



# TINY BUBBLES - 2025

Ages 3 - 4

9:00 am – 1:00 pm

June 30th - August 7th (no camp 7/4)

Child's Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ ZIP \_\_\_\_\_

Parent or Guardian's Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Contact 1/Relationship/Phone \_\_\_\_\_

Emergency Contact 2/Relationship/Phone \_\_\_\_\_

Medical Condition/ Allergies \_\_\_\_\_ Medication \_\_\_\_\_

\*\*\*Any child requiring an epi-pen needs to complete a Doctors order form prior to the start of the program. Please note staff are unable to dispense any medication other than an Epi-pen if needed. This includes sunblock.

- \*Please note child must be potty trained by start of program
- \*Parent must provide child's snack (due to food allergies in other children, please do not pack peanut-based products with your child)
- \*For your convenience, please send your child with an extra set of clothes, please label all personal items

Approved	1.	_____	Phone _____
Pick-up	2.	_____	Phone _____
People	3.	_____	Phone _____

## Participants can sign up for either Mon/Wed/Fri OR Tues/Thurs (choose ONLY one of the options below)

Room 9 (1030.301) Mon/Wed/Fri - \$210

Room 9 (1030.302) Tues/Thurs - \$150

Room 10 (1030.303) Mon/Wed/Fri - \$210

Room 10 (1030.304) Tues/Thurs - \$150

**I have read the code of conduct (attached) and understand the steps and consequences that will take place if my child behaves inappropriately. I have also read the Photo Release and agree to the terms presented on the following page.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only: Amount: _____ Cash _____ Check _____ Made payable to <u>Treasurer Town of Wallingford</u>
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# **Tiny Bubbles, Pop Shots, Summer Playgrounds Code of Conduct**

## **Code of Conduct**

To ensure that the rights of all individuals are protected while attending the playgrounds and to establish the safest environment we have set the following rules for individuals attending the Wallingford Parks and Recreation Summer Playground.

- Disrespectful, abusive language will not be part of the playground. (No profanity, racial slurs or putdowns.)
- Rudeness, lack of courtesy, and disrespect for will not be tolerated.
- Physical contact of any kind, including but not limited to, kicking, biting, or pushing is not allowed.

## **The following behaviors are considered very serious and will result in suspension or, and in some cases, immediate expulsion from the playground:**

- Possession or use of weapons, illegal drugs or other controlled substances, and any kind of alcoholic beverages.
- Physical abuse of any kind including, hitting, kicking, biting or pushing another participant or staff member.
- Failure to follow staff instructions thereby resulting in situations that put themselves, other participants or staff in physical danger.

The following steps will be followed if a playground participant does not abide by the playground rules. **If a child is physical with another child, the child that is physical will be sent home immediately.**

- **1st Infraction:** Discuss the inappropriate behavior with the supervisor of the playground and make parents aware of the behavior.
- **2nd Infraction:** Playground supervisor will discuss the inappropriate behavior and give a “time out” or appropriate consequence. Parents will be notified of the behavior.
- **3rd Infraction:** Playground supervisor will discuss the inappropriate behavior and the participant will be asked to take a day off from the playground. Parents will be notified.

After the third infraction and a day home, the participant will be given one more chance to follow the rules. If the participant is involved in any inappropriate behavior after the third infraction, the participant may be asked to stay home for the remainder of the week, and then the remainder of the session. If the participant is enrolled in the second session he/she will start that session with a clean slate.

**NO REFUND will be given if a participant does not attend the remainder of the session due to inappropriate behaviors.**

## **PHOTO RELEASE**

I, THE PARENT/GUARDIAN OF THE ABOVE NAMED CHILD, WHO PARTICIPATES IN THE WALLINGFORD RECREATION SUMMER PROGRAM, AUTHORIZE THE WALLINGFORD PARKS & RECREATION DEPARTMENT TO USE ANY PHOTOS OR VIDEOS TAKEN OF MY CHILD TO BE USED IN MARKETING MATERIALS INCLUDING SOCIAL MEDIA.