



**All the things kids love.**

# **Parent Handbook**

## **Summer 2024**

**Audrey Kirkpatrick**

Executive Director of Youth Programs

**Ariana Lewis**

Camp Supervisor

Email: [YouthPrograms@thenzone.com](mailto:YouthPrograms@thenzone.com)

nZone Tax ID Number: 45-2971114



## nZone Welcomes You!

**Welcome to nMotion Camp at nZone!** The nZone is your community hub: Driven by FAITH; connecting people through FITNESS, FAMILY, and FUN!

**The nZone** is committed to providing safe, fun opportunities to develop your mind, body, and spirit. Students can partake in a variety of educational experiences that help them reach their fullest potential and parents get time to focus on their to-do-list and their own fitness. All this and more in a family-friendly environment where they will continue to cultivate character traits beneficial to a competitive spirit and the community at large.

We anticipate a great Summer Camp program filled with learning, fun and games, and growth for our campers. We are thrilled to partner with your family to provide a fun filled summer for your campers!

### Values

*Safety: We guarantee the safety of children by ensuring a safe place for them to play*

*Fun: We value relationships and the opportunity to make others laugh through sharing our lives with them*

*Excellence: We strive to provide the best customer service possible*

Within this handbook you will find everything you need to prepare for the upcoming summer including necessary forms and documents. Should you have any questions, concerns or comments, please contact us at [YouthPrograms@thenzone.com](mailto:YouthPrograms@thenzone.com).



### New Life Christian Church

The nZone is a non-profit ministry of New Life Christian Church. Our mission is to help people discover God and experience the love of Christ daily.



## What Does *nMotion* Look Like?

### *Program Overview*

Once checked in, campers head to the fields to meet their counselor and “Team Members”.

The day begins when your entire team has arrived and you review the day’s rules and **behavior expectations**. Throughout the day the children will participate in a large number of games and activities ranging from field classics such as kickball, tag, and dodgeball to enrichment activities like STEM, Art, and Cooking! Rotations of activities last 30 minutes between which they will take regular bathroom breaks to wash their hands before venturing to the next activity. We will also be heading out doors often for sunshine and fresh air!



### **What are Counselors?**

Our Counselors are your child’s group leader. Counselors provide direct leadership over campers. They run games, activities, and oversee snack and lunch time. Counselors ensure campers’ safety. Counselors keep campers engaged through enthusiasm, direct interaction, and encourage participation in all activities.

### **General Camp Information:**

Hours: 9AM-5PM

Check-In Begins: 8:45AM

Ages: 5-14 yrs

Extended Care: 7AM-6PM (Additional Costs)

Food/Snacks: **All lunches and snacks are parent provided** and can be brought from home or purchased through our in-house cafe. Vending machines are available during snack & lunch.

**Lunch** 11:15am - (Red, Orange, Yellow & Green Groups)

12:00pm - (Blue, Purple, Gold, & Silver Groups)

**Snack:** 2:15pm



## What Should I Expect?

### *Arrival and Departure Security Protocol*

#### **nZone Arrival**

***Parents are expected to sign-in and sign-out their children at drop-off and pick-up.***

Once a child is signed in, they receive an **orange** wristband with their name written on it. Children with allergies will receive a **red** wristband with their name and their allergy(ies) written on it. Parents are given the bottom tag of the wristband where one will find corresponding numbers for pick up. We suggest taking a photo of your pick-up tag. Late arrivals must also follow these procedures before joining activities.

#### **Parent Pick Up**

***Responsible student release to a parent includes:***

Confirming the wristband tag of the adult picking up matches the wristband of the child (this is where that photo of the pick-up tag might come in handy). In the event the adult does *NOT* have the wristband number, the Supervisor or Director will pull up the child's account. If the person picking up has an ID that matches the *primary parent/guardian* on file, they are approved for pick-up. If the person picking up is *NOT* the *primary parent* on file or listed as an *Authorized Guardian*, the Supervisor or Director will call the *primary parent/guardian* and confirm that the on-site adult has permission to check out their child. You may update your "Authorized Guardian" list at our front desk.

#### **Late Pick-Ups**

Parents are expected to pick up their children no later than 5pm. Aftercare until 6pm is available for registration in advance by 9AM of the registered camp day. Persons picking up their child after the designated pick-up time will automatically be assessed a \$15 late pick-up fee. No exceptions.

*Late pick-ups are defined as unregistered aftercare (anything after 5pm) or pick-ups after 6PM for registered aftercare.*

#### **What about Absences?**

**Please call The nZone by 9AM** if your child will not attend the program for any reason, especially due to illness. Daily attendance is taken, and we do need to know if your child will be absent. ***No refunds are given for absenteeism.***



## What if my Child is Sick?

### *... becomes sick or needs prescribed medications*

- Parents must complete, sign, and submit a current Medication form for the safety and health of their child. Health information is confidential and only for use by nZone staff.
- nZone staff is not authorized to administer any medications or topical ointments except for children with life-threatening conditions. Should your child need any life saving medication during camp, please indicate notes on the 'Medical Form' to ensure your child is properly supervised.
- We inform parents of health-related situations. Any serious injury including but not limited to the head, face, neck, or back will result in a call to the parent.
- Should a child need hospital transport and the parents have not arrived at the facility, an nZone employee will accompany the child.
- Our team does not respond to medical questions from parents or others. Instead, we encourage parents to seek proper medical examination by a professional.



## What about Emergencies?

### *Our Injury or Acute Illness Plan*

In the event of an emergency involving an injury or acute illness, the Director or supervisor must follow the following procedures:

- Call 911.
- Notify the parent(s) or the emergency contact
- Isolate the scene to prevent further injury.
- An nZone employee will accompany the child to the hospital and stay until the parent arrives
- Prepare a written report immediately.



## Behavioral Expectations?

***Treat others as you would like to be treated.*** We encourage the golden rule at nZone. The following standards of conduct must be strictly followed, and failure to do so will result in appropriate consequences, potentially release from our program.

- All program standards and practices are to be followed every day of attendance.
- Jeopardizing the safety of fellow campers and staff will not be tolerated.
- The use of obscene language is strictly prohibited.
- The nZone is a drug-free/alcohol-free facility.
- Smoking and vaping is prohibited while at The nZone.
- Unethical conduct (which includes but is not limited to: sexual harassment, misconduct, insubordination, inappropriate behavior) is grounds for removal.
- Campers are expected to remain within their assigned group.
- Campers are expected to remain onsite throughout the day.
- Campers are expected to eat with their assigned group.
- We discourage camper cell phones, tablets, and other electronic gaming devices during the day for the safety of your children and their possessions. Items may be lost, broken, or stolen if not properly cared for. Campers will be asked to keep such devices in their personal belongings. If a camper is unable to follow the request after the second warning, parents will be asked to pick up the device and/or child.

## How is Behavior Managed?

When inappropriate behavior becomes disruptive or is unacceptable to staff, the following measures will be taken:

- Ask the participant to stop the inappropriate behavior
- If the inappropriate behavior continues, we follow standard behavior management techniques.
- When redirecting behavior, verbal or physical abuse is NEVER tolerated.
- The Director or Supervisor immediately begins written documentation of the behavior and incidents.
- If the Director deems the behavior sufficiently disruptive, the parent/guardian will be contacted.
- Repeated inappropriate behavior may result in being sent home from the program with no refund.





## What about Security and Safety?

The security and safety of your child is our chief concern. The following safety standards and practices are paramount in maintaining a safe environment and program. nZone Managers are First Aid/ CPR Certified.

- We teach campers to be alert to potential hazards and keep them aware of the First Aid area.
- We teach campers to identify uniformed Team Members so they know who to go to when they need assistance.
- We are aware of the skills and general physical conditions of campers at all times during their participation in an activity.
- We know which campers have allergies and have provided an epi-pen. We stay alert to changes in behavior and other indications of allergic reaction and know where the epi-pens are located and how to use them.
- We know which campers have special needs and remain vigilant of any behavior changes.
- We are aware of the dangers of over-exposure to the sun. We recommend parents pack sunscreen/bug spray, and provide a waiver for a Team Member to apply these to their child.
- We use safety consciousness when setting up and conducting activities, constantly staying alert to potential hazards related to the facility and equipment. Before conducting an activity, we explain the rules and proper procedures for using the equipment. We stop the activity if campers are not complying with the rules, making the activity unsafe.
- We ensure campers use the equipment only as intended.
- Campers should never sit on top of the dasher boards lining the fields.
- Campers should never hang on the nets separating the fields or the nets of the goals.
- Campers should never be without a Counselor or Supervisor. Any time a student needs to leave their group's area (bathroom break, water, etc.) they must have supervision. Counselors do not go into the restrooms with campers. Campers should walk any time they are not on the field.
- Unauthorized person(s) are not permitted in areas with campers during program hours and will be asked to leave.
- Visitors are not allowed due to our current safety protocols. When parents/guardians wish to visit, they must first check in with the Director.

## What's the Cancellation Policy?

- nZone refunds 80% on all unused weeks with a minimum of 1 week's notice when a family's enrollment plan changes independent of nZone program operations.
- nZone refunds 90% on all unused weeks should county or state mandates require business closures. This does not pertain to inclement weather closures.
- nZone refunds 100% should we close or cancel the program; *this does not include a family's choice to discontinue enrollment.*
- No refunds within 7 days of the registration date.





### **What If My Schedule Changes?**

With one week's notice, nZone will transfer your child's registration to another session of your choosing for a \$25 transfer fee.

### **REFUNDS/TRANSFERS**

There are no refunds for missed days due to changed work or vacation schedules, sick days or other non-emergency reasons. Refunds and transfers must be requested at least seven (7) days prior to the camp registration date for which the refund/transfer is being requested and therefore subjected to our cancellation/transfer policy (Please review "Cancellation Policy"). If a medical emergency occurs during camp hours, a doctor's written verification will be needed within 24 hours for a pro-rated refund.

### **Promotional Photos/Videos**

Children enrolled in The nZone's Youth Programs camps or activities may be photographed or videotaped during camp by nZone staff, contract partners, or the public media for The nZone promotional purposes. No names or personal information will be released.

### **Reporting Child Abuse & Neglect**

Under Code of Virginia ([§ 63.2-1509](#)), staff is required to report any suspected abuse, neglect, or exploitation of a child immediately to New Life Ministry, the local department of the county or city wherein the child resides or wherein the abuse or neglect is believed to have occurred or the Department's toll-free child abuse and neglect hotline.

### **Valid Credit Card**

A valid credit card must be kept on file under your nZone account for the duration of camp.





## CHECKLISTS

### What Should My Child Wear/ Bring?

Campers should arrive in comfortable shoes and appropriate clothing for physical activity as part of their daily routine. nZone staff is not authorized to apply any topical sunscreens or bug sprays. Please apply necessary agents before heading to camp. As a safety measure, dangling jewelry that could catch on something should not be worn during nZone programming as it could cause injury.

#### Send Your Child With:

- Backpack - all items should fit securely in a backpack
- Lunch and snacks
- Refillable water bottle
- Comfortable shoes
- Sunscreen and/or bug spray (nZone staff not authorized to apply agents)
- \*Bathing Suit and/or a change of clothes on Water Day

#### Signed Forms:

- Medical Form
- Sick Policy
- Emergency Contact & Authorized Pick Up Form
- Behavior Agreement
- Signed Participation waiver (online account creation)
- Signed Parent Contract

### What about Lunch?

#### ***And snacks, too!***

You can send your child a packed lunch or pre-purchase lunch ahead of time from our in-house cafe, Liaby Cafe (sample menu on the next page). A separate allergy table is available for campers with severe allergies upon request. **Please do not send food that needs to be prepared, refrigerated or heated.**

# Liaby Cafe at Nzone

Camper Name: \_\_\_\_\_ Date: \_\_\_\_\_ Program: \_\_\_\_\_

Preorder lunch form - must fill out - tax not included

Meals come with 1 side of vegetables, 1 side of fruit, and one juice box

Choose Meal(s)	Choose Vegetables	Choose Fruits
<input type="checkbox"/> Chicken and cheese quesadilla   \$7.50  <input type="checkbox"/> Chicken fingers   \$7.50  <input type="checkbox"/> Pepperoni or <input type="checkbox"/> cheese pizza   \$7.50  <input type="checkbox"/> Turkey or <input type="checkbox"/> ham and cheese   \$7.00	<input type="checkbox"/> Baked fries  <input type="checkbox"/> Mashed potatoes  <input type="checkbox"/> Small salad (lettuce, cucumber, tomato)	<input type="checkbox"/> Grapes  <input type="checkbox"/> Mandarin  <input type="checkbox"/> Watermelon

## Additional Charges

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Gatorade   \$2.00<br>Qty: _____ | <input type="checkbox"/> Water   \$1.00<br>Qty: _____       | <input type="checkbox"/> Chocolate milk   \$1.99<br>Qty: _____ |
| <input type="checkbox"/> Chips   \$1.00<br>Qty: _____    | <input type="checkbox"/> Granola Bar   \$1.00<br>Qty: _____ |  |

Credit card number: \_\_\_\_\_ Security code: \_\_\_\_\_ Zip code: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Phone number: \_\_\_\_\_



## MEDICAL INFORMATION

Camper Name \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Allergies and Reactions

---

---

Special Needs or Accommodations

---

---

Current Medications and Instructions

---

---

Any Other Pertinent Medical Information

---

---

### Insurance Information

Insurance Company \_\_\_\_\_

Address \_\_\_\_\_ Policy Number \_\_\_\_\_

Policy Holder's Name \_\_\_\_\_

*\*nZone staff is not authorized to administer any medications or topical ointments **except** for children with potentially **life-threatening conditions** (EpiPen or Inhaler). Should your child need any medication during camp, please indicate notes on the 'Medical Form' to ensure the child is properly supervised.*

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





## SICK POLICY

We encourage all of our parents to exercise caution when sending their camper to The nZone to ensure a safe and healthy environment for all of our participants.

Your child will be sent home if they are experiencing any of the following symptoms or illnesses or 2 or more symptoms related to COVID-19

<u>Symptom or Illness</u>	<u>Requirement to Return</u>
<b>Fever of 100 degrees or higher</b>	Camper can return once they have been fever free for 24 hours without fever reducing medications
<b>Any combination (2 or more) of the following symptoms or positive COVID-19 test result :</b> <ul style="list-style-type: none"> <li>● Fever (100.3 or higher) or Chills</li> <li>● Cough, shortness of breath, or difficulty breathing</li> <li>● Fatigue or muscle &amp; body aches</li> <li>● New loss of taste or smell</li> <li>● Sore throat</li> <li>● Congestion or runny nose</li> <li>● Nausea or Vomiting</li> <li>● Diarrhea</li> <li>● *Positive COVID-19 test</li> </ul>	<b>*Positive COVID-19 Test;</b> Need: Complete a minimum 5 day quarantine, Completed "Return Attestation Form" , AND proof of negative test result to return  <b>*Negative COVID-19 Test;</b> May return once they have been fever free and without vomiting or diarrhea for a minimum of 24 hours.
<b>Diarrhea or Vomiting - 2 or more occurrences within 24 hours</b>	24 hours after last incident of diarrhea or vomiting
<b>Red, itchy eyes, or puffy eyes with discharge - pink eye</b>	Camper may return once discharge has stopped for 24 hours or after treatment with a doctor's note
<b>Strep Throat</b>	48 hours after doctor's visit and antibiotic treatment begins <b>(need note from Dr. to return)</b>
<b>Persistent Cough or Sore Throat</b>	24 hours after symptoms subside
<b>Rash</b>	Rash has been identified by a doctor and determined not to be contagious, or is under treatment and no longer contagious <b>(need note from Dr. to return)</b>
<b>Nasal discharge which is green or dark yellow in color</b>	Nasal discharge has become clear <b>or</b> with a note from a medical professional stating they may return
<b>Other Contagious Diseases including:</b> measles, chicken pox, fifth disease, mumps, scabies, impetigo or head lice	Child has completed the contagious stage of the illness and has been fever free for 24 hours without fever reducing medication <b>(need note from Dr. to return)</b>
<b>COVID-19 Exposure</b>	People exposed to COVID-19 may continue to attend if no symptoms are present, but must wear a mask for a 5-day precautionary period. If symptoms develop, a negative COVID test will be required to return.

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





## EMERGENCY CONTACT & AUTHORIZED PICK UP FORM

Please list **AT LEAST 2 local emergency contacts** (this may include yourself)\*\* The nZone is not liable or responsible for damage or injury in the event we are unable to reach any of these additional emergency contacts.

**\*\*All emergency contacts and persons authorized to pick up your child must have an nZone account and be listed as an "Authorized Guardian" under your child's profile. This can be updated by visiting our Front Desk.**

Primary Contact: \_\_\_\_\_

Relationship (to camper): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Circle the best number to reach you: Home / Work / Cell

Email address (mandatory for ALL authorized Guardians): \_\_\_\_\_

**This person is considered an Authorized Guardian for pick-up purposes**  YES  NO

Secondary Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Circle the best number to reach you: Home / Work / Cell

Email address (mandatory for ALL authorized Guardians): \_\_\_\_\_

**This person is considered an Authorized Guardian for pick-up purposes**  YES  NO

Additional Contact (optional): \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Circle the best number to reach you: Home / Work / Cell

Email address (mandatory for ALL authorized Guardians): \_\_\_\_\_

**This person is considered an Authorized Guardian for pick-up purposes**  YES  NO

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





## BEHAVIOR AGREEMENT

We strive to provide an exceptional experience for your children: an experience in which fun and safety are foundational. Our team works to create an environment that upholds these values. We want to partner with you and your children for success. Please speak directly with your child about the following expectations to ensure they understand and agree. We hope this allows for discussion about the importance of safety and respect and how they can make camp at the nZone a blast for everyone!

**Our expectations are: (1) Safety First. (2) Respect People. (3) Respect Property.**

\_\_\_\_\_ I will listen to the nZone team members and follow their directions. This is for my safety and the safety of my peers.

\_\_\_\_\_ I will respect other people’s belongings. I will ask for permission before touching someone else’s things.

\_\_\_\_\_ I will respect other people and their space. I will keep my hands to myself.

\_\_\_\_\_ I will not hit or fight.

\_\_\_\_\_ I will use appropriate language. There is no place for foul or negative language at the nZone.

\_\_\_\_\_ I will respect other’s feelings by having a positive attitude when speaking to them. I will be encouraging and not talk down to my peers.

\_\_\_\_\_ I will stay in my designated space unless I have an nZone team member with me.

**The nZone will review these expectations with children every day.** Not meeting these expectations may result in suspension from the program. All incidents will be handled on a 3 incident system EXCEPT HITTING/FIGHTING. Hitting and fighting will be an immediate 1-day suspension from the program. All other incidents will be handled as follows: 1<sup>st</sup>Incident: Verbal Warning 2<sup>nd</sup>Incident: Written Warning and Parent Conference 3<sup>rd</sup>Incident: 1-day Suspension. In the unfortunate case a child is expelled from the program due to behavior, a refund or credit will not be given for any remaining tuition.

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

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_





## PARENT CONTRACT

\_\_\_\_\_ I verify that I have received the Parent Handbook and understand the terms and conditions associated with behavioral expectations, transfer policy, sick policy and cancellation policy. *Please initial.*

\_\_\_\_\_ I am responsible for the \$25 transfer fee for all registrations moved to another date and/or program with one week's notice. *Please initial.*

\_\_\_\_\_ I am responsible for all registration and program fees within 7 days of the activity. *Please initial.*

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





## After Illness Return Attestation

This attestation can be completed by a parent/guardian or nZone staff member. Completion by a healthcare provider is not required.

Name of student/camper: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Camp/Program name: \_\_\_\_\_

Dates of absence: \_\_\_\_\_

If the person has any ONE of the MAJOR symptoms or any TWO of the MINOR symptoms below, they must be tested for COVID-19 with a PCR* test unless they have prior documentation of another illness from their healthcare provider.	YES	NO
<b>MAJOR SYMPTOMS</b>		
SHORTNESS OF BREATH OR DIFFICULTY BREATHING		
RECENT LOSS OF TASTE OR SMELL		
FEVER OR CHILLS		
PERSISTENT COUGH		
<b>MINOR SYMPTOMS</b>		
FATIGUE		
RUNNY NOSE OR STUFFY NOSE		
HEADACHE		
DIARRHEA		
SORE THROAT		
MUSCLE OR BODY ACHES		
NAUSEA OR VOMITING		

\*If the PCR test result is negative, the person can return to the program when they have had no fever for 24 hours without the use of fever-reducing medications and symptoms have improved. If the test result is positive, the person must follow Program isolation/quarantine instructions.

Date symptoms started: \_\_\_\_\_ Date symptoms ended: \_\_\_\_\_

Camper had COVID-19 test during absence?

I attest:

No; if no, why not: \_\_\_\_\_

Yes; Date of Test: \_\_\_\_\_ Test result: \_\_\_\_\_

I attest that the camper/student is ready to return to the program and has:

- Not had a fever (temperature higher than 100 degrees) in the last 24 hours
- Not taken any medication for fever in the last 24 hours
- Improved symptoms and is returning to usual health
- If applicable; Has submitted negative COVID-19 test result (photo or lab results) to Director

Name of person attesting (parent/guardian/staff): \_\_\_\_\_

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





