



## Boys & Girls Club of Morgan County Programming Under COVID Conditions Summer Center Program

All youth must have this form completed and on file with BGCMC prior to attending the Summer Center Full Day Program.

**Member Name:** \_\_\_\_\_ **Child's Age:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

School: \_\_\_\_\_ Teacher: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Cell: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Cell: \_\_\_\_\_

Is your child currently a Club member? **Y**  **N**  *If NO, please register your child and pay the membership fee.*

Do you or anyone in your family have any symptoms of a respiratory infection (e.g., cough, sore throat, fever or shortness of breath)? **Y**  **N**

Does your child have any health conditions that would put them in the high-risk category for COVID19 severe conditions? **Y**  **N**

### Program Structure & Schedule

Attendance minimum and maximums and program schedules may change based on Federal, State, Local, and Organizational guidelines. Each member will be assigned a group and two staff. Groups are not to exceed 12 youth. Each group has a schedule to follow on a daily basis. Groups will not interact with other groups at any time and will have specifically assigned program space. The schedule below is an example of activities for each day at the Club.

Time	Activity
7:30 - 8:30 AM	Sign-In, Small Groups, Announcements, Handwashing
8:45 - 11:30 AM	First Program Rotation
11:45 - 12:30 PM	Hand Washing and Lunch
12:30 - 3:00 PM	Announcements, Afternoon Rotations
3:00 - 4:00 PM	Temperature Check, Handwashing, Snack,
4:00 – 5:30 PM	Movie, Outside Activities
5:30 - 6:00 PM	Sign-Out
6:00 - 6:30 PM	Facility Sanitization

### Drop Off Procedures:

1. Parents/guardians upon arrival to the club parking lot will wait in their vehicle until their child is received by a Club staff member.
2. Each child's temperature will be taken before gaining admittance into the facility. Any child whose temperature exceeds 100.4 degrees and or displays respiratory infection symptoms will be turned away immediately.
3. Parents/guardians should wait in their car until their child is cleared by a staff member.
4. BGC staff will record the child's temperature and mark a checklist for respiratory symptoms, including time, date, and the parent/guardian who transported the child to the Club.
5. Child(ren) are then directed to where they will wash their hands following the CDC protocol and sent to their designated program area.
6. Children will be rescreened for temperature and symptoms at 10:00am, and again at 2:00pm each day that they are in care.

### **Pick Up Procedures**

1. Parents/guardians should park near the designated entrance to help with verification and safety for the release of your child. Call the front desk upon arriving in the Club parking lot.
2. You will be asked to identify yourself with a code number. (Four Digit Authorization Code established on BGCMC Membership Form).
  - a. It is important for anyone who is listed as an emergency contact to know your code number. Children will not be released to an individual who does not know the code number.
3. You must be visible to staff through designated entry doors, but should not come inside. Once staff have a clear view of you, they will walk your child(ren) to the door to be released into your care.
4. Staff will monitor your child until they arrive in your vehicle.

### **If children or staff become sick with flu-like symptoms while at the Club**

- If children/staff develop a fever greater than 100.4 and respiratory infection symptoms, they need to be sent home immediately. The child will be separated from other children in a designated room and allowed to rest until they are picked up. Staff who are assigned to supervise them while they wait will practice social distancing and use PPE (personal protective equipment, ie. mask, gloves).
- Parents/guardians will be called to pick up the child ASAP.
- Parents/guardians will be directed to call their health care provider to discuss the child's symptoms and possible need for evaluation.
- The symptomatic child or staff member will be directed to self-isolate if they are tested for COVID-19 and awaiting results.
- Children or staff who have had contact with or reside with a family member with a pending COVID-19 test and do not have symptoms, no action is necessary. If they are showing signs of illness, the child or staff member should self-isolate.

### **If there is a positive case of COVID-19 among children or staff at the Club**

If there is a confirmed case of COVID-19 among a child or staff member, the facility will close immediately and the BGCMC will await direction for reopening from the Morgan County Health Department. The facility will be thoroughly cleaned and disinfected.

- Parents/guardians will be notified of the positive test for COVID-19 and the need for closure of the facility and what symptoms to watch for in their children.
- The child or staff member that has a positive test will be directed about home isolation from their provider. The Morgan County Health Department will be notified and will investigate all contacts.
- If a child or staff member has had contact with someone with a confirmed case of COVID-19, they must go home immediately and self-quarantine for 14 days and call their health care provider.

**Parent & Guardian Acknowledgements & Agreements for Programming Under COVID Conditions**

Please **initial each line** to show that you agree and understand. The directing staff will gladly answer any questions related to our agreements.

- \_\_\_\_\_ I understand in the event that my child is symptomatic (cough, sore throat, fever or shortness of breath), BGCMC staff will call for me to come pick my child up as soon as possible. My child will remain in isolation until I arrive for pick up.
- \_\_\_\_\_ I must disclose to BGCMC staff if me or anyone in my household has been exposed to the COVID-19 virus or are symptomatic.
- \_\_\_\_\_ If my child is removed from the program due to being symptomatic, they are not allowed to return until they are cleared by a neutral medical professional.
- \_\_\_\_\_ I understand at any given time, under the recommendation of the health department or medical professionals, the Club may discontinue services to ensure the safety of its staff and members.
- \_\_\_\_\_ I understand that the Club is not able to guarantee that my child will not come in contact with another camp participant.
- \_\_\_\_\_ I agree to follow proper precautions at home to prevent transmission (i.e., maintain a small social circle, washing clothes immediately after arriving at home.)
- \_\_\_\_\_ I understand and agree to follow the drop off/pick up procedures in order to maintain the health and wellbeing of all involved with BGCMC.
- \_\_\_\_\_ I understand that if my child does not comply with social distancing rules or cannot maintain boundaries, I will be called to pick up my child immediately and they will not be allowed to participate in this program.

Having read the BGCMC Acknowledgements and Agreements for Programming Under COVID Conditions,

I \_\_\_\_\_ (printed full name), now sign my name as verification that I fully understand and support each item.

X

\_\_\_\_\_  
Parent / Guardian Signature