

## 2023 KENNEBEC EXPLORERS CAMP REQUIRED DOCUMENTS

Dear Parents and Guardians,

We are delighted your child is participating in Maine Maritime Museum's Kennebec Explorers Day Camp! We can't wait to explore Maine's natural and maritime heritage through educational activities, games, science experiments, hikes, art projects, and much more.

Enclosed is the Kennebec Explorers Camp Required Documents In it, you will find:

1. Day Camp Basics
2. Camper expectation and behavior contract
3. Medical Release Form
4. *A Release/indemnification and Acknowledgement of Risk* form
5. *Pick-up Permission and Photo Release* Form

**Please return the following forms two weeks prior to the start of your child's first session at camp.**

- Camper behavior contract
- Medical Release Form
- Release/indemnification and Acknowledgement of Risk form
- Pick up permission/ photo release form

**Children may not participate until these completed forms are received.**

**\*\*If we do not receive your completed registration forms by the due date, we will return your payment and give your child's spot to a camper on the waiting list. \*\***

Send completed forms to:

Maine Maritime Museum

Attn. Katie Conroy

243 Washington Street,

Bath Maine 04530

or via email at [Conroy@maritimeme.org](mailto:Conroy@maritimeme.org)

**Thank you! We look forward to a great summer camp season!**

# Day Camp Basics

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## Drop-off & Pick-up Procedure

- Camp runs from 9:00am to 4:00pm
  - Drop off and pick up will be in front of the museum entrance. It will be moved into the lobby if raining.
- Parents/guardians must initial-in and initial-out their child each day.

## Required supplies needed for camp every day

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>• Lunch and snack</li> <li>• Refillable water bottle</li> <li>• Backpack</li> <li>• Sunscreen and bug repellent (applied before arrival at camp, please)</li> <li>• Book or Quiet Activity</li> </ul> | <ul style="list-style-type: none"> <li>• Required Medications</li> <li>• Hat</li> <li>• Bathing Suit</li> <li>• Towel</li> <li>• Change of Clothes</li> </ul> |
|--|---|

*(please don't hesitate to reach out to us before the first day of camp if any of these items pose a challenge.)*

## Dress Requirements

- Children should wear comfortable clothes and shoes that they can run and walk a great distance in and spend the majority of the day on their feet. Crocs or closed toed water shoes, might be uncomfortable, but can be packed as a back up for days that we will have water activities. **Open toed shoes or flip flops are not allowed.**

## Food and Water

- Every camper must bring a substantial lunch and snack with them. Refrigeration is unavailable, please pack perishable lunches with an ice pack.
- **The museum will provide a snack in the late morning**, please pack additional snack for the afternoon or in the event your camper will not enjoy the provided snack.
- Be certain to list food allergies or any other such concerns on the medical form.
- Please bring a water bottle. Water will be supplied at all times during camp.
- There is not sharing of food between campers. Only siblings and family members can share food.
- If for any reason you are unable to provide lunch and water, please make arrangements with Katie Conroy

## Recommendation/ Prohibited Items

- Each day we have a short rest period after lunch. This is a great time for you camper to catch up on reading or take part in any quiet activity. Please pack a book or another quiet activity that your child enjoys. We have some book available, but they are limited.
- Overly distracting toys and **all electronics are prohibited** during camp hours. If phones are brought to camp, they must remain off and stored away all day while at camp.

## Contact information

- The main phone number for the museum is (207) 443-1316. Guest service staff will be able to put you in touch with a camp leader or Katie Conroy.
- For Questions regarding camp, send emails to Katie Conroy, [conroy@maritimeme.org](mailto:conroy@maritimeme.org) or contact directly by phone at (207) 443-1316, ext. 325
- For payment concerns contact Guest Services at (207) 443-1316 ext. 331

## Camper Expectation and Behavior Policy Understanding

Campers are expected to display appropriate behavior at all times.

- Show respect for all campers and staff.
- Follow directions from staff.
- Abstain from foul, inappropriate behavior.
- Abstain from causing bodily harm to other participants or staff.
- Respect for equipment, other camper's property, and facilities.
- Participate in most of the activities.

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Staff will make every effort to ensure your camper has a positive experience here at camp. When a child does not follow the behavior guidelines, the following steps will be taken:

1. Staff will redirect camper to a more appropriate behavior
2. If inappropriate behaviors continue, staff will remind camper of camper expectation, and help provide alternative behavior. The parent/guardian may be notified.
3. If the camper's behavior continues, camper may face consequences including, but not limited to, loss of privilege, phone call to parent/guardian, parent/guardian conference.
4. A continuation of inappropriate behavior result in suspension or expulsion of the program without refund of payment.

Example of inappropriate behavior:

- Refusing to follow behavior guidelines.
- Using profanity, vulgarity or obscenity.
- Stealing or damaging property of other campers, staff and the Maine Maritime Museum facilities.
- Refusal to participate in activities or cooperate with staff.
- Leaving the program without permission.
- Inappropriate sexual or physical behaviors, gestures or harassment.
- Teasing, making fun of or bully of other campers and staff.
- Physical aggression/fighting.
- Bringing weapons

Incidents will be evaluated on a case-by-case basis. There may be times where your child's behavior result in an immediate expulsion. In this instance, parents or caregivers are required to pick up their child within 30 minutes of the phone call. Such behaviors include:

- Camper physically assaulting another camper, staff member, or museum visitor without provocation.
- Camper physically assaulting another camper, staff member, or museum visitor in a manner deemed highly inappropriate by the camp leader
- Deliberate endangerment to the safety of themselves, another camper, staff, or museum visitor

## Behavior Expectations and Behavior Contract

*Below is the behavior expectation for camp. Please review with your camper and have both you and the camper sign the bottom before arriving at camp*

- **Be Respectful**

- Treat campers and staff with respect and kindness
- Actively listen to others and follow staff directions
- Not getting involved in or leading any bullying, name calling, unwanted teasing or leaving others out
- Respecting other's things, camp equipment and the environment

- **Be Responsible**

- Wear appropriate clothing/shoes and being prepared for each day
- Informing camp staff of challenges, you have with another camper, activity or situation
- Accepting personal responsibility for my actions

- **Be Positive**

- Communicate appropriately: not using foul language, gestures, harsh words or inappropriate volume
- Actively showing support for camp activities and encouraging others

- **Be Committed**

- Having fun, learning, making new friends and having new positive experiences
- Challenging myself to try new things and participate in the scheduled events

- **Be Safe**

- Following all rules provided by camp staff and the museum
- Keeping hands and body to myself. I understand that pushing, hitting, kicking and fishing are not acceptable behaviors and will not be tolerated. This includes family/sibling "rough housing"

I understand that if I do not follow these expectations, I may:

1. Meet with staff to discuss my behaviors and make a plan for improvement
2. Have to sit out from activities and/or field trips
3. Have camp leaders discuss my behavior with my parent/guardians and determine a plan of actions
4. Be asked to leave camp for the remainder of the session.

Camper Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Medical/Release Form

To be completed by **Parent or Guardian** if participant is under 18 years of age. This must be completed for each individual child.  
**The below information requested has been identified by local first responders as being helpful in an emergency situation.**

Participant's Name \_\_\_\_\_ Preferred Pronouns \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ Week(s) Attending Camp: \_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_

Permanent Address \_\_\_\_\_

### EMERGENCY CONTACT

Name \_\_\_\_\_

Relationship \_\_\_\_\_ Day Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Email \_\_\_\_\_

### ALTERNATIVE 2<sup>nd</sup> CONTACT

Name \_\_\_\_\_

Relationship \_\_\_\_\_ Day Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Email \_\_\_\_\_

### HEALTH HISTORY FOR RESPONDER CARE: Check those that apply, give dates and description if appropriate:

- |  |                                     |   |   |  |
|--|-------------------------------------|---|---|--|
| <input type="checkbox"/> Heart Trouble       | <input type="checkbox"/> Fainting   | <input type="checkbox"/> Stomach Upsets                             | <input type="checkbox"/> Serious Poison Ivy Reactions | <input type="checkbox"/> Wears Glasses       |
| <input type="checkbox"/> Low Blood Pressure  | <input type="checkbox"/> Asthma     | <input type="checkbox"/> Constipation                               | <input type="checkbox"/> Wears Contact Lenses         | <input type="checkbox"/> Hearing Impairment  |
| <input type="checkbox"/> High blood Pressure | <input type="checkbox"/> Hay Fever  | <input type="checkbox"/> Kidney Trouble                             | <input type="checkbox"/> Sunstroke                    | <input type="checkbox"/> Diabetes            |
| <input type="checkbox"/> Tuberculosis        | <input type="checkbox"/> Bronchitis | <input type="checkbox"/> Hyperventilation                           | <input type="checkbox"/> Frequent Sore Throat         | <input type="checkbox"/> Headaches Sinusitis |
| <input type="checkbox"/> Earaches            | <input type="checkbox"/> Sinusitis  | <input type="checkbox"/> Other Histories or Conditions (list below) |   | <input type="checkbox"/> Convulsions         |

Any checked items that need more information or additional: \_\_\_\_\_

Operations or serious injuries: \_\_\_\_\_

Physical limitations or medical equipment required for physical activities: \_\_\_\_\_

Can the camper swim? \_\_\_\_\_ Child age during most recent tetanus shot: \_\_\_\_\_

**Any fear, emotional or behavioral challenges or situations camp staff should be aware of to better serve the camper:**

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**ALLERGIES & MEDICATIONS**

Medications will be kept and distributed by a Camp Supervisor. Please make sure they understand your child’s medication procedures. **Any daily “school year” medications should be continued during this program.** Parents and Guardians who wish to have their children self-administer medication must have written permission by their primary care physician and submit it with this form.

<i>Allergy</i>	<i>Reaction</i>	<i>Medication Required</i>	<i>Sent with the Participant?</i>	
_____	_____	_____	yes	no
_____	_____	_____	yes	no

<i>Current Medications</i>	<i>Directions</i>	<i>Reason for Medication</i>	<i>Sent with the Participant?</i>	
_____	_____	_____	yes	no
_____	_____	_____	yes	no

Medical Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

**Consent:** To the best of my knowledge the above information is correct. Permission is given for any emergency medical care which might be deemed necessary by medical personnel. I recognize my responsibility, through appropriate insurance or otherwise, to cover all medical and transportation expenses resulting from illness or injury during this program. I also give permission for a Camp Supervisor to transport or arrange for transportation for me/my child to the hospital or medical/dental office. Every reasonable effort will be made to contact the parent/guardian in the event of an emergency.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

(Must be a legal guardian of child)

## Release, Indemnification, & Acknowledgement of Risk Form

### DESCRIPTION OF THE PROGRAM

Maine Maritime Museum’s summer youth program offers a unique opportunity to learn in an outdoor environment. The program works to provide fun, educational experiences with the goal of helping participants understand and appreciate the ir natural environment. Please make a copy of these forms for your own records and submit the original signed copy to the museu m.

Maine Maritime Museum’s youth program components may include, but are not limited to (most programs include only some of these activities):

Day Hiking	Animal Tracking	Active Games	Maritime Heritage Study
Food Preparation	Community Building	Wading in Water	Watershed Studies
Team Activities	Ecosystems Study	Historic Tool Use	Use of Museum Exhibits
Off-Trail Navigation	Vehicle Travel	Science Experiments	Leave No Trace Practices
Water Craft usage	Art Projects		Playground Equipment Use

Programming is varied. It includes half-day programs, with some indoor segments, to full day outdoor experiences with the group covering sometimes long distances of varied, unpaved terrain. If you are unsure about a particular activity, please do not hesitate to ask for further explanation. All of our programming involves outdoor experiences where inherent risk and unpredictability are present. Campers are expected to be informed by parents/guardians prior to camp about the types of activities they will be participating in. Campers must apply sunscreen during camp, so please inform us in advance of any sunscreen related allergies. Kennebec Explorers conducts camp using a group cooperative model. Campers are expected to participate in most activities and if they choose not to participate are expected to encourage and cheer on other campers during activities. Campers may be asked to leave camp without a refund if their behavior is repeatedly deemed unsafe, unkind, or overly disruptive, and/or if they breach the “Camper Contract” outlined in this document. Behavioral management conclusions are at the discretion of camp leaders.

It is the policy of Maine Maritime Museum to send a child home in case of illness or serious injury as we do not have nursing staff or facilities available for treatment/convalescence. We request that you keep your child home when sick to avoid contagion among other participants and staff. Allow an extra day at home beyond fever or other serious symptoms for full rest and return to good health. We will not refund sick days.

### INDEMNIFICATION AND RELEASE

I acknowledge that my/my child’s participation in Maine Maritime Museum’s youth program entails known and unanticipated risks, which could result in physical or emotional injury, including death, to participants. I understand that the program includes wilderness experiences and will be continued in inclement weather and that each participant must provide proper clothing for their warmth and comfort. I accept the fact that program facilitators cannot guarantee my/my child’s total safety and that some risks associated with outdoor activities are beyond their control. I also understand that I/my child may be outside of immediate ambulance response and evacuation may be a longer process than a street emergency. I realize in the course of the program, I/my child may experience snow or ice covered trails, snow, rain, sleet, hail, freezing rain, high winds, intense sun, lightning, insects or other conditions that cannot be predicted. In consideration of my/my child being permitted by Maine Maritime Museum to participate in the education program, I agree to indemnify and hold harmless Maine Maritime Museum from any and all claims which arise out of my/my child’s participation in this program.

I hereby represent that I am/my dependent\_(dependent’s name) is in good health and that I have adequately informed Maine Maritime Museum personnel of any special needs that I/my child may have. I expressly agree and promise, on behalf of myself/my dependent, to assume all risks existing in Maine Maritime Museum’s education program and in borrowing Maine Maritime Museum equipment. My/my dependent’s participation is voluntary in spite of all the risks and I agree to release, defend and hold harmless Maine Maritime Museum and its officers, directors, employees and agents from any liability for any claims, without limitation, which arise out of my/my child’s participation in this program unless caused by Maine Maritime Museum’s gross negligence or willful misconduct.

I have had sufficient opportunity to read and ask any questions I may have of this document. I have read and understood it and agree to be bound by its terms.

Participant (if 18 years or older) or

**Parent/Guardian Signature**  
(Must be a legal guardian of child)

**Date**

Youth Program

**Pick-up Permission Form**

**Child Name(s)** \_\_\_\_\_

At the end of the program, staff will only release your child to those listed below. Names may be added as carpool opportunities arise. Please print neatly and include all parents' or guardians' names where appropriate. Campers must have separate written permission for days parents/guardians would like for their child to travel home alone or with fellow campers.

**I authorize that the following people may pick up the child named above:**

	<b>NAME:</b>	<b>RELATION:</b>	<b>P# IF NOT LISTED ELSEWHERE</b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

**Photo Permission From**

The above-named child may participate in all camp activities and programs. I **authorize/do not authorize** (circle one) Maine Maritime Museum to have and use photographs, slides, moving pictures, or videotapes of the person named on this form as may be needed for its records or public relations. Kennebec Explorers Day Camp is made possible by generous grant funding.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
 Parent or guardian signature

----- **For Staff Use Only** -----

Forms received:

- Camper behavior contract
- Medical Release Form
- Release/indemnification and Acknowledgement of Risk form
- Pick up permission/ photo release form