

**LEE COUNTY SCHOOLS
CAMP CHECK OFF LIST**

All forms and information should be complete prior to submitting to the Assistant Superintendent of Auxiliary Services. For proof of the required special event insurance please include a statement with the following: A statement as to what agency you plan to use; the date of your contact with the agency to advise them of the upcoming camp; and the date when insurance will be obtained. Complete camp packet due no less than 30 days prior to the event.

Camp: _____ Date(s) of Camp: _____
Camp Director: _____ School: _____

_____ Camp Finance Form signed by appropriate school personnel

_____ Special Event Insurance Statement

_____ Camp Information: Anticipated Number of Participants
Number of Staff
Schedule for Camp

_____ Fundraiser Request Form signed by principal (If there is no anticipated cost or income please explain how the camp will be funded on the fundraiser form. Fundraisers must be approved by the Board of Education prior to any advertisement of the camp.)

_____ Facility Use Form signed by the principal

_____ Sports Camps – Copy of Volunteer Coach Agreements completed
Academic Camps – Copy of Consultant Agreements completed

_____ Copy of camp application

_____ Copy of Medical information included

_____ Copy of Waiver and Release of Liability included complete with appropriate camp Information. Bullet #2 describes activities unique to the proposed camp.

_____ Trained personnel on campus to administer EpiPen and/or diabetes care to any camper with an identified health condition.
Name of person: _____ Phone: _____

Person submitting the form to the assistant superintendent of auxiliary services:

Signature

Date

Regulation Code: 3620-R Extracurricular Activities and Student Organizations

Lee County Schools (LCS) supports camps that are beneficial to the students. Camps can be centrally run such as academic camp or school based such as a sports camp. Documentation for an academic camp must be submitted to the appropriate principal or director for approval with a copy to the school treasurer. Documentation for a sport camp must be submitted to the principal and athletic director for approval with a copy to the school treasurer. A written proposal must be submitted for approval at least 30 days in advance before a camp can be scheduled. Approval is required before any advertisement is allowed. The proposal must include the following:

1. A detailed accounting of the camp finances to include projected revenues and expenses. All camp workers' pay rates are determined by the principal and County Athletic Director before the camp begins. All rates of pay must have the Superintendent's approval prior to the start date.
2. Proof of liability insurance consistent with coverage (according to LCS Board Policy).
3. A calendar of events and list of facilities involved in the camp, including the anticipated number of campers and staff members who will work the camp,
4. A Fundraiser Request form must be submitted with all supporting documentation attached.
5. A Facility Use Application form must be submitted to the principal, who will in turn submit to appropriate Central Office staff for approval, along with applicable fees.
6. For Sports Camps-Volunteer Coach Agreements for each camp worker.
7. For Academic Camps-Consultant Agreements for each camp worker.

Camps that are run by LCS employees are for the purpose of enriching a child's abilities and providing extra opportunities for participation to enhance the child's skill level. Camps should be fun as well as educational.

1. Criteria for camps. Before a camp can begin on school grounds a determination needs to be made as to who is operating the camp and whom the proceeds will benefit.

A. Outside camps using LCS facilities. If a camp is run by an external group and the money is handled by an external group, the camp director must submit a "Facility Use Application" for approval from the Assistant Superintendent of Auxiliary Services before the camp can begin. Facility and custodial fees may apply. The camp director is responsible for all payroll taxes, sales tax and liable for proper money handling procedures. Proof of insurance would also be required per LCS policy 5030 Community Use of Facilities. All user groups, except school sponsored groups, must furnish a certificate of insurance for general liability coverage with a total limit coverage of \$1,000,000 for each claim made.

B. LCS sponsored camps. If a camp is run by LCS employees, on school grounds, and LCS or other students attend, the camp is considered to be part of LCS. In this case:

- All camps must obtain a "special events" type of insurance (Camp & Conference Accident Insurance) for camps, campers and facility use applications
- All money should be receipted and deposited at the school level or at the central office level.
- The proceeds are to be used to support a school activity or central office program. On the fundraising form, a purpose for the proceeds should be clearly stated.
- The principal and Assistant Superintendent for Auxiliary Services reviews and approves the fundraising form and sets all pay rates for the camp staff subject to approval by the Superintendent. This will prevent the camp director from setting his own salary.
- The principal approves or denies all requests for camps.

2. Camp Procedures

A. Money handling:

I. Participant fees should be determined by how much supplies, equipment and salaries will cost. A camp **CANNOT** run into a negative balance situation. Careful planning is vital. If funds remain after all expenses and salaries are paid, then any remaining funds shall revert to the general fund of the school club or sport which sponsored the camp. If expenses exceed revenue, the sponsoring school club or sport must cover the deficit.

II. All money handling procedures are the same as for teachers during the regular school year. Contact the school treasurer for money handling procedures.

III. Receipt books will need to be issued and camp directors will need to give a receipt for all money collected. This includes: registration fees, t-shirts, supplies and any other fees.

IV. All receipts and money should be given to the school treasurer or designated central office person daily. Once all funds are received a check is issued to Lee County Schools and sent to the finance department by the treasurer within one week of the conclusion of the camp.

V. Camp expenses must be itemized, reviewed and approved by the camp sponsor, Athletic Director (if applicable), Treasurer and Principal. Please submit the approved payment form to the Central Office Accounts Payable Department for each AP expense with original invoice attached within one week of activity. Meals for employees and volunteers are not allowable expenses.

VI. Sales tax-If an item is sold and a profit is made, then LCS must collect sales tax and then pay this to the Department of Revenue. This does not include registration or camp fees; it is for items such as camp T-shirt.

B. Contracted services process

I. All camp worker's pay rates are determined by the principal or County Athletic Director. This should be clearly stated on the

Volunteer Coach Agreement before the camp begins. All pay • rates must have the Superintendent's approval prior to the start date. Net proceeds from the camp go to support the program which sponsored the camp not to the camp workers.

II. Each person who works a sports camp must have an approved Volunteer Coach agreement prior to any advertisements for the camp. Each person who works an academic camp must have an approved consultant agreement prior to any advertisements for the camp. Please follow the procedures outlined for each agreement to be in compliance with Human Resources & Finance PRIOR to start dates. Additional documentation will be required to generate payment.

III. Camp leaders may be paid at a higher rate than other employees they supervise, if justified, to account for: Planning, pre-camp organization efforts, setting up before camp begins, post-camp clean-up and taking inventory.

IV. All camp workers who are to work OR who supervise children **MUST** be paid through the Central Office payroll department if they are employed by Lee County Schools. This is for the safety of the children as well as to be in compliance with the Fair Labor Standard Act (FLSA). Please include a list of the employees to be paid with the other documentation submitted and payment will be generated in the next scheduled payroll. Non-employee camp workers will be responsible for reporting their income and paying all applicable taxes. 1099's will be furnished if the amount exceeds \$600. Please submit a request for payment form for each Non-employee along with other documentation to the Accounts Payable Department within one week of the conclusion of the camp. A timesheet is required if an hourly rate of pay is used.

Flat rates of pay or hourly rates of pay may be used, not to exceed hourly rate if clearly explained by documentation.

V. Board Policies apply to camp programs.

VI. Camp directors may use current student/athletes to assist with the camps as volunteers.

- The high school athletes are **NOT** allowed to supervise the children but can assist the directors.
- The high school athletes cannot operate machinery or lift heavy objects.

3. Insurance-The school system **DOES NOT** provide Accident Insurance. This should be clearly stated to parents who sign their children up for summer camps. Each school can purchase their own accident insurance to be included in the camp fees if the school desires.

4. Scheduled Maintenance-Since camps are held during summer breaks, principals should check with the maintenance and facility planning departments prior to approving a camp. These

departments use these breaks to schedule work at schools and the site may be unsuitable for students to be around during this time period.

5. Summary Report -The Camp Supervisor/Sponsor will complete and submit to the Principal and Central Office a Summary of Fundraiser report within two weeks of the camp/fundraiser completion date.

Issued: October 22, 2002

Revised: June 6, 2005; July 31, 2008; September 8, 2009; June 30, 2010

LEE COUNTY SCHOOLS CAMP FINANCE FORM

Event: _____ School: _____ Dates of Event: _____

School: _____

Camp Director: _____ Camp fee per participant: _____

***Estimated Revenues:**

Description (include # of anticipated participants
x camp fee)

Amount of Estimated Income

Total: _____

***Estimated Expenses:** (include staff rate of pay, salary,
stipend, etc.)

Amount of Estimated Expenses

Total: _____

Donations: Please list any donations, both cash and
in-kind, and how they will be used in supporting the
camp.

Amount of Donation

Total: _____

****Expected Net Profit:** _____ (Revenue – Expenses = Net Profit)

Camp Director's Signature

School Athletic Director's Signature (Sports camp)

Principal's Signature

District Athletic Director Signature (Sports camp)

Chief Finance Officer's Signature

Assistant Superintendent of Auxiliary Services

***Revenues and Expenses are estimates**

****Expected Net income cannot be less than \$0.00. Expected Net must be positive (in the black), or the camp will be cancelled. Registration shall be completed one week (7 days) before the beginning of the camp. If the # of participants does not warrant the net to be "in the black", the camp must be cancelled.**

Adopted: 07/26/2010

Revised: 07/19/2021

Camp Information Sheet

Anticipated Number of Participants: _____

Anticipated Number of Staff: _____

Length of Camp: _____

Daily Schedule: _____

Other information: _____



Request to Conduct Fundraiser (All requests – Internal & External)

All Fund Raiser Requests must be submitted to the Central Office (Auxiliary Services department) by the end of the month prior to the next board meeting. However, advertising and publicizing the event should not take place until the event is approved

School _____ Organization/Club _____

Sponsor _____

All items (1-11) must be completed for the Fundraiser to be considered for approval.

1) Fundraiser/project description _____

2) Vendor _____

3) Unsold items can be returned to vendor for credit. ☐ yes ☐ no ☐ not applicable

4) Person responsible for receipting and transferring funds to office _____

5) Does this event involve community sales to anyone other than students and staff? ☐ yes ☐ no
Community sales must have Board of Education approval

6) Dates of fundraiser: From _____ To _____

7) Purchase cost per item \$ _____ Selling price per item \$ _____

8) Estimated profits for total fundraiser/project \$ _____

9) Profits to be used for _____

10) What is the projected cost of this activity? _____

11) Will fundraiser totally fund the activity? ☐ yes ☐ no If no, source of additional funds _____

The following conditions apply to all Fundraisers:

- (A) Receipts must be turned in to the office daily.
- (B) The organization/club must turn in collections sufficient to cover the complete costs of the fundraiser before vendor is paid.
- (C) Fundraiser/project must end on date listed unless specific permission is granted by the **Principal and Assistant Superintendent** to extend the fundraiser/project.
- (D) Sponsor will file with Principal and Central Office a "Summary of Fundraiser" report within two weeks of fundraiser completion date.

Requested _____
Sponsor of Organization/Club _____ Date _____

Approved _____
Principal _____ Date _____

Assistant Superintendent Auxiliary Services _____ Date _____

Chief Finance Officer _____ Date _____

To Be Completed by Central Office

BOE Approved: Yes _____ No _____ N/A _____ Date _____ Revised: 05/07/2019

FACILITY USE APPLICATION

LEE COUNTY SCHOOLS

All Facility Requests must be submitted to the Auxiliary Services Department 30 days prior to the event. No advertising until the contract is finalized.

Request Submitted by _____
 Address _____
 School Requested _____ Organization _____
 Daytime Phone Number _____ Fax Number _____
 User: LCS For Profit For Youth Profit Organization Non-Profit Non-Profit Tax ID # _____

Rental Fees: A \$25.00 non-refundable security deposit must be submitted with the application. See Fee Schedule for facility fees. There is a 3 hour minimum for each facility. Classroom space that is occupied by students during the last period of the day will not be available for use until 30 minutes after the school day ends. Rental fees do not include fees for staff. **These staff fees are \$30.00 per hour.** Payment is required before use of facility. Make checks payable to Lee County Schools. A criminal background check is required if facility requested prior to 6:00 pm on a school day. Organization is responsible for the fee. Organization will be billed for any extra staff fees above amount requested below and any damages to facilities and/or equipment.

Facility Requested:

Auditorium ☐ Auxiliary Gym
 Multipurpose Room ☐ Gym
 Cafeteria: ☐ Kitchen
☐ Dining Room
☐ Classroom
☐ Athletic Field (practice field only)
☐ Other (Specify) _____

Equipment Required:

☐ Tables/Chairs
☐ Public Address
☐ Screen
☐ Other (Specify) _____
 Availability of equipment subject to site approval. School pianos, spotlights, etc. carry an additional charge.

Exact Dates Requested:

Month _____ Day or Days _____ Year _____
 Hours: _____ to _____ (each day)

Purpose of Use:

User groups shall not prohibit attendance at any event, meeting or other function held in public school buildings or facilities or on public school grounds based upon race, religion, color national origin, handicapping condition, pregnancy or marital status. I agree to abide by the Lee County Board of Education regulations and guidelines governing use of school facilities (Appendix B). I also agree to hold the Board of Education harmless for any and all claims for damages, personal or otherwise, that may occur during this organization's use of school facilities. **I also understand and agree that failure to pay for facility use within 10 days of the date billed constitutes cancellation of the reservation.** By signing below, I certify that I am authorized to enter into this agreement with Lee County Schools, on behalf of the above noted organization.

Print Name _____ Signature _____ Date _____

For Office Use Only:

Custodian Hours: _____ CN/CTE/LCS Hours: _____ Facility Fee Waived: _____
 Custodian Fee: _____ CN/CTE/LCS Fee: _____ Facility Fee: _____
 Total Due: _____

Principal: _____ Date: _____

Superintendent's Designee: _____ Date: _____

Health Department Permits Required: Yes _____ No _____ Copy to Maintenance: _____

Revised: 08/2018

CAMP APPLICATION

Please complete the following information and return it to the camp director at least three days prior to the beginning of the camp.

Name of Camper: _____ Birthdate: _____
Grade Entering in the Fall: _____ School Attending: _____
Parent's Name: _____ Email: _____
Address: _____
Parent's Phone: _____ Cell _____ Home _____
In case of an emergency in which I cannot be reached, please contact:

Name	Phone Number	Relation to Child
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Camper's T-shirt size: Please circle: (Youth) YS YM YL (Adult) AS AM AL AXL

WAIVER STATEMENT

I hereby give my permission for the Camp staff, in case of emergency, to seek appropriate medical attention for my child if unable to contact me. **NOTICE:** Participation in sports activities involves possible risks due to the nature of the activity. The Lee County Board of Education does provide accident insurance coverage to currently enrolled Lee County School students. Each student (parent) can purchase their own additional accident insurance if desired. Participants will have to pay for any necessary medical treatment not covered by personal or school insurance. A **Release and Waiver of Liability** form is attached and must also be submitted with this application.

Signature of Parent/Legal Guardian

Date

EMERGENCY MEDICAL INFORMATION

Please indicate the following medical information and return it to the camp director at least three days prior to the beginning of the camp.

_____ My child has the following pre-existing medical conditions and/or allergies, and is taking the following medications:

_____ My child does not have any known pre-existing medical conditions and/or allergies, and is not taking any medications.

Physician: _____ Phone Number: _____

Parent/Legal Guardian Signature: _____ Date: _____

WAIVER AND RELEASE

In consideration of my child's participation in the _____ (the "Program"), I/we, _____, parent(s) or legal guardian(s) of _____, understand and agree to the following:

- My child's participation in the Program is entirely voluntary and extracurricular. There is no penalty from Lee County Schools if my child does not participate in the Program.
- The program may involve cheering, running, tumbling, stunting, and other individual and group physical activities, each of which involves at least some risk of physical injury, permanent disability, or death. I understand the risks inherent to these activities, as well as to the risks associated with my child's proximity to others engaging in those activities, and have explained those risks to my child.
- To the fullest extent permitted by law, I agree to **waive and release** any actual or potential claims on my own behalf and on behalf of my child against the Lee County Schools and its governing board, individual board members, employees, and/or agents, in both their individual and official capacities, for any injury or loss arising from or related to my child's participation in the Program. This waiver and release specifically includes any injury or loss caused in whole or part by the negligence of Lee County Schools or its governing board, employees, and/or agents.
- To the fullest extent permitted by law, I agree to **indemnify and hold harmless** the Lee County Schools and its governing board, individual board members, employees, and agents, in both their individual and official capacities, from any and all legal claims or litigation brought directly by or on behalf of me and/or my child at any time for any injury or loss arising from or related to his or her participation in the Program.
- I understand and have explained to my child that he or she must comply at all times throughout the Program with any applicable laws and regulations, as well as any safety protocols and directives from LCS representatives.
- My child is physically and mentally fit to participate safely in the Program and has completed all necessary training and safety certification requirements.
- This agreement and release are given freely and voluntarily with a full understanding of my rights and responsibilities.

Student's Name (please print): _____ Date: _____

Parent or Legal Guardian (please print): _____

Parent or Legal Guardian (please sign): _____ Date: _____