

Rocket Camp Basketball Programs Summer Camp 2021 Registration Form



Campers entering 4th-9th grades Location: Rashi School, Dedham MA

Camp Staff:

- Paul Liner (Director)
- Eva Liner (Program Coordinator)
- Needham High School Basketball Staff
- Current and Former Needham High School Players

Camp Schedule:

- Skill Stations
- Games
- Daily free throw shooting
- Hot Shot contests
- Nightly homework

Please check week(s):

Skills Week July 6 - 9, 2021	Tues-Fri 8:00AM-1:00PM	\$325	
 Week 1 July 12 - 16, 2021	M-F 8:30AM - 2:00PM	\$400	Camper Capacity: Up to 75 campers 3 separate cohorts
 Week 2 July 19 - 23, 2021	M-F 8:30AM - 2:00PM	\$400	
 Week 3 July 26 - 30, 2021	M-F 8:30AM - 2:00PM	\$400	

Registration is required to secure your enrollment. **ALL** of the following forms must be submitted together to register. Please note, If there are any forms missing, you will **not** be registered for camp.

- ☐ Completed registration form with Emergency contacts (2)
- ☐ A recent copy of physical (within 18 months of camp) which includes all immunizations (see list)
- ☐ If applicable, complete Authorization to Administer Medication to Camper forms
- ☐ Full payment made out to Rocket Camp Basketball Programs
- NEW- Initial all 2021 Camp Policies and submit

Mail all of the above to: Rocket Camp Basketball Programs, 2 Marshall Ave, Natick, MA 01760

Email: rocketcampbasketball@yahoo.com Website: www.rocketcampbasketball.com



Registration Form (continued)



background checks, health care and discipline

policies, and/or grievance procedures upon request.

Print neatly, all information required:

Subscribers Name:

Campers Insurance #:_____

Name:	Gender: Male Female	
Grade Sept. 2021	Birthdate	
Address	T-shirt size: YL YXL S M L XL	
Parent/Guardian Name(s)		
Phone #s		
Email address		
Emergency contact name and phone # (Family member)):	
Emergency contact name and phone # (Non family mem	nber)::	
Medical Information:	This camp must comply with regulations of the	
Health Insurance Carrier:	Massachusetts Department of Public Health and be licensed by the local board of health. Please be aware that you have the right to review	

Rocket Camp Summer 2021 Policies and Procedures

All sections must be completed in order for your registration to be complete

Parent/Guardian Signature REQUIRED:
By enrolling a camper, a parent/guardian agrees that the camper is able to participate in all the activities and releases the Rashi School, the camp staff, and Rocket Camp Basketball Programs from any liability. By signing you authorize the camp director and staff to act for you according to their best judgement in any emergency requiring medical attention.
COVID Refund Policy If your child is COVID positive during camp or determined to be a close contact and put in quarantine, you will receive a refund of \$40 for each day the camper missed Rocket Camp that week. Initial here I would like to donate my refund back to Rocket Camp to cover the cost camp expenses, including camp supplies and staffing. Yes No
Cancellation Policy If a child is registered and cancels for any reason between June 1st and June 20th, the family will receive a refund less a \$50.00 processing fee; cancellations between June 20th and the start of camp will receive a refund less a \$100.00 processing fee; No refund if your cancellations occurs after camp begins for non-COVID reasons. *The processing fee is calculated based on costs for camp supplies and staffing. I have read and agree to the refund policy. Initial here
Late Camper Pickup Our daily pickup is 1:00pm during the Skills Week and 2:00pm during Week 1-3. We do understand that sometimes traffic or emergencies delay you picking up your child. Parents that are continually late picking up will be charged a \$10.00 late fee for every 10 minutes you are late. Initial here
I give permission for my child to be photographed for the Rocket Camp website: Yes No

The Commonwealth of Massachusetts

Required Immunizations for attending Summer Camps

Grades Kindergarten - 6

DTaP	5 doses; 4 doses are acceptable if the 4 th dose is given on or after the 4 th birthday. DT is only acceptable with a letter stating a medical contraindication to DTaP.	
Polio	4 doses; 4^{th} dose must be given on or after the 4^{th} birthday and ≥ 6 months after the previous dose, or a 5^{th} dose is required. 3 doses are acceptable if the 3^{rd} dose is given on or after the 4^{th} birthday and ≥ 6 months after the previous dose.	
Hepatitis B	3 doses; laboratory evidence of immunity acceptable	
MMR	2 doses; first dose must be given on or after the 1 st birthday and the 2 nd dose must be given ≥28 days after dose 1; laboratory evidence of immunity acceptable	
Varicella	2 doses; first dose must be given on or after the 1 st birthday and 2 nd dose must be given ≥28 days after dose 1; a reliable history of chickenpox* or laboratory evidence of immunity acceptable	

Grades 7 - 12

Tdap	1 dose; and history of DTaP primary series or age appropriate catch-up vaccination. Tdap given at ≥7 years may be counted, but a dose at age 11-12 is recommended if Tdap was given earlier as part of a catch-up schedule. Td should be given if it has been ≥10 years since Tdap.
Polio	4 doses; 4 th dose must be given on or after the 4 th birthday and ≥6 months after the previous dose, or a 5 th dose is required. 3 doses are acceptable if the 3 rd dose is given on or after the 4 th birthday and ≥6 months after the
Hepatitis B	3 doses; laboratory evidence of immunity acceptable. 2 doses of Heplisav-B given on or after 18 years of age are acceptable.
MMR	2 doses; first dose must be given on or after the 1 st birthday and the 2 nd dose must be given ≥28 days after dose 1; laboratory evidence of immunity acceptable
Varicella	2 doses; first dose must be given on or after the 1 st birthday and 2 nd dose must be given ≥28 days after dose 1; a reliable history of chickenpox* or

Campers, staff and volunteers 18 years of age and older

MMR	2 doses, anyone born in or after 1957. 1 dose, anyone born before 1957 outside the U.S. Anyone born in the U.S. before 1957 is considered immune. Laboratory evidence of immunity to measles, mumps and rubella is acceptable
Varicella	2 doses, anyone born in or after 1980 in the U.S., and anyone born outside the U.S. Anyone born before 1980 in the U.S. is considered immune. A reliable history of chickenpox or laboratory evidence of immunity is acceptable
Tdap	1 dose; and history of DTaP primary series or age appropriate catch-up vaccination. Tdap given at ≥7 years may be counted, but a dose at age 11-12 is recommended if Tdap was given earlier as part of a catch- up schedule; Td should be given if it has been ≥ 10 years since Tdap
Hepatitis B	3 doses (or 2 doses of Heplisav-B) for staff whose responsibilities include first aid; laboratory evidence of immunity is acceptable

^{*}A reliable history of chickenpox includes a diagnosis of chickenpox, or interpretation of parent/guardian description of chickenpox, by a physician, nurse practitioner, physician assistant or designee.

Rocket Camp Basketball Programs Authorization for Non-Parent Pick-Up

Name of Camper		
I authorize the following people to pick-up my children at camp. Please note, we might ask for ID for non-parent pickups.		
Name	Phone Number	
Parent Signature	Date	

Meningococcal Disease and Camp Attendees: Commonly Asked Questions

What is meningococcal disease?

Meningococcal disease is caused by infection with bacteria called *Neisseria meningitidis*. These bacteria can infect the tissue (the "meninges") that surrounds the brain and spinal cord and cause meningitis, or they may infect the blood or other organs of the body. Symptoms of meningococcal disease can include fever, severe and constant headache, stiff neck or neck pain, nausea and vomiting, and rash. In the US, about 350-550 people get meningococcal disease each year and 10-15% die despite receiving antibiotic treatment. Of those who survive, about 10-20% may lose limbs, become hard of hearing or deaf, have problems with their nervous system, including long term neurologic problems, or have seizures or strokes.

How is meningococcal disease spread?

These bacteria are passed from person-to-person through saliva (spit). You must be in close contact with an infected person's saliva in order for the bacteria to spread. Close contact includes activities such as kissing, sharing water bottles, sharing eating/drinking utensils or sharing cigarettes with someone who is infected; or being within 3-6 feet of someone who is infected and is coughing and sneezing.

Who is most at risk for getting meningococcal disease?

People who travel to certain parts of the world where the disease is very common, microbiologists, people with HIV infection and those exposed to meningococcal disease during an outbreak are at risk for meningococcal disease. Children and adults with damaged or removed spleens or persistent complement component deficiency (an inherited immune disorder) are at risk. Adolescents, and people who live in certain settings such as college freshmen living in dormitories and military recruits are at greater risk of disease from some of the serotypes.

Are camp attendees at increased risk for meningococcal disease?

Children attending day or residential camps are **not** considered to be at an increased risk for meningococcal disease because of their participation.

Is there a vaccine against meningococcal disease?

Yes, there are 2 different meningococcal vaccines. Quadrivalent meningococcal conjugate vaccine (Menactra and Menveo) protects against 4 serotypes (A, C, W and Y) of meningococcal disease. Meningococcal serogroup B vaccine (Bexsero and Trumenba) protects against serogroup B meningococcal disease, for age 10 and older.

Should my child or adolescent receive meningococcal vaccine?

That depends. Meningococcal conjugate vaccine (Menactra and Menveo) is routinely recommended at age 11-12 years with a booster at age 16. In addition, this vaccine may be recommended for children with certain high-risk health conditions, such as those described above. Otherwise, meningococcal vaccine is **not** recommended for attendance at camps.

Meningococcal serogroup B vaccine (Bexsero and Trumenba) is recommended for people with certain relatively rare high-risk health conditions (examples: persons with a damaged spleen or whose spleen has been removed, those with persistent complement component deficiency (an inherited disorder), and people who may have been exposed during an outbreak). Adolescents and young adults (16 through 23 years of age) who do not have high risk conditions may be vaccinated with a serogroup B meningococcal vaccine, preferably at 16 through 18 years of age, to provide short term protection for most strains of serogroup B meningococcal disease. Parents of adolescents and children who are at higher risk of infection, because of certain medical conditions or other circumstances, should discuss vaccination with their child's healthcare provider.

How can I protect my child or adolescent from getting meningococcal disease?

The best protection against meningococcal disease and many other infectious diseases is thorough and frequent handwashing, respiratory hygiene and cough etiquette. Individuals should:

- 1. wash their hands often, especially after using the toilet and before eating or preparing food (hands should be washed with soap and water or an alcohol-based hand gel or rub may be used if hands are not visibly dirty);
- 2. cover their nose and mouth with a tissue when coughing or sneezing and discard the tissue in a trash can; or if they don't have a tissue, cough or sneeze into their upper sleeve.
- 3. not share food, drinks or eating utensils with other people, especially if they are ill.
- 4. contact their healthcare provider immediately if they have symptoms of meningitis.

If your child is exposed to someone with meningococcal disease, antibiotics may be recommended to keep your child from getting sick.

You can obtain more information about meningococcal disease or vaccination from your healthcare provider, your local Board of Health (listed in the phone book under government), or the Massachusetts Department of Public Health Division of Epidemiology and Immunization at (617) 983-6800 or on the MDPH website at www.mass.gov/dph.

Provided by the Massachusetts Department of Public Health in accordance with M.G.L. c.111, s.219 and 105 CMR 430.157(C).

Massachusetts Department of Public Health, Division of Epidemiology and Immunization, 305 South Street, Jamaica Plain, MA 02130 Updated March 2018

Rocket Camp Sunscreen/Insect Repellent Policy Summer 2021

I give Rocket Camp Basketball Progra	ams permission to	
give	(name of camper)	
suncreen during camp hours.		
Please note: Sunscreen will be SPF 2	5 or greater.	
Parent or Guardian Signature	 Date	
I give Rocket Camp Basketball Progra	ams permission to	
give	_(name of camper)	
insect repellent during camp hours.		
Parent or Guardian Signature	 Date	