



J. Arthur Trudeau Memorial Center
Children's Recreation Program

Recreational Services
Registration Packet

3445 Post Road
Warwick, RI 02886
(401) 739-2700 284
Mike Sherman
Children's Recreation Coordinator

Recreational Philosophy

The philosophy of the Children's Recreation Program is to provide a structured environment that provides each child with a positive, rewarding & fun learning experience. Many opportunities will unfold while making new friends and unforgettable memories. Incorporated into every activity are opportunities to teach children both basic and advanced social skills, using a total communication approach such as PECS, groups, and team building exercises.

Recreation Program

We offer a variety of year round and seasonal activities located in the community as well as the Larkin Recreational Building (located behind Trudeau's main building). We encourage children of all ages and abilities to join this program. Quarterly calendars can be mailed upon request or can be found at www.Trudeaucenter.org.

Activities may include, i.e. Swimming, Bowling, Exercise Group, and Arts & Crafts. When you receive the calendar decide which events your child would like to attend, fill out the registration form and mail the enrollment and any fees back to Children's Recreation Department. ***Please note that Children's Recreation requires that you sign up one week prior to your desired activity.*** There is also the option of paying by credit card online at our website.

We also offer the New Frontier Adventures Program "Camp" which takes place during school vacations and 2 weeks in the summer (wrapped around Extended School Year).

New Frontier Adventures

New Frontier Adventures is a program that is held during school vacations, and for two weeks in the summer. This is a program that focuses on fun and social/peer interaction. Children who participate will be included in activities that improve self esteem, form friendships, and develop social skills. NFA has a clinician and a coordinator in attendance at each activity, and an on-call nurse. Each NFA has a different theme in which the activities are based.

*Medication can not be administered by ANY staff members.

Requirements

In order to participate in the Children's Recreation Program children must be between the ages of 5 and 21 years old. Each parent or guardian must attend an orientation meeting with Mike Sherman.

We do not provide one to one services with the exception of camp. If your child requires one to one staffing, if possible, send someone with them or contact the Children's Recreation department prior to activity.

The Trudeau Center also offers an adult recreation program that provides activities to individuals beginning at age 16. For more information, please contact Alyson Lagreca at 739-2700 x225.

Health Requirements

- All **medical** information on the Registration form must be filled out completely before a participant is allowed to take part in any recreational activities.
- Children's Recreation Program must be notified of any special dietary needs, allergies, behaviors, etc.
- Children's Recreation Program must be notified of all medical concerns including seizure disorders.
- If child does not attend school because of illness then he or she should not attend the recreation program.
- Any accidents or incidents that occur will be documented and reported to our nursing Dept.

Cost

Cost of weekly recreational activities will vary dependent upon the activity. Activities that require transportation and admission fees will be incorporated into the cost of the activity. Payments will be due with registration by deadline as stated on calendar, unless consulted with Mike Sherman.

In the event that tickets or admission must be pre paid e.g. sporting events, shows, plays, etc. ***the fee for the activity must be received no later than one week prior to event.***

The cost of the New Frontier Adventures will be dependent on length and hours of camp week. This includes transportation for field trips, supplies for activities, staffing, and healthy snack.

Cancellation Policy

Cancellations due to inclement weather will be posted in the following locations:

- www.trudeaucenter.org
- Agency closings are posted on channel 6 news

Or you can call 739-2700 ex.284 for any information

In the event a child can not attend, a 24 hour notice is required in order to receive a refund or credit. No refund will be given if notification is not provided at least 24 hours in advance.

Transportation Policy

Transportation to/from community activities is provided by The Trudeau Center. The Trudeau Center reviews the driving record of each employee at time of hire and annually, thereafter. In order to be permitted to drive in the Children's Recreation Program a driver's history must be free of accidents for the past year, with no history of driving under the influence (DWI).

***There is no discounted rate for providing your own transportation.*

Medication Policy – Home Based Children's Services

The Children's Recreation Program adheres to the medication policy of the Home Based Children's Services (HBCS) program.

Pursuant to the Rhode Island Nurse Practice Act (RIGL § 5-34-1, et. sub.) it is the policy of the Home Based Children's Services (HBCS) department **not** to administer medication to children participating in HBCS programs (e.g. HBTS, PASS, Respite, Children's Recreation, etc.).

This policy pertains to **all** children receiving services and staff employed by the HBCS department; and **excludes emergency situations** (e.g. EpiPen, Inhaler, etc.) where not receiving medication would have potentially fatal consequences.

****Any changes to registration information MUST be reported in writing.** If not done, your child's participation in future activities could be jeopardized.**

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Participants Name _____ DOB _____ Age _____

Diagnosis _____

Name of Guardian (s) _____

Address _____

Phone (home) _____ (Cell) _____ Email _____

Primary Contact Person

Secondary Contact Person

Name	Name
Number	Number

Emergency Contact Information (other than parent)

Name of Contact Person	Relationship	Phone Number(s)

Medical Information

Allergies/Medical Concerns: _____

Does child have a seizure disorder? _____

Is your child visually or hearing impaired? _____

Does child take any prescription medication? _____

Please list:

MEDICATION	DOSAGE	TIME

In the event your child needs to be hospitalized please indicate which hospital you would prefer?

What is your child's primary mode of communication? _____

Does your child utilize any of the following?

Visual schedules Social Stories Conversation Scripts

- If your child uses any of the above or any other communication device please send it with them to your desired activity
- What aspect of our program would the participant most benefit from
Social Emotional Physical Educational

What school does your child attend? _____

Does your child use a wheelchair or any device to help with transportation? _____

Please describe your child's Activities of Daily Living:

	Complete Assistance	Partial Assistance	Independent
Toileting	1	2	3
Dressing	1	2	3
Eating	1	2	3

I give permission to Children's Recreation staff to assist in toileting. Signature _____

My child exhibits the following behaviors:

- Runs away Touches others inappropriately Scratches, bites, hits self
 - Scratches, bites or hits others Screams, loud noises
 - Other, Please describe in detail
-
-
-

Does your child have a Behavior Plan? If yes please include with registration packet if no, please share how you avoid or decrease unwanted behaviors.

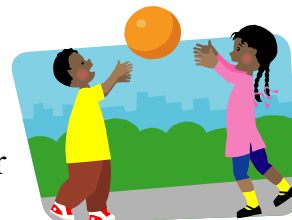
Please list any other additional information that Children's Recreation staff should be aware of as well as any likes and dislikes that would help your child be successful.

Does your child receive services from Trudeau or any other agencies? _____

If so, please list which agency and type of services are received. _____

(Participant Questionnaire)


- Getting To Know You -




Hello! Welcome to the Trudeau Center's Children's Recreation Program. We're excited that you'll be joining us on our fun adventures. Please do your best to answer these 10 questions so we can get to know you better. Thanks!


Name _____ Age _____

 Have you ever attended a recreation program? _____


 What did you enjoy about it? _____


 What sports do you play? _____


 What type of arts & crafts are your favorites? _____

 Which outdoor activities do you like? _____

 Who are some of your favorite musical bands or singers? _____

 If you could be any animal, which one would you be and why? _____

 What is your favorite thing to do with your friends? _____

 If you could be President for a day, what would you do? _____

 If you could learn about anything or become better at something, what would it be? _____

