



# PROVO CITY PARKS & RECREATION

## Adaptive Programs Information

*At Provo Parks & Recreation we aim to promote skill development, accommodation, and inclusion. We strive for growth and success for each of our participants. We provide adaptive programs with specialty staffing and reasonable accommodations to promote success for participants who may struggle in typical settings. It is necessary to maintain a level of safety in order to promote success, development, and inclusion. Some children may not be in a position at every point to participate in such programs, such as if they pose a health or safety risk to others. For example, we ask you to keep your child with the chicken pox at home so as not to sicken the other participant; we may likewise request distance between your participant and others if they pose a safety risk.*

### BEHAVIORAL EXPECTATIONS

We do our best to accommodate everyone, but some conduct is not appropriate for our programs. If the following behavioral expectations are not followed, Provo Parks & Recreation reserves the right to deny or terminate a child's participation.

*General Rules of Conduct – Camper/Athlete will:*

- Care for personal belongings or request assistance as needed
- Use equipment and supplies appropriately without destruction
- Follow directions
- Interact in a positive way with others (no hitting, biting, scratching pushing or injury of others)
- Participate as fully as possible
- Use friendly language (including but not limited to no profanity, racial, gender or disability slurs)
- Protect self from physical harm (no self-harming)
- Be able to stay with group with assistance as needed

*Termination of Participation*

- Causes injury to self, peers, or staff
- Exhibits inappropriate behaviors which may prevent participation in community activities
- Fails to follow the general rules of conduct
- Engages in repetitive aggressive, harmful, or disruptive behavior

*Our goal is to ensure you and your family have a great experience. All participants in our programs are unique and have specific strengths and challenges. Because we want to help you get the most out of our program, please take a moment to complete the following form to help us know how we can best meet your needs and help you and your child have a great experience.*



## Social Behavior & Personality

- Shows interest in others
- Will play/interact with others
- Share things with others willingly
- Takes turns willingly
- Respects the space and property of others
- Is tolerant of others (not easily agitated)
- Shy
- Friendly
- Aggressive
- Will sit quietly to watch a 30 min program
- Can identify and take responsibility for personal belongings
- Will play/interact cooperatively within a group
- Is appropriate in public and community settings
- Does well in new environments
- Does well with new people

Almost Never		About half of the time		Almost Always
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
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1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5

Please list some of your child's strengths	
Please list some of your child's weaknesses	
Additional Information	

## Communication

- Unable to communicate needs and wants
- Communicates w/gestures, non-verbal
- Communicates using basic sign
- Uses communication device
- Needs visual directions/prompts
- Uses one or two word statements
- Complete verbal communication

Almost Never		About half of the time		Almost Always
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5

Additional Information	

## Receptive Language

- Recognizes name when called
- Reacts when spoken to
- Responds to one step directions
- Responds to 2-3 step directions
- Responds to directions within a small group
- Responds to directions within a large group

Almost Never		About half of the time		Almost Always
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5

Additional Information	

## Swim Experience

- One-on-one assistance
- Some assistance
- Enjoys water play
- Can return to wall in chest deep water
- Jumps into deep water
- Zero-depth entry only
- Fears the water/refuses to enter
- Life jacket experience only
- Will drink pool water
- Knows to swim only with an adult

Additional Information	

## Swim Skills

- Enter water walking independently
- Blows bubbles
- Bobs
- Opens eyes under water
- Floats w/ assistance on back
- Glides/moves on back w/ assistance
- Flutter kick action on wall
- Freestyle arm action
- Can coordinate arm and leg motions
- Enter water jumping independently
- Submerges face
- Holds breath under water
- Basic treading water (keeps head above)
- Floats w/ assistance on front
- Glides/moves on front w/ assistance
- Flutter kick action w/ glide
- Backstroke arm action
- Paddles independently (forward motion)

Additional Information	

## Mobility

- Wheelchair
- Walker
- No mobility assistance needed

Additional Information	

## Behavior Management

Please list any behavioral management techniques used at home or school which eliminate or reduce negative behaviors:	

## Hobbies/Interests

Please identify any activities, games and hobbies that your child enjoys	

## PROGRAM GOALS/OUTCOMES

What would you like your child to have accomplished by the end of this program?	
Physically	
Swim skills	
Socially	

## ADDITIONAL MEDICAL INFORMATION

In the event of an emergency and a parent/ guardian is not available, your designated physician, hospital or clinic will be contacted for emergency management/transportation. Parents have the obligation to disclose significant, medical, physical or behavioral issues at the time of the child's registration and on an ongoing basis. Due to the large group format of our program, we are unable to provide one-to-one care for any child except on an intermittent basis, such as injuries, immediate disciplinary issues and certain personal care needs customarily provided to other children.

*List any special problems that your child may have, such as physical limitations, emotional or behavioral issues, allergies, existing illness, previous serious illness, injuries during the past 12 months, any medication prescribed for long-term continuous use, and any other information that the staff should be aware of:*

Other	

## PARENT/GUARDIAN ACKNOWLEDGEMENTS

**Permission for Transportation:** I grant program staff and contracted bus service to transport my child to and from the program site for field trips and other planned events. I understand that reasonable precautions will be taken to ensure the safety and health of my child.

**Medical Waiver:** In the event that my child requires emergency medical treatment and I cannot be reached, I hereby authorize the program staff to make arrangements to transport my child to the nearest hospital/emergency medical facility and secure any and all necessary medical care for my child. I give consent for necessary emergency treatment when my child is in the care of my designated physician, hospital, or clinic.

**Assumption of Risk and Liability Waiver:** In order to participate in the adaptive programs and to engage in all activities related to adaptive programs, as the parent/guardian of \_\_\_\_\_ I hereby agree that my participating child will ASSUME ALL RISKS associated with adaptive programs; RELEASE AND HOLD HARMLESS Provo City Corporation, Provo City Parks and Recreation, and any of their employees, agents, representatives, instructors, and volunteers, from any liability that may arise in connection with my child's participation in adaptive programs; I agree that the terms hereof shall serve as an ASSUMPTION OF RISK, WAIVER, RELEASE AND INDEMNITY IS HELD VOID, the remainder shall continue in full force and effect.

**Waiver for Photo/Video Release:** I give my consent for any photos or videos taken of my child involved in adaptive programs to be used for Provo Parks and Recreation promotions or display.

**Refund/Cancellation Policy:** No refunds after the start of the class.

Parent/Guardian

Signature: \_\_\_\_\_

Date: : \_\_\_\_\_