

UC SAN DIEGO RECREATION
KNOCK AROUND
BEACH CAMP

'09

PARENT HANDBOOK



UC SAN DIEGO
RECREATION



Dear Parents,

Welcome to the Knock Around Beach Camp! We are happy to have you participating in our camp this summer and we hope your child has a great time. There are a few important things you need to know about Beach Camp in this handbook. Please read through it and contact us if you have any questions or concerns.

Who's Who at Beach Camp?

Beach Camp Coordinator
Knock Around Director
Surf/Aquatics Director

Sophia 'Roo' Orgish
Derek 'The Rock' Noack
Clayton 'The Dude' Claiborn

In addition to the director and coordinator, we will also have two counselors and two lifeguards/surf instructors working with the 20 children enrolled in Beach Camp. All instructors and counselors are UCSD students, recent graduates, or working towards their teaching credentials in addition to being CPR & First Aid certified with extensive ocean experience. They are dedicated to Beach Camp and making sure that each child has a fun, positive, memorable and safe experience.

Important Phone Numbers:

For general program information and inquiries, please call Derek Noack at (858) 534-3911 or after June 15 at the Knock Around office at (858) 534-5675. After July 20, please contact Sophia Orgish's cell phone given out on the first day of the session.

KNOCK AROUND BEACH CAMP

PARENT HANDBOOK

Description and Requirements

The Knock Around Beach Camp is a coed non-competitive full day activities camp designed for children ages 8-14. This camp will allow children to explore the ocean in a fun, safe setting introducing kids to a variety of exciting activities in and out of the water. Activities will include, but are not limited to:

- **surf instruction**
- **boogie boarding**
- **team building challenges**
- **oceanography**
- **environmental discussions**
- **arts and crafts**

There will be a blend of scheduled activities with free-time play in order to allow the children an opportunity to learn new skills without missing out on their favorite beach activities. We are also planning two field trips during each session to the Birch Aquarium and to the tide pools. It is our goal that all children attending Knock Around Beach Camp gain a sense of environmental awareness, teamwork, self-esteem, leadership, and friendship.

All campers MUST:

- Be 8 years old prior to the first day of attendance
- Have the ability to understand and abide by camp rules
- Have the ability to understand and follow direction
- Have the ability to participate safely and effectively in a variety of physical and instructional activities
- Have the ability to pay attention without being disruptive
- Understand the consequences of inappropriate behavior
- Have the ability to follow safety instructions
- Have a competent swimming ability tested on the first day of camp
- Have the ability to interact with peer group in a civil manner
- Understand how to respect others and their personal belongings
- Be able to communicate needs to camp staff

Camp Location

Beach camp will be located outside at the North Side of Scripps Pier and inside the Sumner Auditorium off of La Jolla Shores Drive. We will have a tent set up on the beach, roughly about 50 yards from the pier. You will receive a camp schedule and map on the first day of the session.

First Day of Camp

Drop off and pick up on the first day of camp will be at the Canyonview Aquatic Center on the UCSD campus. A map of this location is included in this handbook. Please have your child at the designated drop off site by 9:30am. We will not be going to the beach on the first day of camp but campers will still need to bring their swimsuits. The first day of camp we will conduct swim tests, cover safety rules, and begin surf instruction from the land. If your child can not attend the first day of camp please contact Derek Noack or Sophia Orgish.

Drop Off After the First Day

Please drop your child off between 8:45am and 9:30am. The drop off point will be located above the beach, next to Scripps Pier. On the first day of camp parents will receive a map with detailed directions to the drop off/pickup location for the rest of the session.

Pick Up After the First Day/Late Pick Up Policy

Pick up will be from 3:45-4pm at the designated drop off/pick up zone. After 4pm, your child must be enrolled in After Camp Care or else you will be considered late. If your child is enrolled in After Camp Care and you pick them up after 5pm, you will also be considered late. Please plan accordingly, taking parking, traffic, and other concerns at the beach in mind to pick up your child on time. There will be a charge of \$5 per 15 minutes per child if you are late picking up your children. You are expected to pay this in cash or check to the counselor who waits with your child.

Late fees are: 1-15 minutes=\$5/child; 16-30 minutes= \$10/child; 31-45 minutes = \$15/child; 45+ minutes=\$30/child

Sign In & Out:

Parents must sign your child in and out with a counselor on a daily basis. If you are carpooling please let us know so we will be able to identify correct rides. We understand that parking can be difficult at the beach, so please plan ahead, as this is for the safety of your child. We will be somewhat accessible curbside (red curb however) if you are having problems with parking.

Before and After Camp Care:

You may sign your child up for Before Camp Care (8-8:45am) for an additional fee of \$30/session or for After Camp Care (4-5pm) also for \$30/session. Campers must be enrolled in Before/After Camp Care in order to take advantage of it. After Camp Care campers must be picked up by 5pm or a late fee will be applied.

Absent or Late Drop-Off/ Early Pick-Up

If your child will be absent, please call the Beach Camp cell phone so we know not to expect them. If you will be late (arriving after 9:30am) we would appreciate it if you could call us to let us know. The late drop-off must be made at the camp headquarters (blue canopy north of the pier). If you will be picking up your child early from camp, please let a counselor know during drop off so arrangements can be made. Pick up during non-designated pick up times will be a bit tricky. Parents must sign their child out at our headquarters down on the beach. Parking at the beach can be problematic and we do not have any parking privileges; however, metered spaces and twenty minute loading spaces can be found.

What to bring

You will need to send your child to camp ready to get in the water each day wearing their bathing suit and bringing the following items in one backpack or beach bag:

- Water is a **must** - water down at Scripps is not always reliable.
- A non-perishable lunch as well as any snacks your camper may want
- Wetsuit optional, but recommended. Average water temp. is 67 degrees.
- Towel
- Sunscreen/Hat. Please send your child already covered in sunscreen, we will have them reapply it during camp.
- A warm change of clothes in case it is a gray day at the beach
- *OPTIONAL: A boogie board, as long as you are comfortable sharing it when you are not using it

What NOT to bring:

Please do not have your children bring any surfboards, sand toys, or beach equipment besides their towel or wetsuit. We will provide everything else your child will need. Please label everything including sweatshirts and towels. We will try to save all items in a lost and found but all belongings are the responsibility of the camper, not the staff.

* Children are welcome to bring boogie boards to camp but are responsible for them and agree that they may be used by other children.

Swimming and Safety:

Your child's safety is our number one priority. We will have two lifeguards working for the camp at all times however your child must be a strong swimmer in order to swim in the ocean or learn to surf. Campers are required to take a swim test at the Canyonview Pool on the first day of camp. This test will consist of swimming 200 yards continuously and treading water for two minutes. Please be aware that this camp will take place on the beach and there will be certain factors beyond our control, i.e. rip currents, inclement weather, etc. Please communicate any special needs your child has to Sophia Orgish.

Inclement Weather Plan:

Average air temperature for late July/August is 76 degrees. We are hoping the weather will be just as beautiful. If it does rain we will stay under cover down at the beach in hopes that it clears up. If the weather is too severe the children will be relocated to Knock Around Camp facilities at UCSD and parents will be notified.

Refunds:

Once you have signed up your child for a session we are counting on that camper to be there. If you decide to cancel a session you must contact Derek Noack at (858) 534-3911 or email at dnoack@ucsd.edu. After June 15, please call the camp office at (858) 534-5675. Refunds and credits will only be issued if you contact Derek Noack two weeks before the first day of the camp session. You will be charged a \$40/session fee per child if you drop out after registering.

Visitors

No visitors are allowed at Beach Camp. All children must be registered to attend.

Illness/Injury

If your child becomes ill during camp hours, a Beach Camp Staff member will try to contact you. It is very important that we have all phone numbers where we can reach you. If your child is injured during camp, Beach Camp staff will take all necessary steps to ensure correct medical attention. If you are unable to be reached in an emergency, your child will be transported to the hospital by an ambulance. Please let the Beach Camp Staff know if there has been a change in a work, home or emergency number.

Medication

If your child is taking any medicine or has any allergies please let us know what it is in writing. If your child takes medication and they need to take it while at camp, you must make prior arrangements with the Beach Camp Director for this. The following is necessary for us to dispense any medication:

1. The medication needs to be brought to us in the original container.
2. Full, clear, proper, written directions must be given to Beach Camp Staff about dispensing the medication.

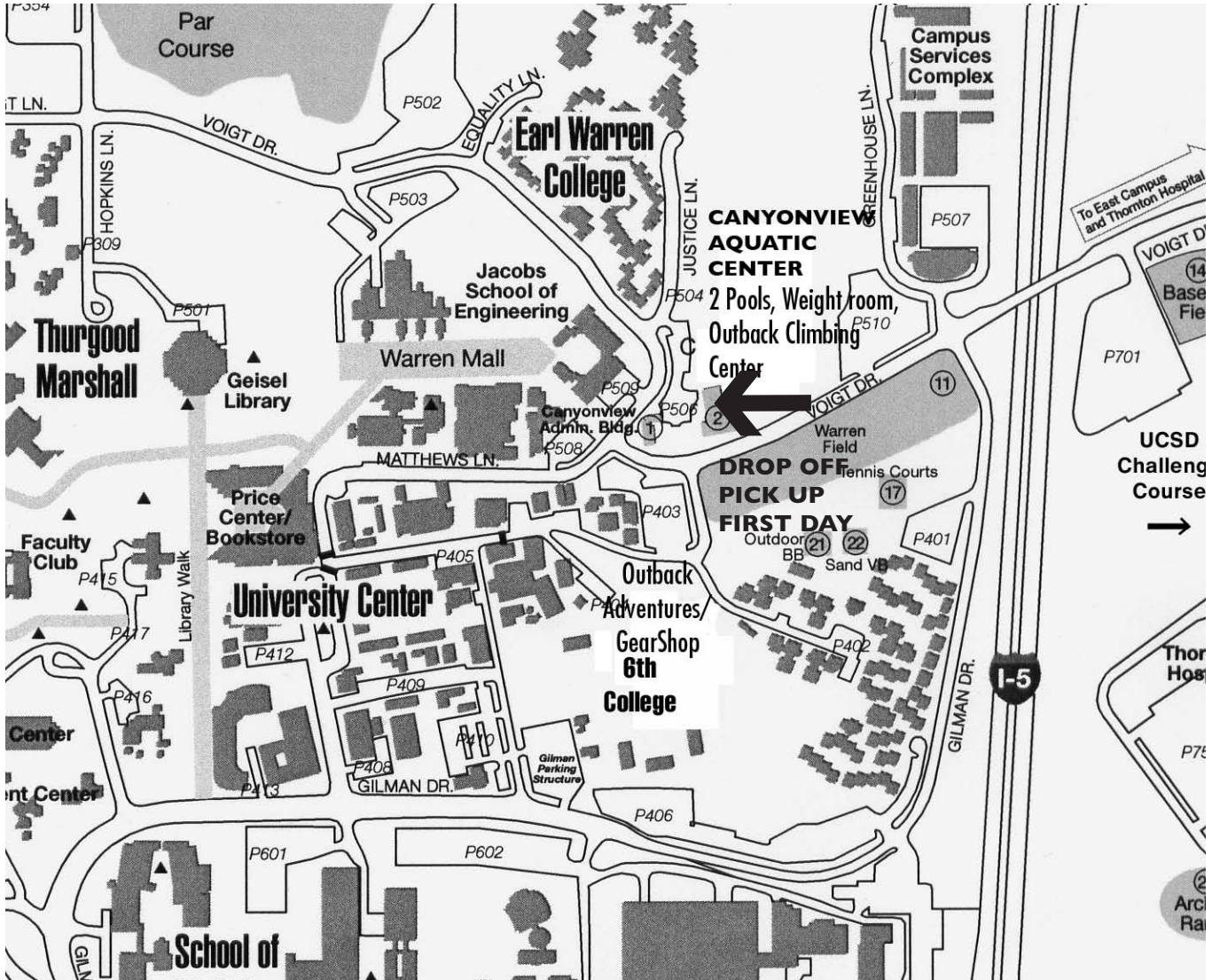
Beach Camp Rules

Please help the Beach Camp staff by reviewing these rules with your child before camp.

1. Buddy System. Everyone needs to have a buddy at all times. If you need to leave the group for any reason, you must ask permission, state where you are going, and go in groups or pairs. In general, you must always stay in view of the counselors.
2. Bathroom trips. No going into bathrooms unless a counselor is with you and has said it is OK.
3. No going into the street or parking lot unless an counselor is present and has said it is OK.
4. No name calling or foul language.
5. No hitting, kicking, or spitting. Keep your hands and feet to yourself.
6. No throwing things, including sand, except objects used in a game.
7. Everyone must share the equipment.
8. No gum at Beach Camp.
9. No eating at any time other than snack time.
10. Do not use soda or candy machines.
11. No litterbugs! Pack it in; pack it out, especially after snack.
12. Listen to your counselor and treat everyone at camp with respect.
13. Leave toys, electronic games, ipods, and all beach equipment at home.
14. Tell a counselor when there is a problem so they can take care of it.
15. Treat other people's belongings with respect.
16. Take care of Beach Camp equipment.
17. Have fun and help others to have fun here at Beach Camp.

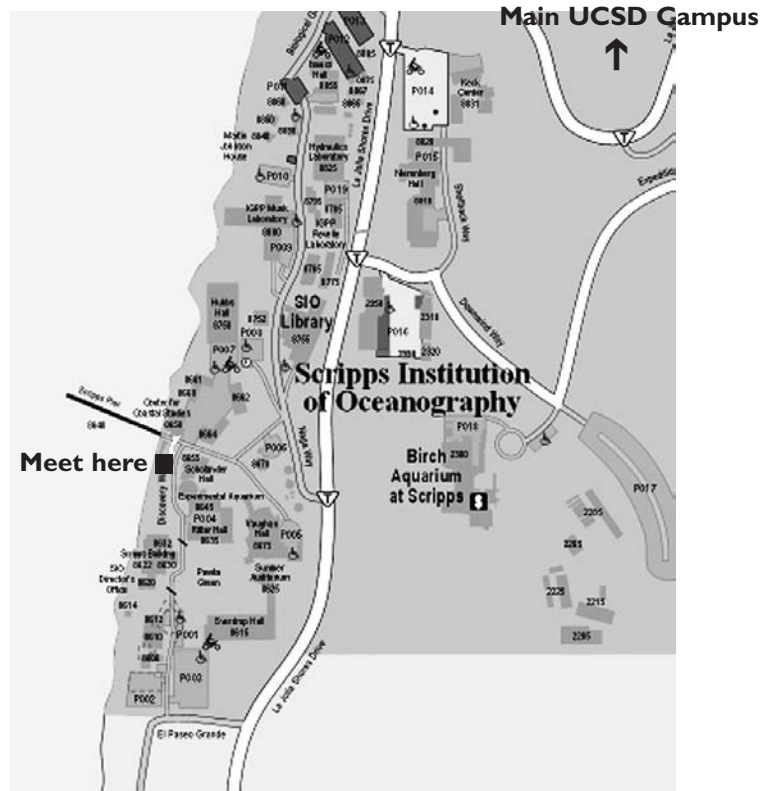
Knock Around Beach Camp is a fun and exciting place for kids and we expect everyone to follow the rules so that we keep the atmosphere fun and safe for everyone.

Map to Beach Camp First Day Drop Off



Voigt Drive to Justice Lane, Parking Lot P506. There are metered spots.

Map to Beach Camp After First Day



From campus: Turn onto La Jolla Shores Drive heading south - towards the beach. Continue down La Jolla Shores (past overhead walking bridge) and turn **RIGHT** onto Naga Way. Take an immediate **LEFT** once on Naga and then the road curves to the **RIGHT** towards Scripps Pier. Take a **LEFT** where it dead ends at the pier and the drop off point is on the grassy area on your **RIGHT** (near Snackropolis). There are 20 minutes loading zone spaces available.

CAMP EMERGENCY INFORMATION FORM

Please check the Camp session(s) you are registering for:

Leadership Camp: I II III IV V VI Knock Around Camp: I II III IV V VI

Beach Camp: I II

*Note: Please complete separate form for each child

▼ Child Information

PLEASE PRINT IN INK

CHILD'S NAME	
BIRTHDATE (MO/DAY/YR)	AGE GRADE IN FALL <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
HOME ADDRESS	
CITY/STATE/ZIP	
PARENT'S NAME(S)	
WORK PHONE (MOTHER)	(FATHER)
HOME PHONE	CAN YOUR CHILD SWIM? <input type="checkbox"/> YES <input type="checkbox"/> NO

▼ Affiliation to UCSD

STAFF <u> </u>	FACULTY <u> </u>	STUDENT <u> </u>	COMMUNITY <u> </u>
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▼ Parent/Guardian Authorization

I, the undersigned parent having legal custody/guardianship of _____ ("said minor") give permission for said minor to attend any Knock Around Camp program activities supervised by the authorized Knock Around camp staff and attest that said minor is physically able and mentally prepared to participate in all activities as described in program brochures. I hereby voluntarily and knowingly assume all risks and dangers inherent and incidental to the activities for which I have given my permission and thereby will not hold the UCSD Recreation Dept. liable for any injuries incurred during these activities. I hereby authorize the UCSD Recreation Dept. and Knock Around Camp staff as agent for the undersigned, the consent with respect of said minor to any x-ray treatment, and hospital care which is deemed advisable by, and is to be rendered under the licensed under the general or special supervision of any physician and surgeon licensed under the provisions of the Medical Practice act on the medical staff of any hospital. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority to the above described agent to give specific consent to any and all such diagnosis, treatment or hospital care which a physician, meeting the requirements of this authorization, may, in the exercise of his/her best judgement, deem advisable. I understand that UCSD Recreation Dept. is not responsible for payments incurred due to said medical care. I further acknowledge that I have read the description and requirements for camp eligibility and have registered my child with the understanding that he/she meets these minimum requirements.

DATE _____
SIGNATURE _____

CHECK ONE:

PARENT LEGAL GUARDIAN PERSON HAVING LEGAL CUSTODY

▼ Miscellaneous Information

REQUIRED BY STATE LAW NAME OF HEALTH INSURANCE CO.
POLICY NUMBER
FAMILY DOCTOR
ADDRESS
PHONE #

▼ Health Record

VACCINES (APPROXIMATE DATE IMMUNIZED)	DISEASES
DPT	CHICKEN POX
TETANUS	MUMPS
ORAL POLIO	MEASLES
MUMPS	GERMAN MEASLES
RUBELLA	
LIST ALLERGIES, SERIOUS INJURIES, DISEASES, OPERATIONS AND ANY RESTRICTIONS ON PHYSICAL ACTIVITY:	

▼ Medication Administration

IF YOUR CHILD IS ON ANY MEDICATION, PLEASE LIST:	
MEDICATION	DOSAGE
ANY SPECIFIC INSTRUCTIONS RELATED TO CARING FOR YOUR CHILD _____	

▼ Emergency Information

AUTHORIZED PERSONS, OTHER THAN PARENTS, TO BE CALLED IN CASE OF AN EMERGENCY:

NAME	PHONE #	RELATIONSHIP

▼ Child Release Authorization

PERSONS AUTHORIZED TO PICK UP CHILD FROM THE FACILITIES:

NAME	PHONE #	RELATIONSHIP

Child in custody of:

both parents mother only father only other

Special circumstances _____

BRING COMPLETED FORMS TO CHECK-IN TABLE ON THE FIRST DAY OF CAMP.

OFFICE USE ONLY

Member Number _____

Participant's Name (Please Print) _____ Member Number _____
Last First

UNIVERSITY OF CALIFORNIA, SAN DIEGO
Activities & Programs

Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Waiver: In consideration of being permitted to participate in any way in activities indicated on the reverse side of this form, hereinafter called "Activities & Programs", I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue The Regents of the University of California, its officers, employees, and agents from liability from any and all claims including the negligence of The Regents of the University of California, its officers, employees and agents, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Activities.

Signature of Participant Date Signature of Parent/Guardian of Minor Date

Assumption of Risks: Participation in "Activities & Programs", carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one Activities to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activities. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activities and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Participant Date Signature of Parent/Guardian of Minor Date

Participant's Age (if minor): _____

Any questions regarding this waiver should be directed to UCSD Risk Management (858) 534-3820