Parent Handbook

2026 Summer Rec

Fun • Nature • Friendships • Growth

LOCATION: Big Bear Arena
2 Ice Circle Drive
Sault Ste. Marie, MI, 49783

CONTACT US:

EMAIL: summerrec@saulttribe.net

WEBSITE: bigbeararena.com

Program Dates:

MANDATORY OPEN HOUSE

June 10 , 12:30p-5:30p

SUMMER PROGRAM

June 15 -August 7

No program July 3

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CONTACT INFORMATION:

Shelbey Smith, Events Manager,
Big Bear Arena
Ssmith2@saulttribe.net
(906) 635-6509

Megan Causley, Youth Program Administrator
Big Bear Arena
summerrec@saulttribe.net
(906) 635-4777

General Information

Parent Handbook Acknowledgement

Our Parent Handbook contains important information regarding the policies, procedures, and expectations for all youth programs. Parents and guardians are required to carefully review the handbook in its entirety.

After reviewing the handbook, please complete and sign the consent form located on the final page to acknowledge that you have read and understand the program guidelines. In addition, initial as indicated throughout to indicate acknowledgement.

If you have any questions or require clarification regarding the information in this handbook, please contact ***summerrec@saulttribe.net***
Parent/Guardian Initials: _____

Mission Statement

The purpose of the Summer Recreation Program (SRP) is to provide children with a high-quality recreational experience that promotes healthy and active lifestyles. The program is designed to offer a variety of opportunities for participants to build confidence, develop self-esteem, and strengthen teamwork while also encouraging the growth of individual skills.

Our goal is to ensure that every child has access to enjoyable, safe, and well-supervised activities throughout the summer in a supportive and inclusive environment.

Our Staff

All staff members are required to have prior experience or education working with children and must be CPR/First Aid certified. While we strive to provide a safe and supportive environment, please note that we are **not a licensed daycare facility or program**, the **SRP** is a group-based recreational program.

Staff members who are 18 years or older are required to complete a **criminal background check, child abuse/neglect clearance, and a drug screening** before beginning work with the program.

Our staff receive training in general youth supervision and recreational activities; however, training for children who require **extra assistance, specialized guidance, or one-on-one support is minimal, as this program is group-based**. Families should plan accordingly if their child requires additional individualized support.
Parent/Guardian Initials: _____

Information Table

All important program information will be posted at the designated **sign-in/out table**, where children are dropped off and picked up. A sign displaying **group locations and daily activities** will also be posted near the table.

It is the **parent/guardian's responsibility** to review the Information Table regularly and stay informed of any daily updates or changes. Please ensure you know which group your child is assigned to each day.

Information will also be communicated via **email through the RecDesk software**. Make sure you are opted in for alerts on the household account and that the email provided during registration is accurate and active.
While we understand that communication between separated households can be challenging, it is **not the program's responsibility** to provide updates to both households. All official communication will be sent to the **parent/guardian who registered the participant**, using the primary and alternate emails on file.
Parent/Guardian Initials: _____

Open Door Policy
The facility is open to the public during program hours, and **parents/guardians are welcome to visit at any time**. We encourage you to share any concerns regarding your child with the **Youth Program Administrator** so we can ensure your child has the best possible experience with our program.

While we maintain an open door policy, **all guests and parents must sign in with the Youth Program Administrator, Events Manager, or Recreation Director prior to any visit**, including dropping off lunches, bags, or other items. This procedure helps us maintain a **safe and secure environment** for all participants and staff.
Parent/Guardian Initials: _____

Emergency Drills
The Summer Recreation Program may conduct **fire drills, tornado drills, and other emergency preparedness drills** throughout the summer to ensure the safety of all participants.

Participants will be **instructed on proper procedures** prior to drills, and when possible, **notified in advance** to help them prepare. These drills are an important part of maintaining a safe program environment.

Enrollment Information

Confidentiality Notice:
All information in a child's enrollment file is **confidential** and **cannot be released to third parties**.

The following items are required for your child to participate in the Summer Recreation Program:

1. **Electronic Registration Form** – Your child's information must be completed in our electronic software system (**RecDesk**). All information must be accurate and up to date. It is the **parent/guardian's responsibility** to notify the Youth Program of any changes. Please contact the **Youth Program Administrator** if updates are needed. This form contains important information regarding your child.
2. **Waiver of Liability** – Must be signed by a parent or legal guardian.
3. **Current Immunization Records** – A copy of shot records must be provided and comply with **Michigan Department of Health** requirements.
4. **Official/Legal Birth Certificate** – A copy must be provided.
5. **Tribal Card** (if applicable) – A copy must be provided.
6. **Legal Documents** (if applicable) – Any relevant legal documents must be provided.

Enrollment
A child **may not be enrolled** in the Summer Recreation Program if there is an **outstanding balance** from previous years. All children enrolled in the program must be **7 years of age on or before July 31st**.

The **Youth Program Administrator** reserves the right to review and, if necessary, challenge these enrollment requirements in consultation with the **Events Manager** and **Facility Director**.

A child will only be considered **officially enrolled** once all required paperwork has been **completed and submitted**, including funding source forms and payroll deduction forms, when applicable.

Failure to **successfully pay registration fees** may result in **immediate dismissal** from the program. Please refer to the **Payment** section of this handbook for additional information.

Deposit & Payment Plan

- To complete registration through our **secure site**, a **$150 deposit** must be made **within 24 hours** of registering to secure a spot.
- During registration, you will be required to submit payment for your deposit, this deposit is **NON-REFUNDABLE**.
- All participants not paid in full or registered in a funding program a **payment plan will automatically be applied to your account**. Payment plans are **biweekly** on the following dates:

April 14 | April 28 | May 12 | June 9 | June 23 | July 7 | July 21 | August 4

- **Sault Tribe Payroll Deduction, ACFS Child Care Development Fund, and Youth Development Fund** are also available.
- Approved Youth Development Fund participant accounts will be **adjusted once payment verification is received**.

Payments / Late Charges

- For parents on a **payment plan**, the **EMAIL** on file with the associated **RecDesk account** will be **EMAILED** on the dates specified in your plan.
- If a payment is **declined**, a **$45.00 late fee** may be assessed for each day the balance remains unpaid. Parents will be contacted via email if a payment is declined.
- If a balance goes **five business days unpaid**, your child **cannot attend the program** until the balance and any late fees are paid.
- Failure to **keep payments current** may result in **program dismissal**.

Funding Acknowledgement Statement
By selecting **Child Care Development Fund, Youth Development Fund, or Employee Payroll Deduct**, I acknowledge that all required paperwork must be **submitted to ACFS, Education, or Payroll Deduction** no later than **March 31**.

- If required paperwork is **not submitted by March 31**, a **$150 deposit** is due by the end of **April 1**, or the participant will be **disenrolled**.

- If no deposit is received within this timeframe, the registration will be **withdrawn**.
- If an application is not submitted to the appropriate funding office by March 31, parents will have **24 hours** to pay the required deposit and enroll in a payment plan.

Important: Your account **must be in good standing** for participation. Failure to complete successful payments may result in **removal from the program**.

Parent/Guardian Acknowledgement
I have read and understand the funding, payment, and deposit requirements for the Summer Recreation Program:

Parent/Guardian Signature Date

Admission / Withdrawal
Space in the Summer Recreation Program is **limited and offered on a first-come, first-served basis**. Program availability and preferences will be listed on the program flyer.
If you need to **withdraw from the program**, you must contact the **Events Manager, Shelbey Smith, at** ssmith2@saulttribe.net

No reimbursements or credits will be issued for participants who withdraw after **May 15, 2026**, except in cases approved in advance at the **discretion of program management**.

- **Refunds** may be considered only for:
  - Serious illness
  - Injury preventing participation in the program
  - Relocation

Refunds in these cases may be **pro-rated** and require **written documentation**, including a note from a **family physician** for illness or injury.

This policy will be **strictly enforced** to ensure fairness for all participants.
Parent/Guardian Initials: _____

Health and Safety Information

Health Surveillance Measures
Our goal is to **keep all participants and staff safe and healthy**. Children should **not attend the Summer Recreation Program** if there is any question of illness.

If a child becomes ill during program hours, the **parent/guardian will be contacted immediately** to pick up the child.

If a child becomes ill while at **SRP**, the following steps will be taken:

1. The child will be **removed from the group** and brought to the **Youth Program Office** to be comforted and monitored.
2. The **parent/guardian or emergency contact** will be called to pick up the child.

3. It is the **parent/guardian's responsibility** to ensure that a **ride is secured** for the child's prompt pickup.

The program requires that a child be **fever-free for a minimum of 24 hours** before returning to ensure the health and safety of all participants and staff.
Parent/Guardian Initials: _____

Notification of Communicable Diseases
It is the **parent/guardian's responsibility** to inform **SRP** if their child has a **communicable disease**. If a child is exposed to a communicable disease, a **notification will be emailed** to all parents through the **RecDesk** website.

A child who has contracted a communicable disease **must not return to the program** until they are **no longer contagious**, as recommended by the **Centers for Disease Control (CDC)** and the child's physician.

Environmental Health
The Summer Recreation Program staff and participants will follow all **environmental health procedures**, including proper **hand-washing, sanitizing, and disinfecting**, to maintain a safe and healthy environment for everyone.

Injury / Accident
The Summer Recreation Program is operated to **minimize the risk of accidents and injuries**.

When an accident occurs, staff members will follow appropriate **First-Aid procedures** based on the nature of the injury. A **parent/guardian will be contacted immediately** if an emergency arises. If the parent/guardian cannot be reached, the **emergency contact person** listed on the child's registration will be notified. **The parent/guardian contacted will be the one listed on the participant's registration on file with the facility.**
Parents/guardians will also be **informed of any accidents or injuries** that occur during the program.

Please note: It is **NOT the responsibility of the program staff** to communicate with **separated households** regarding a participant. All official communication will be sent only to the parent/guardian listed on the registration. You may provide 1 primary email address and 2 Alternate email addresses on the participants profile. Please make sure the email addresses provided are current and up-to-date.
Parent/Guardian Initials: _____

Concussion Guidelines:
- Any child suspected of sustaining a **concussion** will be **removed from activities immediately**.
- The child will be **monitored closely** by program staff for signs of concussion (e.g., headache, dizziness, nausea, confusion, or loss of consciousness).
- The **parent/guardian listed on the participant's registration** will be contacted immediately, and the child **must be evaluated by a healthcare professional** before returning to the program.

- The child **may not return to activities until cleared in writing** by a qualified medical provider.

Parent/Guardian Initials: _____

ASSUMPTION OF RESPONSIBILITY

The Summer Recreation Program assumes responsibility only for the children that are enrolled in the program. The program assumes responsibility for the safety of the child once the child is **appropriately signed in** with their group. The parent or authorized person is responsible for the child once they are signed out.

Arrival / Sign-In

When a child arrives at **the SRP**, they **do not become the program's responsibility** until they have **checked in with program staff**.

- **Sign-in hours:** 7:45 – 8:15 a.m.
- A **parent/legal guardian or designated drop-off/pickup person** must **walk the child to the sign-in table** and complete the sign-in process. **No exceptions**, children are not considered under program supervision until signed in by staff.
- Staff begin work at 7:30 a.m. and use the first 15 minutes to **set up free play within their assigned sections, prepare snack bins, and organize sign-in paperwork**.
- **Early arrivals before 7:45 a.m. will NOT be accepted**, so please plan accordingly.
- If dropping off or picking up a child outside of designated program hours**,** the **parent/guardian MUST check in** with the **Youth Program Administrator before dropping off or picking up the child from the SRP.**

Departure / Sign-Out

Children can only be **released to authorized persons** who are listed on the child's registration form.

- Persons listed on the child's **birth certificate** are automatically considered authorized pick-up persons.
- Any **court-ordered custody arrangements** must be provided to the **Events Manager**. By law, the program must allow persons listed on the birth certificate to pick up the child **unless court documents state otherwise**.
- If special accommodations are needed, it is the **parent/guardian's responsibility** to make prior arrangements with the Events Manager. Without prior notification, children will only be released to the persons listed on the registration form.
- Staff will sign out participants through a timestamp software on RecDesk that will **note the time of departure** on the attendance sheet each day.
- Staff **will check identification**. Please bring a **government-issued ID** each day. Children **will not be released** without following proper check-out procedures.
- If dropping off or picking up a child outside of designated program hours**,** the **parent/guardian MUST** check in with the **Youth Program Administrator**.

Parent/Guardian Initials: _____

Health and Safety Information

Summer Recreation Activities

The following is a general description of the activities participants may engage in during the Summer:

Recreation Program. **Parents are asked to remind their children that participation in activities is expected unless otherwise indicated by the parent/guardian.**

Sports – Children will learn skills for a variety of sports and athletic games.

Organized Games – Participants will engage in team and individual games such as tag, relays, capture the flag, and other group activities.

Board Games & Table Activities – Participants will enjoy board games, puzzles, Legos, Play-Doh, and other building activities. Group games may include Bingo, Pictionary, Wheel of Fortune, and more.

Outdoor Play – Weather permitting, children will participate in outdoor activities. Please ensure your child dresses appropriately for changing weather conditions. Activities may include hiking, playground play, and other outdoor games.

Swim days – Participants will enjoy water activities. Children must bring a **swimsuit, towel, and a change of clothes**. Participation in water activities is **optional**, and will be based upon the answers given at the time of registration. If parents/guardians wish to change the answers previously provided. It must be in written communication (VIA EMAIL) to summerrec@saulttribe.net.
Parent/Guardian Initials: _____

Arts & Crafts – Children will complete projects based on holidays, themes, and special programs, including projects with Sault Tribe Community Health staff. Parents/guardians should check daily for projects to bring home. Projects left for extended periods may be **discarded**.

Skating – Each group will have ice skating activities. Children must wear **warm clothing**; shorts are not permitted. Personal skates and protective equipment can be stored in a **personal locker**. Skates will be provided free of charge. **Helmets are highly recommended** and **required with a face mask for hockey**. Participants must provide their own helmets; limited sticks will be available.

Dry Floor Day – This designated space will be used strictly for **drop-off, pick-up, and lunch periods**. During free play, if **all three groups are in this space simultaneously**, participants **must remain in their assigned group sections**.

This measure is in place to **maintain a safe staff-to-participant ratio** and ensure all children are properly supervised. It is **imperative that participants understand these boundaries in advance**.

Recreation Room – A quiet and calming space is available for any participant needing a break from program activities for 5-minutes or LESS.

Field Trips – Field trips will occur on special occasions. Parents/guardians will receive advance notice. Past trips have included Mini Putt Putt Golf, Project Playground, Garland Zoo, Swimming, and trips to LSSU.

Movie Day – Occasionally, all participants will watch a movie with a provided snack. A large projector and sound system create a movie-like experience.

Cooking Class – Health Educators from **Sault Tribe Community Health** will work with participants to prepare healthy snacks. Children gain hands-on experience using kid-friendly kitchen tools and enjoy tasting the snacks they help prepare.

Culture Teachings – The Youth Program strives to provide programming that promotes **Anishinaabe Bimaadiziwin** and fosters learning in the **Anishinaabemowin language**. These teachings will be provided by the Language and Culture Division Staff.

Refusal of Participation
The Summer Recreation Program strives to provide an environment where participants and staff feel **safe, welcomed, and encouraged to engage** in a variety of activities. Lack of participation may result in compromised supervision for all participants; therefore, the following approach will be used:

- If a child is observed **repeatedly refusing to participate**, staff will document each occurrence and **contact the parent/guardian**. This record will be maintained in the participant's file.
- Staff will first **assess the child's participation** and implement strategies to encourage engagement. If challenges continue; parent/guardian will be contact to develop a plan, including:
    1. The child may be placed on a **half-day schedule for 2-3 days**.
    2. If progress is made, the child may transition to attending **2/3rds of the day 2-3 days per week**, gradually **building back into full-day participation**.
- If, after **five days of reintegration**, the child continues to refuse participation, the child **may be dismissed from the program** on a case-by-case basis.

Please note: This is **not a licensed childcare facility**. Children are supervised in **group settings**, and staff **are not expected to provide one-on-one supervision** for behavioral management.
Parent/Guardian Initials: _____

Transportation
On **field trip days**, the Summer Recreation Program will use **school buses and drivers from local schools**.

- Buses will depart **the SRP at a designated time**, and all participants **must board the bus before departure**.
- The program is **not responsible** for children who arrive late to the SRP on field trip days, and children who arrive late **will not be accepted into the program for that day's attendance**.
- **Program rules and guidelines** must be followed while on the bus.
- Any **misconduct on the bus** will not be tolerated and will be addressed according to the program's **behavior policies**.

Snacks/Lunch
The Summer Recreation Program (SRP) provides **snacks for all participants** during daily **A.M. and P.M. snack times**. Each participant will receive a **healthy snack and drink**. A **snack calendar** will be provided at the beginning of the program and posted near the **Information Table**.

- If your child is a **picky eater** or may not enjoy the provided snack, you are welcome to **send a healthy alternative** from home.

- Typical snacks include kid-friendly options such as Goldfish, Teddy Grahams, Graham Crackers, Granola Bars, Chips and Salsa, Cereal and Milk, Chex Mix, Cheese-Its, String Cheese with Crackers, Yogurt, Veggies with Ranch Dip, Fruit Cups, and more.
- Drink options may include **water, milk, juice boxes**, and other healthy beverages. Snack and drink selections may **vary daily**, and no child will be left without a snack or drink.
- Participants are REQUIRED to bring a healthy lunch each day; refrigeration is provided.
- Please **communicate all food allergies or intolerances** to the **Youth Program Administrator** to ensure the safety of your child.

Apparel

Children should be sent to the program in **appropriate clothing** for daily activities. **Weekly schedules** will be provided so parents can dress their children accordingly. For example, on **skating days**, children **must wear long socks, long pants, and jackets or sweatshirts**.

- It is recommended that children have a **designated pair of outdoor tennis shoes**.
- **Lockers** will be provided so clothing can be stored for the summer.
- Parents/guardians are asked to provide **an extra set of clothing, including socks**, to be kept in the participant's locker for unforeseen situations.
- **Tennis shoes must be worn at all times** during program activities, except for specific activities such as **Water Fun Day/Swimming days**, where children may wear **closed water shoes** (no open toes or heels).
- For **skating days**, participants must also have **one spare set of clothing and appropriate apparel for skating** stored in their locker.

Personal Toys / Items

Personal toys or items are **strictly prohibited** at the Summer Recreation Program. These items can easily be **broken, lost, or traded**, and many may be **expensive or irreplaceable**. To prevent these issues, the program **does not allow personal toys or items**.

- If personal toys/items are brought to the program, they will be **collected by the Youth Program Administrator** and **returned to the parent/guardian** when the participant is picked up at the end of the day.
- Examples of prohibited items include, but are not limited to:
    - Playing/trading cards (e.g., Yu-Gi-Oh, Pokémon, Magic, Sports)
    - Beyblades, mini hockey sticks, and balls
    - Dolls or personal games
    - Blankets, pillows, makeup, or chapstick (UNLESS OTHERWISE STATED)
    - Craft supplies
    - Personal electronic devices such as cell phones, iPads, or iPods

Parent/Guardian Initials: _____

Discipline Policy

Children in the Summer Recreation Program are **supervised in a group setting**, and their behavior is **not expected to require one-on-one supervision** by the SRP staff. The SRP staff does not see everything; participants must communicate any concerns to SRP staff as soon as possible to ensure a timely response or appropriate action is taken.

Discipline is used to **teach children to interact effectively with others**, establish rules and guidelines, and encourage participants to **follow them appropriately**. The primary goal is to help children develop **self-control, self-esteem, self-direction, and cooperation**. All discipline will be communicated to the authorized individual picking up the participant. Discipline requiring an immediate notification will be directed to the **PRIMARY** parent/guardian listed on the participant's registration.

Effective discipline requires:

- Clearly telling children the program rules and **reminding participants regularly**.
- Explaining why rules are important.
- Providing **clear and firm limits** when rules are broken.
- Developing a **plan with the child** to prevent future infractions.

Disciplinary Procedure:

1. Discipline will **immediately follow the behavior**.
2. The child will be informed **why their behavior was inappropriate**.
3. The discipline method will be **age-appropriate and match the behavior**.
4. Staff will **follow through with consequences** consistently.

Types of Discipline:

- **Redirection:** Redirecting a child from a situation of inappropriate behavior and offering an alternative activity.
- **Ignoring Inappropriate Behavior:** Demonstrates that children receive more attention for positive behavior.
- **Time Away:** Continued misbehavior may result in the child being brought to the **Youth Program Administrator** and the parent/guardian being contacted.
- **Gentle Restraint:** Only as a **last resort**, if a child risk injuring themselves, others, or property. This will be implemented **only by CPI (Crisis Prevention Intervention) trained staff**.

Additional Guidelines:

- Children will be spoken to **privately and calmly** regarding inappropriate behavior.
- They will be informed of **consequences** if the behavior continues.
- If behavior remains unmanageable, the **parent/guardian will be called**.

Offenses and Dismissal:

- Staff will document repeated behavioral issues and follow the **chain of command**: Student Workers → Group Assistant → Group Leader → Youth Program Administrator → Events Manager → Facility Director.
- Offenses are recorded in the participant's file, and **parents/guardians will be notified based upon the notification preference in the participant's file upon registration**.
- After **three written warnings**, the participant may be **dismissed from the program**, with future re-enrollment considered on a case-by-case basis.

Zero Tolerance Policy:

- Aggressive behavior, bullying, or verbal abuse towards participants or staff **will not be tolerated**.
- Fighting or physical violence results in **automatic suspension for at least one week**.

- **SRP reserves the right** to determine disciplinary action **case-by-case**, up to and including **removal from the program without refund**. This includes limiting participation in activities.

Immediate Dismissal May Include:
- Bringing weapons (e.g., knives, blades, BB/airsoft guns, explosive devices)
- Possession of drugs, alcohol, or tobacco
- Threats to harm self or others
- Serious physical harm to self or others
- Verbal, emotional, or physical abuse
- Extreme behavior requiring constant one-on-one staff attention

Parent/Guardian Responsibility:
- Parents/guardians are expected to **pick up their child** if immediate removal is required.
  Parent/Guardian Initials: _____
- Parents/guardians are also expected to **communicate professionally** regarding discipline concerns.
  Parent/Guardian Initials: _____

All program-related **comments, concerns, or disputes** should be directed to the general *summerrec@saulttribe.net*, email.

Behavior Policy
The Summer Recreation Program strives to ensure that all participants enjoy a **safe, positive, and engaging environment**. To support this, staff are **trained in behavior management, communication strategies, and conflict resolution**. Each group will have its own set of rules and expectations, which align with the **overall program rules and expectations**.

Positive behavior is celebrated through:
- Use of the **"treasure chest"** for prizes
- **Shout-outs** during morning gatherings
- **Feedback from staff**

This policy outlines the program's response to **negative behavior, bullying, and severe behavior**. All incidents will be **investigated thoroughly** to ensure a complete understanding before any action is taken.

Negative Behavior
Definition:
Negative behavior includes actions that are **unpleasant, unfriendly, or counterproductive**, such as:
- Not engaging with the program
- Gossiping
- Pushing or shoving
- Shouting

Process for Managing Negative Behavior:
1. **1st Incident:**
   - Verbal warning from the group assistant or group leader.
2. **2nd Incident:**

- The child sits out of the activity for **5–10 minutes**.
- The child **re-enters after apologizing** for their actions.
- The primary parent/guardian will be notified of the incident.

3. **3rd Incident:**
   - The child sits out for **10–20 minutes**.
     - First 10–15 minutes: calm down and re-regulate
     - Last 5–10 minutes: discuss with the group assistant/leader:
       1. What behavior/action occurred
       2. Why it occurred
       3. What they will do to prevent it in the future
   - This offense will also result in a **written offense** and a **phone call to the primary parent/guardian,** and the participant will be sent home for the day (without refund).
4. **4th Incident:**
   - The child is brought to the **Youth Program Administrator**.
   - Phone call to the primary parent/gaurdian home; the child is **sent home for at least 24 hours**.
   - A **reintegration meeting** with the child and primary parent/guardian is required before returning.
5. **5th Incident:**
   - The child is brought to the **Youth Program Administrator**.
   - Phone call home; the child is **sent home for at least 1 Week** (without refund).
   - A **reintegration meeting** with the child and primary parent/guardian is required before returning.
6. **6th Incident:**
   - The child is brought to the **Youth Program Administrator**.
   - A **meeting** with the **child, primary parent/guardian, YPA, Events Manager, and Facility Director**, the child is removed from the program (without refund).

Severe Behavior

Definition:

Severe behavior includes **intentional actions that cause or could cause harm to others, themselves, or property**, such as:

- Punching or kicking
- Swearing or screaming
- Fleeing from a designated area or facility

Process:

- The child is brought to the **Youth Program Administrator**.
- Phone call home; the child may be **sent home for 1 day, 3 days, 1 week, or dismissed**.
- A **reintegration meeting** with the child and parent/guardian is required before returning.

Critically Severe Behavior – **Immediate Dismissal** may include:

- Biting
- Punching/kicking to the head or genitals
- Discriminatory language
- Self-harm
- Destruction of another's property

- Exposure of genitals or anus
- Defecation or urination outside the restroom (intentional)

Bullying
Definition:
Bullying is any unwanted aggressive behavior(s) by another youth or group of youths…that involves an observed or perceived power imbalance and is repeated multiple times or is highly likely to be repeated. Bullying may inflict harm or distress on the targeted youth, including physical, psychological, social, or educational harm.

Process:
- The offending child is brought to the **Youth Program Administrator**.
- Phone call home; child may be **sent home for 1 day, 3 days, 1 week, or dismissed**.
- **Reintegration meeting** with the child and primary parent/guardian is required before returning.
- The child who was bullied is also brought to the Youth Program Administrator, and a phone call is made to their primary parent/guardian for **support and follow-up**.
- **Second incidence of bullying** may result in **dismissal** from the program.

Enforcement
- **All staff must enforce discipline policies consistently**.
- Any occurrence, **observed or reported**, will be **investigated and subject to disciplinary action**.
- The goal is to maintain a **safe, welcoming, and supportive environment** for all participants.

Parent/Guardian Initials: _____

Summer Recreation Participant Rules

Please review these rules with your child.

1. **Program Hours**
   The full-day program operates from **8:00 a.m. to 5:00 p.m.** The Summer Recreation Program (SRP) is responsible for participants **only during program hours and after the child has been properly signed in**.

   Parents/guardians **must bring their child into the building** at the beginning of each program day. A **government-issued ID is required for sign-out**.

2. **Discipline Procedures**
   Uncooperative participants will be disciplined according to the following schedule:
   - **1st Offense:** Verbal Warning, by group assistant or group leader
   - **2nd Offense:** Written Warning and Meeting with Parent/Guardian
   - **3rd Offense:** Written Warning and Meeting with Parent/Guardian Sent home for the day (without refund)
   - **4th Offense:** Sent home for the day (without refund)
   - **5th Offense:** Removed from the program for 1 week (without refund)
   - **6th Offense:** Removed from the program (without refund)

   The SRP **reserves the right to determine disciplinary action on a case-by-case basis**, up to and including removal from the program without a refund. Staff also reserve the right to **skip disciplinary steps** if behavior warrants **immediate dismissal**, as outlined in the **Discipline Policy**.

3. **Respect for Others**
   Participants are required to **treat all staff and fellow participants with respect at all times**.

4. **Program Policies**
   All **Summer Recreation Program policies and procedures** apply to every participant and must be followed.

5. **Snacks and Lunch**
   - **Morning and afternoon snacks** will be provided.
   - Participants may bring a **healthy snack from home if preferred**.
   - Participants **must bring a healthy lunch each day**.
   - **Refrigeration is available** for packed lunches.

6. **Equipment**
   The program will provide **all necessary equipment** for daily activities. On designated days, participants may bring their own equipment if permitted. **Please ensure all personal equipment is labeled with the participant's name**.

7. **Appropriate Clothing**
   Participants **must wear tennis shoes** each day. **Open-toed shoes and flip-flops are not permitted.**
   - It is recommended that participants bring **an extra pair of outdoor shoes** for activities.
   - Participants must also wear **appropriate clothing for outdoor play and ice skating**.
   - If a participant does not bring appropriate clothing, they **may not be allowed to participate in that activity**.
     *Example: On skating days, participants must wear **long pants and jackets/sweatshirts**.*

8. **Group and Facility Rules**
   Participants must follow **all rules and guidelines established within their group** and must follow the rules when visiting **locations outside of Big Bear**, including field trips.

9. **Additional Rules**
   Program staff may **develop and implement additional rules** if necessary to address **unforeseen situations** or ensure the safety of participants and staff.

Summer Recreation Program
Parent Handbook Consent Form

I acknowledge that I have **reviewed and understand all policies and procedures** contained in the **Summer Recreation Program Parent Handbook** and agree to comply with them.

I understand what is **expected of both myself and my child** while participating in the program.

I acknowledge that I have received access to the **Summer Recreation Program Parent Handbook** and may reference it whenever necessary.

Child's Name(s):_____

Parent/Guardian Name:_____

Parent/Guardian Signature:_____**Date:**_____

I hereby agree to allow my photographic image to be used (with or without my name, both singly and in conjunction with other persons or objects) by the Sault Ste. Marie Tribal Health Center Community Health Program (STHC-CHP)

STHC-CHP may use my photograph, at its discretion and consistent with its public health mission, in any publication and/or on an internet website or in any other format. I understand that other persons will be free to copy and/or print, and/or distribute my photographic image.

I understand that for the use of my photographic image in this publication or internet posting or any other format, I will receive no financial compensation or payment of any kind from the STHC-CHP.

Name **Date of Birth**

Signature **Date**

Address

City, State and Zip Code

Phone Number

IF A MINOR: Name of Parent of Legal Guardian

Signature of Parent of Legal Guardian

Release of Liability and Acknowledgement of Risk

The staff of the Health Division has taken reasonable steps to provide you with an appropriate learning environment and skilled staff for your benefit and enjoyment. While you may not be skilled in or familiar with these activities we wish to remind you that all activities associated with these health Divisions and classes are not without risk. Certain risks cannot be eliminated without destroying the unique character of these activities. The same elements that contribute to the unique character of these activities can be causes of loss of or damage to equipment, accidental injury or illness, or in extreme cases permanent trauma or death. We do not want to frighten you or reduce your enthusiasm for these activities, but we do think that it is important for you to know in advance what to expect and to be informed of the inherent dangers. Please carefully read the following and if in agreement please sign below.

ASSUMPTION OF RISKS

I am aware that Health Division activities involve many inherent risks, dangers and hazards including, but not limited to, accidents which occur during transportation or travel to and from the programs and classes; hot and burning materials; slips, falls, burns, cuts, allergic reactions, pressure cooking and canning devices may rupture unexpectedly; negligence of other Health Division participants, negligence of other parties participating in activities offered by or associated with Health Division and the possibility of personal injury, death, property damage or loss resulting there from. It is not possible for the Health Division Staff to protect me from all of these inherent risks, dangers and hazards. I am aware that physical exertion may be required to engage in Health Division activities and the forces exerted on the body can activate or aggravate pre-existing physical injuries or conditions, symptoms or congenital defects. I understand that if I know or suspect that my physical condition may be incompatible with Health Division activities that I should seek medical advice before undertaking Health Division activities and should choose to abstain from such activities.

I am aware that this activity entails risks of injury or death to me. I understand that the description of these risks is not complete, and that other unknown or unanticipated risks may result in injury or death. I agree to assume responsibility for the risks identified herein and those risks not specifically identified. My participation in this activity is purely voluntary, no one is forcing me to participate, and I elect to participate in spite of the risks.

I certify that I am fully capable of participating in this activity. Therefore, I assume full responsibility for myself, including my minor children, for bodily injury, death, and loss of personal property and expenses thereof as a result of those risks, dangers, hazards and of my negligence in participating in this activity.

I have read, understood, and accepted the terms and conditions stated herein and acknowledged that this agreement shall be effective and binding upon me, my heirs, assigns, personal representatives, estates, and for all members of my family, including any minors. I acknowledge that I am not relying on any oral, written or visual representation or statements made by Health Division personnel, including those made in its brochures or any other promotional material, to induce me to participate in this activity.

_____	_____
Signature of Participant	**Print Name**
_____	_____
If under 18, Signature of Parent or Guardian	**Print Name**

_____	_____	_____
Address	**Phone number**	**Date**

BIG BEAR ARENA Est. '96

MEDICATION PERMISSION AND INSTRUCTIONS

CHILD CARE HOMES AND CENTERS

Michigan Department of Lifelong Education, Advancement and Potential

Child Care Licensing Bureau

If you are giving or applying any medication to a child in care, the following must be completed by the parent for **each** medication. An interruption in medication will require a new permission form.

TO BE COMPLETED BY PARENT

I give my permission for _____ (Child care staff member) to give or apply the medication

_____ (Specify, prescribed medication/over the counter product), to my child _____ (Child's Name), as follows:

DIRECTIONS:

1. Date to Begin Giving Medication	2. Date to Stop Medication
3. Times Medication is to be Given	4. Amount (dosage) of Medication Each Time Given
5. Storage of Medication	
6. Other Directions, if Any	
Signature of Parent	Date

TO BE COMPLETED BY THE CHILD CARE STAFF MEMBER GIVING THE MEDICATION:

DATE	TIME	AMOUNT GIVEN	CHILD CARE STAFF MEMBER	CHILD CARE STAFF MEMBER SIGNATURE

It is recommended that this form be reviewed with the parent every 3 months if the medication is ongoing.				

TO BE COMPLETED BY THE CHILD CARE STAFF MEMBER GIVING MEDICATION:

DATE	TIME	AMOUNT GIVEN	CHILD CARE STAFF MEMBER NAME	CHILD CARE STAFF MEMBER SIGNATURE

Individuals with disabilities may contact the MiLEAP ADA Coordinator to request an alternative format to these materials. Please visit www.Michigan.gov/ADA for a list of state ADA Coordinators.

MiLEAP is an equal opportunity employer/program.