

## Summer Registration Checklist

All information **must be completed** to comply with the Virginia Department of Social Services Division of Licensing Programs standards.

When completing your child's registration forms please refer to the instructions below.  
Use the check list to ensure you have all forms complete.

### ☐ Program Fee Information & Fee Assistance Availability

- **PLEASE KEEP THIS SHEET.** Parents should keep this sheet for more information regarding program fees.

### ☐ Payment Form

- Find your family's total annual income in the left hand column (income column).
- Look to the right (week column) for the week(s) your child will be participating.
- Total the amount of each week your child will be participating to calculate your fee.
- Please make your check or money order payable to *Neighborhood and Community Services* (NCS). Credit Card payment is allowed – all major credit cards accepted.
  - Payment will be processed upon receipt unless you state otherwise.
- If paying weekly, you will receive a sheet of weekly payment vouchers.
  - Fairfax County Therapeutic Recreation Services' goal is to have all programs accessible to all residents. Therefore fee reductions for summer camps are available on a sliding scale, based on household income
  - If additional financial assistance is needed, scholarship fund is available on a case by case basis to supplement campers' registration fees. Please contact the Therapeutic Recreation Office at 703-324-5532 for scholarship guidelines and to request an application.

### ☐ Pages 1: Application - Participant Information

- **Two (2) Emergency Names**, addresses, home/work telephone numbers **must** be submitted

### ☐ Pages 2-4: Application – Participant Profile

- If the participant will need to have medication administered or requires a medical procedure during program hours, the **Medication, Special Needs, and Medical Release** portion **must** be completed. (a medication authorization form will be sent to you if medication will need to be administered during program hours)
- The Participant Profile provides us with information on your child's needs, functioning level, and interests so that we may better serve your child. The more information you can provide the better!

### ☐ Page 5: Application - Consent & Waivers

- Review the releases and waiver statements and indicate your permission status for each. **Make sure the bottom of the page is signed and dated**

### ☐ Page 6: Application - Consent to Exchange Information

- Signing this form will allow Recreation staff to exchange information with other agencies (e.g. child's teacher) to verify eligibility and gain information to provide your child with adequate services that best fit their needs.

(over)

**☐ Page 7: Transportation Request**

- The transportation request form **MUST** be complete! All information is necessary in order to provide your child with transportation services.
- **Extended School Year (ESY)/FCPS Summer School:** TRS **does not** arrange or provide transportation to or from ESY/FCPS Summer School. Parents must make their own arrangements with FCPS transportation. Only transportation from the Summer Recreation Program to the individual's house will be provided by TRS.

**☐ Important Transportation Information for Parents:**

- **PLEASE KEEP THIS SHEET.** Parents should keep this sheet for more information regarding transportation for the Summer.

**☐ Professional Information Sharing Form (Two Pages)**

- Parent must fill out **Section (A) Only** and return it to TRS with your child's registration form. TRS will send the form to be completed entirely by the professional stated and returned to TRS to be used as a tool to better serve your child in the program.

**ELEMENTARY AGE PARTICIPANTS ONLY**

\*\*The following documents are required to be turned in with all elementary age registrations\*\*

**☐ School Entrance Physical Examination**

- If your child is new to our programs a copy of his/her completed School Entrance Health Form must be submitted. Part I – Health Information, Part II- Immunization, and Part III- Physical are all required and must be dated, signed or stamped by a physician (or designee). **Ages 5-12 only.**
- If your child (ages 5-8 only) participated last summer or in the SMILE program and has had updated **immunizations**, part III of the School Entrance Physical Examination form must be submitted again.
- If you have an up-to-date School Entrance Health Form on file with TRS, you will not need to submit a new one.
- You may obtain a copy from your child's school/doctor's office. Records must be mailed or brought to the office – **No faxes will be accepted!**

**☐ Child Identification Verification:**

- If your child is new to the program and is between the ages of 5-12 proof of the child's identity and age must be verified. Documents listed below may be presented to TRS staff to be reviewed in the office or at the open house (TBA).

**Documents must be originals only!**

- |  |   |
|--|---|
| <input type="checkbox"/> Certified copy of the child's birth certificate   | <input type="checkbox"/> Birth registration card            |
| <input type="checkbox"/> Record from a public school in Virginia   | <input type="checkbox"/> An original copy of a report card. |
| <input type="checkbox"/> Notification of birth (hospital, physical, or midwife record)   | <input type="checkbox"/> Passport                           |
| <input type="checkbox"/> Copy of placement or other proof of the child's identify from a child placing agency (foster care and adoption agencies).                               |   |
| <input type="checkbox"/> Certification by a principal or his designee of a public school in the U.S. that a certified copy of the child's birth record was previously presented. |   |

**Please Note:** Documents must display an original signature; therefore, they may not be faxed into the office.

If you require additional information, please contact us at 703-324-5532 or TTY 711.