



1409 Theresa Terrace, Madison, Wisconsin 53719 • Phone: 608-661-0359 • Fax: 608-661-0318

*Theresa Terrace Neighborhood Center is operated by Wisconsin Youth Company.*

Dear Families,

Theresa Terrace Neighborhood Center (TTNC) is excited to provide a free summer camp program for elementary age children living in and around the Falk Elementary community. Summer camp spots are limited, and so we require a minimum three day per week attendance commitment from participants and families.

Our camp will be open Monday-Friday from 10:30 a.m.-4:30 p.m., beginning June 24 and ending August 16. Lunch and an afternoon snack will be provided daily. There will be no camp on July 4, camp will resume on Friday, July 5. Participants are free to walk home independently or to be picked up any time before 4:30 p.m. Staff and students typically return to camp at 3:30 p.m. on field trip days.

Our camp provides various educational and enriching opportunities for participants both at the center and out in the greater community. Please pay special attention to our summer calendar that will be mailed to your home for specific field trip and special event information.

If you wish to have your child(ren) participate in our program, please complete the registration and aquatics forms, as well as the demographic information. The demographic information is solely used for reporting purposes to our funders. Once your registration form is received, you will be contacted by TTNC staff to discuss program specifics for your participant.

We look forward to having your family participate in our program. If you have any questions regarding the registration process or to submit your child(ren)'s registration form, please contact Takela Harper at 608-661-0368 or [tharper@wisconsinyouthcompany.org](mailto:tharper@wisconsinyouthcompany.org)

Sincerely,

Jennifer Weber  
Theresa Terrace Neighborhood Center Director

# Theresa Terrace Neighborhood Center K-5: Registration Form - 2019 Summer



Participant's Name (First, Middle, Last) _____		Male / Female _____	Birthdate _____	Age _____
Grade in Fall 2019 _____	School Attending in Fall 2019 _____	Program Site _____		
Parent/Guardian 1 _____	Relationship to Child _____	Parent/Guardian 2 _____	Relationship to Child _____	
Address _____		Address _____		
City/State/Zip _____	Home Phone _____	City/State/Zip _____	Home Phone _____	
<input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home Work Phone _____ Cell Phone _____ Best Phone # During Program Hours _____		<input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home Work Phone _____ Cell Phone _____ Best Phone # During Program Hours _____		
E-mail Address _____		E-mail Address _____		

**Participant resides with:**  Mother  Father  Guardian(s)

**Special Health Information** (Please be specific; use other side if necessary.)

Allergies: \_\_\_\_\_ Have Epi Pen:  Yes  No

Medical Conditions: \_\_\_\_\_

Behavioral/Emotional Needs: \_\_\_\_\_

Asthma: \_\_\_\_\_ Have Inhaler:  Yes  No

**Emergency Contact/Pick-up Authorization Information:**

In addition to primary and secondary persons listed above, list one emergency contact (REQUIRED). Add additional authorized pick-up persons here, if applicable.

Name (First & Last)	Best Phone # During Program Hours	Complete Home Address	Relationship to Child	Emergency Contact Person
				<input checked="" type="checkbox"/>
				<input type="checkbox"/>

**Registration and Permission to Participate**

1. I am aware that if my child's participation in any Wisconsin Youth Company (WYC) program(s) for which he/she is registered requires more than reasonable accommodations, whether due to special needs or behavior, my child may be removed from the program.
2. I understand if my child has any behavioral/emotional needs, I have so indicated in the special health information section of this form.
3. In the event my child becomes ill or injured, I understand that an effort will be made to reach me or an emergency contact person on file. I give consent for Wisconsin Youth Company to act on my behalf to obtain emergency care and treatment if deemed necessary.
4. I understand WYC will provide transportation. I give permission for my child to be transported in a WYC bus or van, or by a contracted provider during summer programming. I understand that unacceptable behavior on the bus may lead to my child's removal from the program.
5. I understand that an authorized pick-up person or myself must pick up my child on time or I can authorize my child to walk home from Theresa Terrace Neighborhood Center (TTNC) by checking the box below and providing your initials.  
 I give permission for my child to walk home from TTNC \_\_\_\_\_ (initials).
6. I understand that WYC may contact me by email and text messaging for the purpose of communicating urgent information that involves my child's program. I understand that I can opt-out of this service by contacting the WYC administrative office.
7. I give permission for my child or me to appear in any media coverage approved by Wisconsin Youth Company and for WYC to use photos of my child in promotional publications, flyers, social media or website.
8. I have read and understand the program description and schedule as outlined in the registration information letter.

Parent/Guardian - Please Print Name _____	Participant - Please Print Name _____
Signature of Parent/Guardian _____	Signature of Participant _____
Date _____	Date _____

<b>Office Use Only</b> - Date Received _____ Intake Initials _____ WAIT LIST: M T W R F Date Confirmed _____
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# Theresa Terrace Neighborhood Center K-5: Aquatics Form - 2019 Summer

Please read this permission form completely and indicate the appropriate swim level for your child.



Child's Name (Last, First) \_\_\_\_\_

Child's program shirt size: (wicking sport/swim shirt) Youth: S M L Adult: S M L

### I Understand:

1. There is risk in having my child participate in swimming and other aquatic activities, and I agree to absolve Wisconsin Youth Company (WYC) of any liability as a result of my child's participation in swimming or aquatic activities.
2. WYC adheres to state licensing regulations, American Camp Association accreditation standards (for applicable programs) and program policies regarding supervision of children while swimming.
3. Swimming will only take place at beaches and swimming pools where there is a certified lifeguard on duty.
4. Swimmers will be supervised by camp staff at a ratio of one adult staff member for every eight swimmers.
5. Swim levels, as defined below, will be used to divide swim groups during swim activities.
6. Aquatic environments may vary and the swim levels, as defined below, will be translated accordingly.
7. Aquatic or WYC staff members reserve the right to decrease participant swimming levels for any reason. Some aquatic facilities will require an additional swim test for deep water swimming.
8. I may update my child's swim level in writing either at my child's program location or by sending an email to the WYC office.
9. My child will receive a program shirt and will be required to wear the program shirt for all program swimming activities at public facilities. The program shirt will help WYC staff and lifeguards supervise my child and has the added benefit of providing sun protection. My child will not be allowed to swim without a program shirt. (Not applicable to Middle School U.)

### Please select one of the swim levels below:

Please note that flotation devices such as water wings or lifejackets are not permitted for use in day camp program. (Lifejackets are provided for Wander Wisconsin and Middle School U boating programs.)

- White Level – Non-Swimmer:** my child is not allowed to go in the water, but may play in a designated area away from the water.
- Red Level – Beginner Swimmer:** my child has little or no swimming experience. My child can enter and exit the water unassisted and put his/her face into water. My child must stay in water no deeper than waist level at pool or beach.
- Yellow Level – Intermediate Swimmer:** my child has intermediate swimming skills. My child can tread water for at least 20 seconds; swim with arm action and some side breathing; and has been introduced to deep water. My child may swim anywhere within the designated swim area of the swimming pool with water levels up to six feet. My child may participate in canoe, kayak and stand up paddleboard activities, if applicable. In a beach setting at day camp my child will be expected to remain in water no deeper than chest level. My child may use waterslides dropping into water up to six feet deep.
- Green Level – Advanced Swimmer:** my child has advanced swimming skills. My child can tread water for at least one minute; swim for an extended period of time with arm action and side breathing; and is comfortable in deep water. My child may swim in water deeper than six feet. In a beach setting at day camp my child will be expected to remain in water no deeper than chest level. My child may participate in canoe, kayak and stand up paddleboard activities, if applicable. My child may use waterslides dropping into water up to six feet deep.
- Double Green Level – Advanced Swimmer with Diving Board & Deep Water Slides Permission:** my child has advanced swimming skills, as listed for 'Green Level.' If available, my child may jump off low diving boards (feet first only and no flips). My child may also use water slides dropping into water deeper than six feet.

Do you have any concerns about your child participating in water activities? YES NO

If answered yes, please provide comments:

**I have reviewed the swim & aquatic activity permission form and I give permission for my child to participate in swim and aquatic activities as indicated above.**

\_\_\_\_\_  
Parent/Guardian - Please Print Name



\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date