

MASHPEE RECREATION

SUMMER CAMP 2026

520 MAIN STREET,
MASHPEE MA 02649
508-539-1416
MASHPEEREC.COM
CAMP@MASHPEEMA.GOV



CAMP PHILOSOPHY, HISTORY AND STAFF

Our summer day camp provides a safe environment for children to learn valuable skills and make new friends through programs that are challenging, educational and fun. Through games, sports, field trips, nature hikes, special events, swimming, arts & crafts and water activities campers are given the opportunity to learn, explore and develop the sense of wonder and adventure that create memories for a lifetime. **We comply with the regulations set by the Massachusetts Department of Public Health and are permitted by the Mashpee Board of Health.**

Mashpee Recreation Summer Camp has been in existence for over 20 years. Each counselor is certified in CPR and First Aid and must successfully pass a comprehensive background, CORI and SORI checks prior to employment. In addition, Mashpee Recreation has certified lifeguards on staff during water activity days to ensure the safety of campers.

How to Register: Registrations are accepted online at www.mashpeerec.com or in our office located at 520 Main Street, Mashpee. Registrations must be complete and must include the \$50/week deposit.

***All required paperwork including medical/ immunizations records must be received by Friday, May 15th to ensure your registration spot. (NO EXCEPTIONS)**

Cost for campers (Gr. 1 - 6):

\$195/week standard hours 8:30am-4:30pm

\$45/week extended hours 7:30am-5:30pm and must be booked separately per week.

Cost for campers (Gr. 7-8):

\$230/week standard hours 8:30am-4:30pm

\$45 /week extended hours 7:30am-5:30pm and must be booked separately per week.

Cost for Counselor in Training (Gr. 8-9)

There is no cost for the counselor in training program. Applications are required and accepted on a first-come-first-serve basis. Please see website mashpeerec.com for detailed information and registration requirements.

Deposit of \$50 (non-refundable) is required for each week your child is registered and will be applied towards the remaining balance. (CIT program is not included).

Refunds - are given only if a child's camp spot can be filled by another child from the waitlist. Please make every attempt to give us as much notice as possible if you plan to cancel a week.

Credit card payment reminder:

Credit Cards on file must be Valid upon registration and is NOT considered an "autopay" unless otherwise indicated on the auto pay form included in this packet. If payment has not been received the card provided will be charged.

Weather/ Cancellations

Camp will meet every day unless a weather emergency is called. Please check your email, call our office or logon to our website www.mashpeerec.com to check for cancellations.

IMPORTANT INFO

What will my child need to bring to camp ?

- A bathing suit and towel every day
- A "kid safe" brand of sunscreen
- Sneakers must be worn daily. (Sandals, flip-flops, or crocs will be allowed only on beach.)
- An extra set of clothing
- Baseball hat or bucket hat is encouraged for sun coverage
- Please mark clothing with child's name

What shouldn't my child bring to camp?

- Cell phones ***Mobile devices used ONLY as medical management tools will be supported at camp**
- Toys
- Trading cards
- Weapons/Knives/Squirt Guns
- Electronics (games, video recorders/players, ipad/ipods etc.)

What Medical/Health forms are required ?

- A copy of their physical examination and immunization record within the last 18 months signed by a health care provider
- A written health history which includes any allergies, required medications and any health conditions which may affect your child's activities while attending camp.
- Signed Individual Health Plan from your Pediatrician should your child require any prescription medications, EPI Pen, inhaler, etc. while at camp.
- All medical/ health forms along with required paperwork is due by May 15th, 2026. You can email completed forms to camp@mashpeema.gov or drop off at Mashpee Recreation office during business hours.

Is lunch or snacks provided ?

No, All children will need to bring a packed lunch, snacks and drinks each day. Every Friday we have a cookout. Children will not need to bring a LUNCH on Fridays but will still need 2 snacks and a water bottle.

What are the standard hours for camp?

8:30 am-4:30 pm

Do you offer extended day hours ?

Extended day hours are offered from 7:30am-5:30pm for an additional fee of \$45 per week, this covers both before and after care. Late pick up/drop off fees will be applied at \$10 for the first 5 minutes and \$1 per minute thereafter.

Is financial aid available ?

Limited financial aid may be available for Mashpee Residents only. Please follow the link for application and instructions on steps to apply. https://mashpeema.myrec.com/forms/6145_financial_aid_form.pdf

Other important information

- All field trips are included in the cost
- Swimming 2 times per week (weather permitting)
- Deposits and payments are **NON-REFUNDABLE.**

Communication

All communication will be through our website, mashpeerec.com. Please make sure you have an updated email and primary cell phone number on your MyRec account to receive communication via email and text.

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PARTICIPANT INFORMATION

Child's Name _____

Date of Birth ____ / ____ / ____ Grade (as of 7/1/26) _____

Home Address _____

Shirt Size: _____

Please check which camp program your child will participate in for summer 2026.
(Based on grade entering in Fall 2026)

- ☐ VOYAGER-Entering Grades 1+2
- ☐ ADVENTURER Entering Grades 3+4
- ☐ EXPLORER Entering Grades 5+6
- ☐ NAVIGATOR Entering Grades 7+8
- ☐ COUNSELOR IN TRAINING Entering Grades 8+9

Attach a Color
Photo Here

Weeks attending: ☐1 ☐2 ☐3 ☐4 ☐5 ☐6 ☐7 ☐8

Prescribed Medications/ Allergies _____

Diagnoses/ Conditions _____

Required medications to be taken to camp ☐ Yes ☐ No
(i.e. Epi Pen, Inhaler, ECT)

If yes, what medications, ECT _____

Please describe any other concerns or considerations that you would like us to know to help make your child more successful at camp. _____

Please check the following that applies to your child: (This information will determine if we need additional documentation to best accommodate your child.)

- ☐ Has IEP, 504, or behavior plan at school. ☐ Current Custody Agreements

AUTHORIZATION FOR EMERGENCY CARE & HOLD HARMLESS CLAUSE

Authorization for emergency medical care : I authorize staff in the Mashpee recreation summer camp program who are trained in the basics of first aid and cpr, to give my child _____ first aid and/or cpr when appropriate. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. However, If I cannot be reached, I hereby authorize the program to transport my child to the nearest medical care facility and/or to _____ hospital and to secure Necessary medical treatment for my child.

Health insurance company _____ policy # _____ Physician Name _____

Parent / Guardian Signature: _____ Date: _____ Physician number _____

HOLD HARMLESS CLAUSE: I, the undersigned parent/guardian or participant, do hereby consent to my/their participation in voluntary athletic, recreation, or community education programs of the Town/City, or Public School of Mashpee. I also agree to forever release the Town/City of Mashpee, the School Committee, and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic, recreation, or community education programs of the Town/City or Public Schools ("the Releases") from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child's participation in the Town or Public School of Mashpee voluntary athletic, recreation, or community education programs. I also promise, to indemnify, defend, and hold harmless the Releases against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my participation, or my child's participation in the Town/City or Public School of Mashpee voluntary athletic, recreation, or community education programs. I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my participation, or my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this form, I affirm that I have decided to allow my participation, or my child's participation in the Town/City or Public School's athletic, recreation, or community education programs with full knowledge that the Releases will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary Town/City or Public School athletic, recreation, or community education programs.

Name (Print) : _____

Signature: _____ Date _____

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PARENT/ GUARDIAN INFORMATION

Parent Name 1 _____

Date of Birth 1 ____ / ____ / ____ Primary Phone 1 _____

Address (If different than child) _____

Primary Email _____ Secondary Phone 1 _____

Parent Name 2 _____

Date of Birth 2 ____ / ____ / ____ Primary Phone 2 _____

Address (If different than child) _____

Primary Email 2 _____ Secondary Phone 2 _____

MEDICAL & EMERGENCY INFORMATION

In the event of an emergency, please list the name, numbers, and the relationship to your child of individuals you would like us to contact. List in the order that you would like us to call. **ONLY THOSE LISTED ON THIS FORM WILL BE AUTHORIZED TO PICK UP YOUR CHILD IN YOUR ABSENCE WITHOUT PRIOR WRITTEN NOTIFICATION FROM YOU. A valid I.D. will be required at pick up.**

Name	Phone	Address	Relationship to Child

The Mashpee Recreation Department is committed to providing a safe and accessible program for all children. Persons with disabilities, limitations or conditions that require special accommodations are welcome to participate in all programs that are compatible with their interests and abilities. Every effort will be made to accommodate participants however, the availability of the Mashpee Recreation Summer Camp Program's resources may limit one on one support. It is the responsibility of parents and guardians to notify us of any needs and/or special modifications that may be necessary for their child's safety, success and well being.

***All requests for ADA accommodations must be discussed in advance with both the Recreation Director and Summer Camp Program Supervisor.**

Will your child require one on one support? ☐ Yes ☐ No Explain: _____

Does your child have any condition (e.g. mental, physical, emotional or medical) which might affect their health and well-being, the wellbeing of others, or affect their ability to engage in any activities? (If so, please describe including any adaptations or modifications that may be necessary)

If your child has an IEP, do we have your permission to obtain a copy and/or discuss this information with the school ?
Please Describe _____

Please list in detail any allergies your child has: _____

Does your child has an epi pen or inhaler? _____

(If yes, you and your Physician will need to supply one along with an Individual Health Plan BEFORE starting camp)

Please check all medication that may be given to your child if needed

☐ Tylenol ☐ Advil ☐ Benadryl ☐ Insect Sting Wipes ☐ External Ointment (i.e. Neosporin) ☐ Antacid (i.e. Tums)

Initial _____

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RULES & POLICIES

Age Range and Behavior Expectations

The Mashpee Recreation Summer Camp Program is open to children that have completed Kindergarten through 9th Grade. Your child is expected to participate in all activities and conduct themselves in an appropriate manner **at all times**. The focus of this program is ACTIVE recreation and there will be minimal time spent indoors. Participants who are unable to meet the following guidelines will be removed from the program without refund. All program participants MUST:

- Meet all prerequisites for the program and follow policies outlined on this registration form.
- Cooperate with other participants/staff and participate in group activities
- Respect others and maintain self-control, respect our facilities and equipment (Listening, following directions, keep hands and feet to self and use appropriate language at all times)
- Behave in an appropriate and respectful manner and stay with their group at all times
- Be able to maintain personal care without the support of the Rec. Program Staff (unless previously discussed with the Recreation Director and Program Coordinator)

Initial _____

ATTENDANCE & ILLNESS POLICY

Children should be kept home unless well enough to participate in the days activities. Parents will be notified to pick up their child if the child is unable to participate in scheduled activities due to illness. Before returning to camp children must be:

- Fever: (100 degrees or higher) Fever free for 24 hours without the aid of medication
- Antibiotics: Must be on antibiotics for a full 24 hour dose
- Vomiting/Diarrhea: Must be symptom free for 24 hours
- Cold symptoms: Must be free of yellow/green runny nose, nasal discharge, fever and persistent cough.

Initial _____

PAYMENT & LATE PICK UP POLICY

Payments

All payments are **FINAL and NON REFUNDABLE**. Issues with extenuating circumstances will be referred to the Recreation Director for review. Please notify us in advance if your child will be late or picked up early.

Initial _____

Late Pickup Policy

The Recreation Summer Camp program ends at 4:30 pm. Extended Care ends at 5:30 pm.

Prior registration is required for the extended care program. Please ensure that the authorized person picking up your child does so promptly at the specified time and has proper I.D. If for any reason your child is not picked up on time, you WILL be charged a late fee.

All late pickup fees must be paid in full before your child may return to the program

Repeated late pickups may result in removal from the program

I understand The Mashpee Recreation Summer Camp Programs late pick up policy and I agree to pick up my child at the scheduled time and/or pay any applicable fees according to the charges listed below.

1st Offense: Within 15 minutes - Written Warning
More than 15 minutes late - \$10/first minutes and \$1/minute

Subsequent Offense:
Immediate \$10 and \$1 per minute thereafter

Initial _____

FIELD TRIPS

All field trips are included in the cost of registration. Children ARE NOT allowed to bring "spending" money with them to camp under any circumstance. Attendance is suggested on field trip days. Transportation will be provided by a licensed transportation company, Mashpee Recreation Van, or via supervised walking. I agree to allow my child to participate in offsite activities (ex: field trips) and be transported as necessary. Field trips may include the public library, police/fire station, South Cape Beach, John's Pond, Sandwich Boardwalk, Goodwill Park and others.

Initial _____

FOOD & BEVERAGE POLICIES

Please send your child to camp each day with 1 morning snack, 1 afternoon snack, a lunch, drink and bottled water. Lunch "Cook Out" will be provided once a week (Fridays). Children will still need snacks and water on this day.

If your child has a food allergy, please specify: _____

Initial _____

PUBLICITY WAIVER

Mashpee Recreation may take pictures/videos of your children for advertising purposes. We will never post your child's name or identifying information along with these photos/videos. I give my consent for Mashpee Recreation and the Town of Mashpee to use and publish photos or videos of my child in print, on their website or social media outlets. I understand that no monetary or other compensation will be given for use of these pictures/videos. ☐ Yes ☐ No

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SWIMMING POLICIES

In accordance with Christian's Law (MLG Ch. 111, 127A ½), we will categorize your Child's swimming ability to Identify "Non-Swimmers" and/or "At-Risk-Swimmers" to ensure everyone's safety. In addition, Coast Guard approved PFD's. (Personal Flotation Devices "Lifejackets") may be used by any program participant and are available via our program if desired. Our summer camp program employs it's very own certified lifeguard (s) to ensure the safety of all our campers. *PLEASE NOTE: Mashpee Town Beaches DO NOT allow other flotation devices (water wings, noodle, etc.) other than Coast Guard approved devices.

Initial _____

SUNBLOCK POLICY

We require ALL children to wear sunscreen rates SPF30 or higher. Sunscreen should be applied in the morning before your child arrives. In addition, sunscreen should be re-applied each afternoon with a reminder and minimal assistance from staff. Please send your child with their own bottle of sunscreen. (label with your child's name). I have read the Sunscreen policy and give permission to Mashpee Recreation Summer camp staff to help reapply sunscreen to my child if necessary.

Initial _____

PERSONAL PROPERTY POLICY

We make every reasonable effort to safeguard everyone's personal belongings at camp; however, families should be aware that any property sent to camp may not return in the same condition or at all. We are not responsible for lost, stolen, or damaged items.

PERSONAL BELONGINGS NOT ALLOWED AT CAMP:

- Cell phone/ Smart Watches
- Toys
- Trading cards
- Weapons/Knives/Squirt Guns
- Electronics (games, video recorders/players, ipad/ipods etc.)

**Mobile/smart watch devices used ONLY as medical management tools will be supported at camp. Please contact Mashpee Recreation for exemption*

I have read the Personal Property Policy and fully understand Mashpee Recreation is not responsible for lost, stolen, or damaged items of my child's personal belongings. Staff will make every effort to place any belongings in the lost and found that are left at camp.

Initial _____

PG MOVIE PERMISSION

I give my permission for my child to view PG movies

☐ Yes ☐ No

Initial _____

FINAL AGREEMENT

I have provided Mashpee Recreation with a current copy of my child's physical and immunization records and current photograph of my child for identification purposes only.

Initial _____

PAYMENT INFORMATION & AUTOMATIC PAYMENTS

Mashpee Recreation requires all registrants leave a credit card on file. Camp balances are DUE June 15, 2026 for weeks 1 - 5 and July 20, 2026 for weeks 6 - 8. Children will not be on the roster and will not be allowed to attend camp if payment is not acquired. If you have any questions please call the Recreation office at 508-539-1416. Any unpaid balances will be charged to the required credit card on file. This is NOT an enrollment form for automatic deductions. For Auto pay, please see Autopay form included in this packet. Please see listed payment options below, and please mark payment method along with credit card information.

☐ I am applying for financial aid

☐ I have a voucher or other subsidy

Payment method (Please select one below)

☐ Payment in full

☐ Deposit Only (\$50.00 per week)

☐ Please enroll me in the automatic payment. (Payments will be deducted on 6/15/26 for weeks 1-5, and 7/20/26 for weeks 6-8.

Please use my card on file to schedule payments on the due dates below:

Name on Card _____

Billing Address _____

MC/Visa/ Discover: # _____ EXP ____/____/ CVV _____

Print Name: _____

Signature: _____

**Payment plans can start as soon as registration takes place. balance must be paid in full by session due dates or registration cancellation could take place.*