



Dear Parent/Guardian

I would like to take this opportunity to thank you for taking the time to make a booking or enquiry with 'My' Activities.

'My' Activities is a local company ran by dedicated and professional instructors, who strive to give children the opportunity to participate in a range of different activities.

The pack contains important information for both parents and children regarding our activity camps. Enclosed is a price guide, schedule of activities, Q and A's, activities offered and all relevant forms. All forms are required to be completed and returned to our staff by the first day of camp.

If you require any more information, please do not hesitate to call me on 07971 338808 or email markstyles@myactivities.co.uk.

Yours Sincerely



Mark Styles
My Activities - Director/Owner



Camp Overview

My Activities currently run activity camps during the school holidays at Allesley Hall Primary School, Winsford Ave, CV5 9NG, Coventry.

Activity Camp (9am-3.30pm)

At our Activity Camps, children will participate in a wide range of Sports, Outdoor Adventure, Team Games, The Arts, Indoor Games, and many different Special Events.

Each day the children will rotate around 6 different activities, all activities are ran by our experienced and DBS checked instructors. Children will be separated into groups of similar ages and the activities are suited to that group.

Cost

My Activities fees £15 per day per child.

What to Wear?

Children should wear old clothes and footwear suitable for participating in sports and outdoor Activities. A coat will be required in the winter and a change of clothing is also advised.

What to bring?

- My Activities recommends that each child brings along a large healthy lunch and at least one snack.
- A labelled water bottle
- Sun cream and hats on Sunny days

How can I check that my child is O.K?

Our head instructor will have a contact number that he/she can be reached on throughout the day and will be more than happy to receive any type of phone calls from parents.

What activities will my child participate in?

Each age group has a program designed around enjoyment and capability level. If a group requests to participate in a particular activity or miss an activity are instructors will do their best to help.

What do we do upon arrival?

All children will be signed in by their group leader, this leader will work closely with your child throughout their time with us.

When do I pay?

Payment is required before children attend club and can be paid via BACS or cash at the start of each day.



My Activities

Activities List



<u>Sports</u>
American Football
Athletics
Badminton
Baseball
Basketball
Bench ball
Boulder Ball
Crab Football
Crazy Soccer
Cricket
Croquet
Dodgeball
Football
French Bowls
Frisbee Golf
Golf
Group Skittles
Hand Cricket
Handball
Hockey
Hockey (Uni-Hoc)
Hoop Ball
Kickball
Lacrosse
Lineball
Netball
Para-Olympics - Goal Ball
Pillow Ball
Rounders
Rugby (Tag)
Tennis
Ultimate Frisbee
Volleyball

<u>Outdoor Adventure</u>
Alphabet Scavenger Hunt
Camp Fire Games
Climbing Games
Hide and Seek
Lava
Obstacle Course
Orienteering
Outdoor Arts and Crafts
Scavenger Hunt
Spiders Web
The Maze
Tight Rope
Treasure Chest Hunt
Tree Trunk Challenge
Zombie Attack

<u>Team Games</u>
Circle Games
Balloon Games
Parachute Games
Problem Solving
Team Challenge
Trust Games

<u>Special Events</u>
Beach Games
Bouncy Castle
Britain's Got Talent
Bungee Run
Capture the Flag
Cooking
Crazy Golf
Crazy Races
Dragons Den
Egg Drop
Great Egg Drop
Indoor Sports Tournament
Quiz
Roller Racing
Show Time
Space Hoppers
Sports Circuit
Sports Tournament
Sumo Suits
Traditional Sports Day
Wacky Water Relays

<u>The Arts</u>
Arts and Crafts
Cheerleading
Circus Skills
Dance
Gymnastics
Theatre Games
Theatre Games

<u>Indoor Games</u>
Giant Board Games
Animation
Knex
Moviemaking
Music Video Making
Table Games





Typical Daily Timetable			
	<u>Cubs</u>	<u>Cheetahs</u>	<u>Lions</u>
9am	Registration and Free Play		
9.30am	Dodgeball	Bungee Run	Circus Skills
10.15am	Circus Skills	Dodgeball	Bungee Run
10.45am	Snack		
11.00am	Bungee Run	Circus Skills	Dodgeball
12.00pm	Lunch		
12.30pm	Free Play		
1.00pm	Giant Board Games	Scavenger Hunt	Tennis
1.45pm	Tennis	Giant Board Games	Scavenger Hunt
2.30pm	Scavenger Hunt	Tennis	Giant Board Games
3.30pm	Home Time		



BEHAVIOUR SANCTIONS

If a child's behaviour is deemed unacceptable by a My Activities instructor, the following action will be taken.

1st Incident	The child will be spoken to by the instructor on a one-to-one basis and their behaviour will be discussed. The instructor will explain why their behaviour was unacceptable and warned about future behaviour.
2nd Incident	The Child will be removed from the session and asked to sit out for up to 5 minutes. After this 'time-out' the child and instructor will discuss with the child why their behaviour was unacceptable.
3rd Incident Or Major Incident	The child will be sent to the head instructor who will sit down with the child and discuss their behaviour. The child will be asked if they wish to continue at camp. If the child agrees that they wish to remain at camp, then they will agree to uphold their My Activities policy or parents will be asked to collect them.
4th Incident	The child will be removed from their activities and parents will be informed to collect their child immediately.



EQUAL OPPORTUNITIES POLICY

SAMPLE EQUALITY AND DIVERSITY POLICY AND PROCEDURES

This policy applies to all staff, volunteers, management committee members, users, and the public

1 COMMITMENT-Equality and diversity are central to the work of *My Activities*

My Activities will treat all people with dignity and respect, valuing the diversity of all. It will promote equality of opportunity and diversity. It will eliminate all forms of discrimination on grounds of race, gender, marital status, caring responsibilities, disability, gender re-assignment, age, social class, sexual orientation, religion/ belief, irrelevant offending background, or any other factor irrelevant to the purpose in view.

It will tackle social exclusion, inequality, discrimination, and disadvantage

For this policy to be successful, it is essential that everyone is committed to and involved in its delivery. *My Activities* goal is to work towards a just society free from discrimination, harassment, and prejudice. *My Activities* aims to embed this in all its policies, procedures, day-to-day practices, and external relationships.

2 AIMS-*My Activities* aims to:

- Provide services that are accessible according to need
- Promote equality of opportunity and diversity in volunteering, employment, and development
- Create effective partnerships with all parts of our community.

3 OBJECTIVES -*My Activities* objective is to realise its standards by:

- Sustaining, regularly evaluating, and continually improving its services to ensure equality and diversity principles and best practice are embedded in our performance to meet the needs of individuals and groups.
- Working together with the community to provide accessible and relevant service provision that responds to service users' needs.
- Ensuring staff, volunteers and trustees are representative of the community served and the employment policies are fair and robust.
- Responding to volunteer's & employees' needs and encouraging their development to increase their contribution to effective service delivery.
- Recognising and valuing the differences and individual contribution that all people make to the organisation.
- Challenging discrimination.
- Providing fair resource allocation.
- Being accountable.

WHY DO WE HAVE THIS POLICY?

My Activities recognises respects and values diversity in its employees, volunteers, and service users.

The Organisation has this policy because it is a people-led organisation that must always ensure it meets the needs of the community through fair and appropriate employment and development of the people who work and volunteer for *My Activities*

5 PROCEDURES

Responsibility for Implementation

This policy covers the behaviour of all people employed or volunteering in *My Activities* or using the services and sets out the way they can expect to be treated in turn by the organisation. The overall responsibility for ensuring adherence to and implementation of this policy lies with the staff and the management committee.

Method of Implementation

My Activities intends to implement this policy by:

Ensuring that it is a condition of paid employment in the organisation.

Ensuring that Management committee, volunteers and users are made aware, understand, agree with, and are willing to implement, this policy. All staff and volunteers will be given a copy of this policy as part of their induction.

Actively encouraging staff, management committee and volunteers to participate in anti-discriminatory training and making time and resources available for such training.

Monitoring the services, publicity and events provided by the organisation, to ensure that they are accessible to all sections of the population and do not discriminate and taking active steps to ensure that participation is representative.

Monitoring and Reviewing

My Activities has declared its commitment to establishing, developing, implementing, and reviewing a policy of equality of opportunity. Effective record keeping and monitoring, and acting on information gathered, are essential to measure effectiveness and plan progress. The management committee will review the policy annually.



Child protection policy

My Activities fully recognises its responsibilities for child protection.

Our policy applies to all staff, and volunteers working with children for My Activities. There are five main elements to our policy:

- Ensuring we practice safe recruitment in checking the suitability of staff and volunteers to work with children.
- Raising awareness of child protection issues and equipping children with the skills needed to keep them safe.
- Developing and then implementing procedures for identifying and reporting cases, or suspected cases, of abuse.
- Supporting children who have been abused in accordance with his/her agreed child protection plan.
- Establishing a safe environment in which children can learn and develop.

We recognise that because of the day-to-day contact with children, staff are well placed to observe the outward signs of abuse. My Activities will therefore:

- Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to.
- Ensure children know that there are adults in My Activities whom they can approach if they are worried.

We will follow the procedures set out by the Local Safeguarding Children Board and take account of guidance issued by the Department for Education and Skills to:

- Ensure we have a designated senior person for child protection who has received appropriate training and support for this role.
- Ensure every member of staff (including temporary and volunteers) and governing body knows the name of the designated senior person responsible for child protection and their role.
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the designated senior person responsible for child protection.
- Keep written records of concerns about children, even where there is no need to refer the matter immediately.
- Ensure all records are kept securely, and in locked locations.
- Develop and then follow procedures where an allegation is made against a member of staff or volunteer.
- Ensure safe recruitment practices are always followed.

We recognise that children who are abused or witness violence may find it difficult to develop a sense of self-worth. They may feel helplessness, humiliation, and some sense of blame. When at My Activities their behaviour may be challenging and defiant or they may be withdrawn. My Activities will endeavour to support the child through:

- The behaviour policy which is aimed at supporting vulnerable children in the activities. My Activities will ensure that the children knows that some behaviour is unacceptable, but they are valued and not to be blamed for any abuse which has occurred.
- Liaison with other agencies that support the children such as social services, Child and Adult Mental Health Service, education welfare service and educational psychology service.
- Ensuring that, where a pupil on the child protection register leaves, their information is kept confidential



Children's Registration Form

Location of Camp.....

Dates of Camp

Dates:

TOTAL OF DAYS REQUIRED:

Child's Information

Name of Child..... Date of Birth.....

Address.....

.....Post Code.....

School Attended.....

Medical Details we need to be aware of.....

Parents Information

Name of Parent.....

Contact Numbers

Mobile.....

Home.....

Work.....

Email.....

For our market research: how did you hear about My

Activities.....

I acknowledge and accept that 'My' Activities and the organisers providing the facility are not under any liability whatsoever in respect of personal loss or damage caused whilst my child is in attendance of the camp. By returning this form I give permission for my son/daughter to take part in the course and I agree to My Activities terms and conditions

Signature.....Print.....Date.....

Please return to: My Activities, 18 Castle Road, Nuneaton, CV10 0EN



MEDICAL FORM

Child's Name: _____ Date of Birth _____

Home Address: Street Address City, County, Post Code-

Parent/Carer with legal custody to be contacted in case of illness or injury:

Relationship _____

Name: _____ to Camper: _____

Preferred Telephone: 1) _____ 2) _____

Email: _____

Home Address: _____

(If different from above)

Second parent/guardian or another emergency contact:

Address _____

Relationship to child: _____ Telephones: 1) _____ 2) _____

Additional contact in event parent(s)/guardian(s) cannot be reached:

Relationship: _____

Name: _____ Telephones: 1) _____ 2) _____

General Health History: Check "Yes" or "No" for each statement. Explain "Yes" answers below.

Has/does the child:

1. Ever been hospitalized? Yes No

(Details).....

2. Ever had surgery? Yes No

(Details)..... 3. Had fainting or dizziness? Yes No

No (Details).....

4. Have recurrent/chronic illnesses? Yes No

(Details).....

5. Had a recent injury? Yes No

(Details).....

6. Had asthma/wheezing/shortness of breath? Yes No

(Details).....

7. Have diabetes? Yes No

(Details).....

8. History of fainting? Yes No

(Details).....

9. Passed out/had chest pain during exercise? Yes No

(Details).....

10. Ever had back/joint problems Yes No

(Details).....

12. Have any skin problems? Yes No

(Details).....

12. Have problems with diarrhoea/wetting themselves? Yes No

(Details).....

13. Wear glasses, contacts, or protective eyewear? Yes No

Mental, Emotional, and Social Health: Check "Yes" or "No" for each statement.

Has the camper:



Ever been treated for attention deficit disorder (ADD) or attention deficit/hyperactivity disorder (AD/HD)? Yes No

(Details) _____

2. Ever been treated for emotional or behavioural difficulties or an eating disorder?

Yes No

(Details) _____

3. During the past 12 months, seen a professional to address mental/emotional health concerns?

Yes No

(Details) _____

4. Had a significant life event that continues to affect the camper's life

Yes No

(Details) _____

Restrictions:

I have reviewed the program and activities of the camp and feel the camper can participate without restrictions.

I have reviewed the program and activities of the camp and feel the camper can participate with the following restrictions or adaptations. *(Please describe below.)*

Diet, Nutrition: This child eats a regular diet. This child eats a regular vegetarian diet.

This camper has special food needs. *(Please describe below.)*

Allergies:

No known allergies. This camper is allergic to: Food Medicine

the environment (insect stings, hay fever, etc.) Other

(Please describe below what the camper is allergic to and the reaction seen.)

Medication:

This camper will not take any daily medications while attending camp.

This camper will take the following daily medication(s) while at camp: _____

Doctors Information:

Name of child's primary doctor(s): _____ Phone _____

Address _____

What Have We Forgotten to Ask? *Please provide in the space below any additional information about the camper's health that you think important or that may affect the camper's ability to fully participate in the camp program. Attach additional information if needed.*

Signature of Custodial Relationship

Parent/Guardian

_____ Date _____



Photographs

During your child's time with My Activities the staff may wish to take photographs or video record the children.

Please complete the form below

I give permission for my child to have photographs taken for the following reasons:

Reason	Yes	No
For wall displays		
For advertising (Website, Posters and Leaflets)		
Children's activities (Arts and Crafts)		

Movie

A popular session and a nice way for the children to relax at the end of the week we will be showing a movie.

Sometimes such films may be a PG certificate; therefore, we would like to seek your permission before allowing your child to view this material.

.....(Parent/Carer Name) gives permission/do not give permission for my child to view a PG certificate film.

Signed.....Date.....