Dear Parent/Guardian,

Thank you for joining us for Corbin Kids Summer Camps! We are so glad to have your child as a camper in our program!

Please read this Summer Camp Welcome Packet carefully and fill out the appropriate forms that you will need to bring with you on the first day of camp. It will help you prepare your child for the camp, and it will inform you of the policies and guidelines for camp. This packet will also include new camp protocols because of the Covid-19 virus mandates.

The camps Corbin Art Center offers, have something fun for every child to explore and foster their creativity! There are many themed camps for you and your child to choose from. They will make lots of new friends, while learning new things and making fabulous projects!

The Corbin Art Center staff will introduce and encourage your child to participate in many new activities each day! They will explore many new art mediums, while learning in a fun and creative atmosphere. Corbin Art Center is located in Spokane's historical Marycliff area, and is on the state and national historical register. The center will have a strict limit of people who can be in the building during camp hours and there will be new Check-in/Check-out procedures. Please see the page documenting those new guidelines.

Thank you again for choosing to send your child to the Corbin Kids Summer Camps! We want your child to have an awesome camp experience, have lots of fun being creative, make new friends, and build life-long memories with us this summer!

Sincerely,

Scott Niemeier, Director, Corbin Art Center

Carissa Gregg, Assistant to the Director, Corbin Art Center







What do we do at the Corbin Art Center?

The Corbin Kids Summer camps offer a wide variety of themed day-camps for your child to enjoy. They will explore a variety of art activities, discover new interests, make new friends and feel confident to try something new. The CAC teaches process themed art in a fun and creative way! Your child will bring home fantastic works of art that they and you are proud to display.

Where are we located?

Corbin Art Center is situated in the beautiful and historic Marycliff area. We are located at the top of Edwidge Woldson Park and east of Moore-Turner Heritage Gardens. The center's physical address is 507 W. 7th. Ave., Spokane, WA 99204.

Lamp Staff

The camp instructors at the Corbin Art Center are super creative, love to share their art knowledge with children, and have First Aid/CPR certifications. Many of our instructors have teaching certificates and work in the surrounding school districts. All go through national background checks and have completed the new Covid-19 virus trainings that the City of Spokane along with the Spokane Department of Health mandates.

Weather Policies

Corbin Art Center has beautiful park like surroundings, along with the MTHG gardens that we can enjoy in the good summer weather. When the weather is rainy or smoky, we have our historic and beautiful indoor areas for camps. The CAC will observe all social distancing rules while maintaining safety precautions due to inclement weather or smoke particulate levels.

What will my child's day be like at the Corbin Kids Summer Camps?

- *(The below schedule is tentative and can change depending on weather/circumstances.)
- 8:45am -9:10am Check-in (No camper drop-off earlier than 8:45am!) Campers will stay in their group/pods with their instructor.
- 9:15am Instructors and campers will go to their individual classrooms. (1 group/pod at a time while physical distancing)
- 9:20am-11am Introductions/Rules/Morning projects/Snack/Washing of hands frequently.
- 11:15am First group/pods go out to Lunch in the park. Physical distancing practiced.
- 11:30am Second group/pods go to Lunch on the east side of the Corbin Art Center. Physical distancing practiced. (Check-out for ½ day preschool camps)
- 11:30-11:45am/12pm After lunch is eaten and cleaned up, play games that can be done while physical distancing.
- 11:45am-12pm Check-in of afternoon ½ day campers.
- *Full day campers go back to classrooms for afternoon projects.
- 12:10pm All campers must wash hands after lunch.
- 12:15pm to 2:30pm –
 Projects/Hikes/Snack?/End of day cleanup/Washing of hands frequently.
- 2:30pm 2:40pm Gathering of backpacks/lunch containers and all projects that are to go home that day.
- 2:45pm to 3:15pm Groups/Pods will go outside, one at a time, while physical distancing, to their designated Check-out areas to wait for parents to pick them up.

Daily Drop-Off & Pick-Up at the Corbin Art Center

- Parents and campers can arrive no earlier than 8:45am and get in the physically distanced line indicated by the cones and signage.
- All campers must wear a mask or a face shield to attend camps.
- Check-in/Check-out will now occur out in front of the building and then your child will be shown to their instructor's meeting area.
- You will be asked daily questions about your child's health, along with the first day of camp - emergency contact info, allergies, and so on that will be part of this new policy.
- Picking up your child can start as early as 15 minutes before the end of camp, and this will also be outside in front of the building.
- Please arrive to pick up your child no later than 3:15pm.
- If the weather is bad, this process may change.

♣ Dress code & Sunscreen Policy

Campers should dress according to the weather in comfortable clothing layers that you do not mind if they get paint or glue on. You can provide an old large t-shirt or apron for clothing protection. We try to only use washable art supplies, but some projects require non-washable supplies. Please have them wear sturdy shoes as we do like to take the kids outside for play and hikes. Hats are encouraged for outside sun protection, but you can also apply sunscreen to your child before you check them in for the day. Corbin Staff cannot apply sunscreen to your child but your child if capable can bring their own and put it on before sun exposure.

Personal Belongings

Campers may bring a backpack/lunch container/jackets or sweaters, which we will put in labeled plastic bag and then in their designated classroom area. If the student has a cell phone, we do not allow them to be used during camp time. They can ask their instructor if they can be used during breaks and lunchtime. Please tell your child not bring other personal belongings so they do not get damaged or disappear.

What to bring to Camp

- 1. All campers will be required to come to camp with a mask/face covering on and must wear it through the entirety of camp with some limited exceptions (meal time and outdoor play).
- 2. Backpack/Lunch container with their name on it.
- 3. Water bottle with their name on it.
- 4. A nutritious lunch and two additional snacks.

Corbin Art Center is a NUT- FREE facility!!!

- 5. An old t-shirt or apron to protect clothing.
- 6. Light sweater or jacket.

Parent Communication

Parents, please feel free to call Corbin Art Center if you have any questions or want to check on your child. Our phone number is 509-625-6677. CAC will adhere to the strict capacity maximums that can be in our building at any one time. This means we will not be allowing parents in the building as we used to before Covid-19. You can ring the front door doorbell (to the right of the door knob) and one of our staff can let you in or answer any questions you may have.

Required Forms to be Filled Out Prior to the First Day of Camp

- 1. City of Spokane Parks & Recreation Dept. Youth Activities Agreement Waiver, and Release of Liability.
- 2. Corbin Kids Summer Camp Child Medical Form. *This is only if your child needs medication while at camp. (Inhalers, Epipens, Allergy meds, ect.)
- 3. Corbin Kids Summer Camp Pick-up Authorization Form.

*You will also have to fill out a short form that will be part of our new Check-in and Check-out form on the first day of each new camp week. Please see the copy of the new Daily Health Screening Questionnaire for the questions you will be asked about your child's health.

*We realize this isn't quite the experience you've come to know and love from us. Please know that we are taking the CDC and Spokane Health Department's guidelines very seriously, and we appreciate your patience. Thank you!

*One last note: Campers must be Toilet-Trained!

Daily Health Screening Questions:

Every day that you bring your child to camp, please be prepared to answer a few health questions. This is all part of our new Check-in/Check-out procedure and will be recorded daily. Remember that your child/youth must wear a mask to camp each day and keep it on unless they are eating or outside where there is enough space for physical distancing.

Here are the questions we will ask daily;

- Did you take your child's temperature prior to coming to camp today?
- Was their temperature under 100.4 degrees?
- Does your child/youth have any of the following symptoms that are not attributed to another condition? Or have they had these in the past 72 hours?
 - A cough.
 - Shortness of breath or difficulty breathing.
 - A fever of 100.4 or higher or a sense of having a fever/chills.
 - A sore throat
 - o Chills
 - New loss of taste or smell
 - Muscle or body aches
 - Nausea/vomiting/diarrhea
 - Congestion/running nose-not related to seasonal allergies
 - Unusual fatigue
- Does anyone in your household have any of the above symptoms?
- Has your child/youth been in close contact with anyone with suspected or confirmed COVID-19?
- Has your child/youth had any medication to reduce fever before coming to camp?

*If the answer to any of the above questions is "Yes", your child will not be permitted to come to camp until they are 72 hours fever-free, without using fever-reducing medications. (e.g. Tylenol or Ibuprofen)



Assumption of Risk and Waiver of Liability

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. The City of Spokane Parks and Recreation Department (SPRD) has created new protocols and put in place preventative measures to reduce the spread of COVID-19; however, SPRD cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending any program may increase yours and your child(ren)s' risk of contracting COVID-19.

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By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending SPRD programs, activities, or events, and that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 from participation in SPRD programs may result from the actions, omissions, or negligence of myself and others, including, but not limited to, SPRD employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself including, but not limited to, personal injury, disability, death, illness, damage, loss, claim, liability, or expense of any kind that I or my child(ren) may experience or incur in connection with my or my child(ren)s' attendance at SPRD programs. On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold harmless SPRD, City of Spokane, and their officials, employees, agents, and expenses arising or in any way related to my or my child(ren)s' attendance at SPRD programs. I understand and agree that this release and covenant not to sue includes, but is not limited to, any claims related to COVID-19 based on the actions, omissions, or negligence of SPRD, City of Spokane, or their officials, employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any SPRD program.

Signature of Parent/Guardian	Date
Print Name of Parent/Guardian	Participant Name



Corbin Kids Summer Camp

Pick Up Authorization Form

All persons listed on this form will be required to show personal identification when picking up the camp participant(s). Appropriate custody/legal paperwork must be attached if a relative is NOT allowed to pick up a child.

7. 5		
Camp Participant:	Age:	
Camp Participant:	Age:	
Parent(s), Guardian(s) and others listed below have per	mission to pick up the above Summer Camp Parti	cipants:
AUTHORIZED Name:		
Contact's Best Daytime Phone Number:		
Relationship to the child?		
AUTHORIZED Name:		
Contact's Best Daytime Phone Number:		
Relationship to the child?		
AUTHORIZED Name:		
Contact's Best Daytime Phone Number:		
Relationship to the child?		
AUTHORIZED Name:		
Contact's Best Daytime Phone Number:		
Relationship to the child?		
NOT AUTHORIZED Name:		
Parent or Guardian Signature:	Date:	



Corbin Kids Summer Camp

Child Medical Form

Only complete this form if medication is to be taken during camp.

- Campers will be assisted in self-medicating themselves.
- Only medications prescribed by a medical doctor will be permitted during the program.
- Medications must be reported on this form and kept up to date.
- Information on prescription dosage must be attached to the medication.
- All medication must be received in its original container.
- Send only the daily dosage.
- Do not leave medication in the possession of your child.
- Hand the medication directly to the Camp staff at the sign-in desk in the morning.

Child's Name:	Date of Birth:
Medical Condition	
Name of Medications	
Dosage or amount per administration	
Time(s) a day to be given	
Possible side effects of medication	
Special Instructions for handling medication/comments	
I request and authorize that the above named child be assisted in self-medi indicated, as there exists a valid health reason which makes the administrat during the time the child is under the supervision of the Spokane Parks and	ion of the medication advisable during program hours or
Parent or Guardian Signature:	Date:
Physician's Name:	Phone:
Physician's Signature:	Date:



CITY OF SPOKANE PARKS AND RECREATION DEPARTMENT YOUTH ACTIVITIES FORM

and

Medical Information Form (MIF) - PLEASE PRINT

Date:			
Participant's name:		DOB//	□ Male □ Female
Participant's name:Address:	City:	 State: _	Phone:
Emergency Contact Name	Relationship	Day Phone	Evening Phone
Family Physician:	Phone:	Preferi	red Hospital:
Insurance Company:	I	D Number:	
Special Medical Instructions: aller	gies, chronic illnesses,	regular medication,	allergies to medication,
learning difficulties, physical problems	s, etc.:		
-			

I have requested that my above-identified child/children be allowed to participate in an activity/class/event through the City of Spokane Parks & Recreation Department. By authorizing my child's/children's participation through signature below, I acknowledge that the activity/class/event in which my child is participating may be physically and mentally challenging and/or dangerous. I expressly acknowledge and understand that my child's/childrens' participation in the subject activity is voluntary and may involve the risk of injury, property damage, or even death.

HOLD HARMLESS AGREEMENT: in consideration for being permitted to participate in the activity/class/event hosted by the City of Spokane, to the maximum extent permitted by law, I, the undersigned adult, on behalf of myself and my child(ren), do hereby release and hold harmless the City of Spokane, its elected and appointed officials and employees, and organizer, sponsor, supervisor, contracted facilitator, or any volunteer connected with the program from any and all claims, injuries, damages, losses and suits, including attorney fees, arising out of or in connection with the program. I agree to defend, indemnify, and save harmless the City of Spokane, its appointed and elected officers, employees, agents, and representatives from and against all loss or expense including but not limited to judgments, settlements, attorney fees, and costs for bodily injury, death, or property damage arising out of any act or omission under or in connection with my participation except only such injury as shall have been occasioned by the sole negligence of the City of Spokane, its appointed and elected officers, employees, agents, or representatives. To the extent any of the damages referenced herein were caused by or resulted from the concurrent negligence of the City of Spokane, its elected and appointed officers, employees, agents, or representatives and others, this obligation to indemnify, defend, and hold harmless is valid and enforceable to the extent of the negligence of the participant.

In the event of a medical emergency, I authorize transportation to the nearest appropriate medical facility, and authorize emergency medical care if no one listed on the MIF can be reached. If applicable, I authorize City of Spokane program facilitators, to administer medication to my child as outlined on the

MIF form, and release from all liability said facilitators for any injury resulting from the administration of those medications, provided all medications are administered in accordance with the schedule and conditions. In the absence of a signature, payment of fee and participation in the program shall constitute acceptance of the conditions set forth in this release

I understand that it is my obligation to have a health insurance policy in effect while my child participates in the above-referenced activity/class/event and to otherwise be responsible for any and all medical expenses which may be incurred while participating.

I grant full permission to use any photographs, videotapes, video clips, or recordings of my child for publicity purposes by the City of Spokane.

I understand and agree that the Hold Harmless Agreement above is governed by laws of the State of Washington and is intended to be as broad and inclusive as permitted by law and that if any part of it is held to be invalid, the balance of this document shall continue in full force and effect.

I certify that I have carefully read all of the foregoing provisions, that I know and understand the contents hereof, that I have had the opportunity to seek legal counsel prior to signing it, and voluntarily sign this document as my own free act.

Parent/Guardian Printed Name	Parent/Guardian Signature	Date	
Parent/Guardian Printed Name	Parent/Guardian Signature	 Date	

Daily Health Verification Form



If the parent or guardian checks "YES" to any of the following questions, or the camper's temperature is 100.4 F or higher, the camper will not be not be permitted to camp until they are 72 hours fever-free without using fever-reducing medications (e.g., Tylenol, ibuprofen)

will not be not be permitted to camp until they are 72 hours level-nee without using level-reducing medications (e.g., 1 yieriol, ibuprolen)	
Date:	
Camper Name:	
Parent or Guardian Name: Phone number:	
Does your child have any of the following symptoms that are not attributable to another condition?	

Daily Health Verification Questionnaire - Fill in the boxes <u>Y</u> es or <u>N</u> o					
	MON	TUE	WED	THU	FRI
Did you take your child's temperature this morning?					
Does your child have a fever of 100.4 F or higher or a sense of having a fever/ chills?					
Does your child have congestion or a runny nose that is not related to seasonal allergies?					
Does your child have new loss of taste or smell?					

Does your child experiencing nausea, vomiting, or diarrhea?			
Does your child have a sore throat or cough that you cannot connect to another health problem?			
Does your child have muscle aches that you cannot connect to another health problem or to another activity such as physical exercise?			
Does your child have unusual fatigue?			
Does anyone in your household have any of the above signs right now?			
Has your child been in close contact with anyone suspected or confirmed with COVID-19?			
Has your child had any medication to reduce a fever before coming to care?			

Access to facility (circle one):	Approved	Denied
Employee Name:	Employee Signature:	