/guardian, permit the GreenJackets Baseball to use pictures of my child(ren) as a program participant in promotional literature, videos, and the GreenJackets Baseball website. I understand my child(ren)'s name(s) will not be published.

I, as parent/guardian of \_\_\_\_\_ ("Child"), hereby assume all risks and hazards incidental to the conduct of the activities at the Camp at SRP Park managed by GreenJackets Baseball LLC herein referred to as RELEASEES. My Child is fit for the program(s) in which I have enrolled him/her.

I HERELY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS RELEASEES FROM EVERY CLAIM AND ANY LIABILITY THAT I OR MY CHILD MAY ALLEGE AGAINST RELEASEES (including reasonable legal fees and costs) AS A DIRECT OR INDIRECT RESULT OF INJURY OR DEATH TO ME OR MY CHILD BECAUSE OF MY CHILD'S PARTITIPATION IN ANY GREENJACKETS BASEBALL'S CAMP PROGRAMS , WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERS TO THE MAXIMUM EXTENT PERMITTED BY LAW. I PROMISE NOT TO SUE RELEASEES ON MY BEHALF OR ON BEHALF OF MY CHILD REGARDING ANY CLAIM ARISING FROM OR RELATED TO MY CHILD'S PARTICIPATION IN ANY GREENJACKETS BASEBALL PROGRAM(S).

I ACKNOWLEDGE THAT, BY SIGNING THIS DOCUMENT, I AM RELEASING GREENJACKETS BASEBALL LLC, SRP PARK AND THEIR REPRESENTATIVES, AGENTS, EMPLOYEES, VOLUNTEERS, MEMBERS, SPONSORS, PROMOTERS, AND AFFILIATES (COLLECTIVELY "RELEASEES") FROM LIABILITY, AND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. THIS SIGN UP AND RELEASE FORM IS A CONTRACT WITH LEGAL AND BINDING CONSEQUENCES AND IT APPLIES TO ALL ACTIVITIES IN WHICH MY CHILD ENGAGES DURING THE SUMMER CAMP AT SRP PARK MANAGED BY GREENJACKETS BASEBALL LLC, REGARDLESS OF WHETHER SUCH ACTIVITY IS A PART OF A FORMAL PROGRAM. I HAVE READ THIS RELEASE CAREFULLY BEFORE SIGNING. I UNDERSTAND WHAT THIS RELEASE MEANS AND WHAT I AM AGREEING TO BY SIGNING.

I understand that no insurance coverage for participants in these activities is provided by the GreenJackets Baseball LLC. By registering for this program, I understand and agree that if a portion of the program is unable to be completed due to unforeseen circumstances under responsibility of the GreenJackets Baseball, I will receive a prorated credit on my account for the uncompleted portion of the program. I also understand that no refunds or proration will be given for any other reason.

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NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Parent \_\_\_\_\_ or Guardian \_\_\_\_\_

## ASSUMPTION AND ACKNOWLEDGEMENT OF RISK

I acknowledge, agree and represent that I understand the Camp Activities and that my Minor Child is qualified, in good health, and in proper physical condition to participate in such activities. I acknowledge that such activities entail known, unknown and unanticipated risks, seen and unseen, which could result in physical or emotional injury, paralysis, death, and damage to property or third parties. I understand that such risks cannot be eliminated without jeopardizing the essential qualities of the activity.

My Minor Child has no physical or mental limitations which would preclude his/her/their safe use of the equipment that will be used in Camp Activities, and/or I assume all risks that may be created by such limitations. I further certify that neither my Minor Child nor I am currently mentally impaired or under the influence of drugs or alcohol; and I am otherwise legally competent to understand and enter into this Agreement for and on behalf of my Minor Child. I am assuming the hazard of this risk because my Minor Child(ren) wishes to engage in the Camp Activities. The risks outlined in this Agreement are not exhaustive and I acknowledge that there may be other risks, hazards, and dangers that, based on the circumstances, are integral to Camp Activities.

### RELEASE, INDEMNIFICATION AND PROMISE NOT TO SUE

I hereby indemnify, hold harmless and release GreenJackets Baseball LLC, its shareholders, directors, officials, representatives, agents and employees from any and all loss, claims, damage, or liability which might arise out of my Minor's participation in the Activities.

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NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Parent \_\_\_\_\_ or Guardian \_\_\_\_\_

## FACILITY RULES AND AGREEMENTS

My Minor Child will comply with ALL GreenJackets Baseball's rules, both written and as stated to him/her/them during his/her/their participation in Camp Activities. My Minor Child will obey the staff in regard to those rules as they affect his/her/their safety, other participants and observers, the property of GreenJackets Baseball, and all resources used in conjunction with Camp Activities. My Minor Child agrees and warrants that he/she/they will inspect each portion of the Climbing Activities in which he/she/they take part and that, if my Minor Child(ren) finds any condition which he/she/they considers to be unacceptable, hazardous, or dangerous, my Minor Child(ren) will notify Camp staff and refuse to take part in the Activities until the condition has been corrected. My Minor Child(ren) understands that GreenJackets Baseball reserves the right to refuse or terminate his/her/their participation in Activities for any non- discriminatory reason at any time.

I am aware of the recommend use of a protective helmet during Batting Activities, which could prevent permanent brain damage or other injury in the event of an accident. I am also aware it is my Minor Child(ren)'s responsibility to use a protective helmet according to the manufacturer's specifications while participating in Batting Activities and that, should my Minor Child choose to participate in Batting Activities without a helmet, the staff will not allow my Minor Child to partake in the Activity.

I have read this agreement, understand its terms, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature, and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law on behalf of myself and my Minor Child(ren). I also agree that if any portion of this Agreement is held to be invalid, illegal, or unenforceable, that portion of this Agreement shall be deemed separate, distinct and independent, and shall be ineffective to the extent it (i) invalidates the remaining provisions of this Agreement under applicable law or (ii) affects the legality, validity or enforceability of this Agreement.

I certify that I am at least 18 years of age and that no other representations have been made to me that change, alter, or modify anything within this Agreement.

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NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Parent \_\_\_\_\_ or Guardian \_\_\_\_\_

## KID'S SUMMER CAMP PARTICIPANT REGISTRATION FORM

### [PLEASE COMPLETE ONE FORM PER CHILD, FOR RELEASE PURPOSES]

#### Participant Information:

Child Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Participant Date of Birth: \_\_\_\_\_ Age during camp: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Alternative Phone number: \_\_\_\_\_ Guardian Email: \_\_\_\_\_

#### PLEASE COMPLETE THE BOXES THAT APPLY BELOW

<input type="checkbox"/> My child has physical impairments that may limit him or her from participating in some activities	<input type="checkbox"/> My child has NO physical impairments that may limit him or her from participating in some activities
Please explain here:	
<input type="checkbox"/> My child has allergies	<input type="checkbox"/> My child has NO allergies
Please explain here:	
<b>MEDICAL INSURANCE INFORMATION</b>	
Carrier	
Policy Number	
Policy Holder's Name	
<p>Parent(s) or Guardian(s) will be contacted immediately if a child is injured or becomes sick while attending <b>Day Camp</b>. In the event of an emergency where medical treatment is immediately necessary, I hereby grant permission for physicians, dentists, other licensed health care providers and their designees to administer outpatient medical, surgical, or dental services as appropriate, or necessary antigens or other injections, to perform emergency procedures as necessary or to refer to duly licensed medical personnel when indicated.</p> <p>PRINTED          NAME: _____ SIGNATURE: _____           DATE: _____ Parent _____ or Guardian _____</p>	
<b>EMERGENCY PICKUP CONTACT</b>	
LEGAL NAME:	CELL PHONE:
GREENJACKETS BASEBALL WILL NOT RELEASE ANY CHILD TO ANYONE OTHER THAN A PARENT OR GUARDIAN, UNLESS SPECIFICALLY LISTED HERE. THE CONTACT MUST PRESENT A LEGAL IDENTIFICATION CARD.	