



YMCAS OF QUÉBEC DAY CAMPS COMPANION PROGRAM Request for Participation Package

Dear Families,

Thank you for your interest in the YMCA day camps! **At our camps, we strongly value inclusion.** To us this means providing spaces where everyone feels welcome and safe, and where continuous effort is made to provide accessible programming and services to all members of our communities.

Our Companion program is facilitated through inclusion. The companions work with campers who, because of different needs or diverse abilities, may need extra intellectual, emotional, or physical support. This allows campers to be well integrated into camp, giving them the opportunity to experience camp fully.

Companion Program Registration

To provide the best possible camp experience for campers with different needs and diverse abilities, we require that **the forms below be completed before registering online.** This will allow us to properly assess the needs and required/available support for each camper.

Confirmation for your camper's registration to this program will be based on the information given about their behaviour and needs; our ability to adapt our interventions and structure to your camper within the camp environment; and the resources, companions, and funding available to the YMCA day camps.

Request for Participation Package

To meet the needs of our campers, the YMCA day camps require that all families of children with different needs/diverse abilities submit a completed Request for Participation package and await confirmation from our team. **Please note that you should ONLY complete an online registration for your camper after having received confirmation of support.** With this, we will be able to ensure that we have the resources available to support your camper's needs.

For us to assess each camper's situation adequately, the two forms included in this package **must** be completed by the camper's parents/guardians and by a professional who works closely with the camper and has the capacity to assess them in a group setting (i.e. therapists, teacher/educator, etc.).

Note: *If your camper does not currently have access to a professional resource, and if your camper has not socialized with peers in the last three months, please let us know. We will follow up with you regarding how to proceed.*



YMCAS OF QUÉBEC DAY CAMPS COMPANION PROGRAM

Request for Participation Package

Please ensure that all the necessary documentation is included and the forms are filled out appropriately before submitting your **Request for Participation** package:

- **Family Authorization** form completed by the parents/guardians (see page 3);
- **Needs Assessment** form completed by camper's therapist or teacher/educator, etc. (see page 7).

The documents must be **submitted by email** to the following email address: integrationcamps@ymcaquebec.org. It is very important to ensure all mandatory fields (identified by an asterisk [*]) in the request forms have been filled in prior to submitting the documents.

Modifications to the request

Should any modifications need to be made to your camper's registration during the registration process, or over the course of the summer, please contact our team as soon as possible at integrationcamps@ymcaquebec.org to ensure that there is availability, and that your camper's needs will continue to be met.

Cancelling the request

You can choose to cancel your camper's registration at any time. **Two weeks'** notice is required to give us enough time to offer reserved spots to other families on our waiting list.

Please note:

If during the summer we encounter children with different needs/diverse abilities registered for camp who did not go through this process and we no longer have the appropriate resources to meet the campers' needs, we reserve the right to cancel the registration immediately.

All information provided will remain confidential, and will only be shared with those directly working with your camper. Once the documents have been completed, and sent, we will be in contact with you by email.

Thank you for your collaboration!





CAMPS DE JOURS DU YMCA

PROGRAMME COMPAGNONS

Family authorization form


Once the form is completed, please email it to inclusioncamps@ymcaquebec.org

*PARENT/GUARDIAN

First name _____

Family name _____

Email _____

 Phone number _____

*SUPPORT REQUIRED

YMCA day camps may include large groups, several visits to local parks, possible outings, and loud group activities. Knowing this, what form of support do you feel your camper would require to safely participate in a YMCA day camp this summer:

- Can share a companion
- Requires their own companion
- Does not require a companion

*CHILD

First name _____

Family name _____

*Gender M F X

Age (as of June 26) _____

Primary language used:

English French Other _____

Diagnosis (if applicable) _____

*Postal Code _____

LOCATION

***Where in Montréal would you like your camper to attend camp?**

Note: Your camper will only be considered for the areas you check.

Please indicate your order of preference (i.e. 1, 2, 3) next to the areas selected.

Pierrefonds-Roxboro – d'À-Ma-Baie Park

Pierrefonds-Roxboro – George-Springate Park

Ahuntsic-Cartierville ⁴

Ville-Marie (YMCA–Concordia Fines Art Camp)

Pierrefonds-Roxboro – Grier Park

Westmount

Notre-Dame-de-Grâce ⁴

Mile-End (du Parc YMCA)

Pointe-Saint-Charles (your request will be forwarded to the local team)

Would you like your camper to attend a specialty program such as Urban Explorer (13-to-15-year-olds), or our fine arts program? Please indicate which one:

Specialty program options can be found on our website.

OTHER INFORMATIONS

***Please indicate which weeks you would like your camper to attend the YMCA day camp should there be availability (from Monday to Friday, 9:00 a.m. to 4:00 p.m.).**

- Week 1: June 26 to June 30
- Week 2: July 3 to July 7
- Week 3: July 10 to July 14
- Week 4: July 17 to July 21
- Week 5: July 24 to July 28
- Week 6: July 30 to August 4
- Week 7: August 7 to August 11
- Week 8: August 14 to August 18
- Week 9: August 21 to August 25⁴

⁴ Only available at select locations

***Do you wish to register your camper for extended childcare?** Yes No

If yes, which services would you require:

- Pre-camp childcare (before 9:00 a.m.)
- Post-camp childcare (after 4:00 p.m.)

Please check the weeks you wish for your camper to attend pre- and/or post-camp childcare services:

- 1 2 3 4 5 6 7 8 9

Does your camper like to swim?

- Yes No

***Does your camper know how to swim?**

- Yes No

***Has your camper attended outings without a parent/guardian present?** Yes No

***Please indicate either how these outings have gone, or what concerns you would have regarding your camper attending outings without you present:**

***Is your camper presently taking medication(s)?**

- Yes, please specify: _____
- No

***Does your camper have any physical limitations or do they require any medical assistance?** Yes No

If yes, please specify:

***Has your camper begun puberty?** Yes No

If so, please indicate if they require any form of assistance or if there is any specific intervention which needs to be done:

***Does your camper easily partake in suggested hygiene etiquette (i.e. handwashing, wearing a face covering or mask, social distancing)?**

- Yes
- No, please specify: _____

Please list your camper's strengths, as well as the best way for us to ensure that we are focusing on them while they are at camp:

Please indicate one goal you would like us to focus on with your camper this summer (e.g. making friends, sharing, using their words, etc.):

PLEASE NOTE

The registration process will only be completed once the request has been approved. The week(s) selected by the parent/guardian will be evaluated upon availability. **We cannot guarantee the week(s) selected by the parent/guardian.** More weeks may be offered to the same child if there is availability. **If it is the camper's first summer, we suggest that they begin with a two-week registration.**

The YMCAs of Québec day camps reserve the right to dismiss children from day camp under the following conditions (when this occurs, reimbursement is prorated accordingly):

- The day camp does not have the resources to meet the needs of the camper (funding, companion, building logistics, etc.);
- The camper demonstrates violence, aggression and/or any other behaviour deemed harmful, or high risk, toward themselves, other campers, members, or Y employees;
- The parents/guardians do not provide the day camp team with sufficient information regarding their camper's needs or behaviours when asked for additional information to best support the camper and/or are being noncompliant towards the camp staff.

PROFESSIONAL RESOURCE

***Have you been referred to our services by a professional or organization**

(i.e. social worker, CIUSSS, etc.)? Yes No

If so, please indicate their contact information:

Name of Organization _____

Contact Name _____

Email _____  Phone number _____

OTHER PROFESSIONALS

Please indicate other professional partners who work with your camper, including the professional who will be completing the **Needs Assessment** portion of this application.*

The YMCA values working with other professional partners to ensure the best possible experience for the campers in our Companion program. These partners will only be contacted should we require more information regarding a specific behaviour or intervention, or should we require additional support throughout the summer to ensure your camper's successful participation.

Professional's Name _____

Professional Title _____

Email _____  Phone number _____

I, the undersigned, _____, being the parent guardian of _____, authorize the professional(s) indicated above to communicate and release information to the **YMCAs of Québec day camps** that is necessary to complete the **Request for Participation** package and the **support** of my camper within camp. This authorization form is valid until the end of December 2023.

_____ Date: ____/____/____
Parent's/Guardian's signature yyy mm dd

Thank you for your collaboration.

Additional Comments or Notes:



CAMPS DE JOURS DU YMCA PROGRAMME COMPAGNONS

Needs assessment

Once the form is completed, please email it to inclusioncamps@ymcaquebec.org

INFORMATION

PLEASE NOTE: The Needs Assessment is to be completed by a professional who works with the child. **Mandatory fields.*

Child family name _____

*Name of professional completing the Needs Assessment _____

Child first name _____

School _____

*Profession _____

Grade (if applicable) _____

Email _____

Specialized school

 Phone number _____

Specialized class

Integration aid

Integrated into a class with no aid

If your camper has any additional documents such as an Individual Education Plan (IEP), a plan that has been created to help your camper adapt to their social environment, or another document, please give us a short summary of this document and/or attach the document when you register.

COMMUNICATION

*Can the child express their needs? Yes No

*How does the child communicate?

Verbally Gestures Pictograms Sign language Other _____

ACTIVITIES

*What activities, hobbies, favourite items, etc. does the child like and dislike?

Likes:

Dislikes:

*How can we best support the child during transitions from one activity to another?

*How long does the child remain engaged in an activity?

- 5 minutes 10 minutes 20 minutes
 30 minutes 45 minutes et plus

BEHAVIOUR AND SAFETY

*How can we best support the child when a stressful situation is encountered?

*Does the child display any unexpected behaviour (i.e. running away, hiding, hitting, aggression, etc.)? Yes No

If yes, please specify and indicate any triggers, specific situations, or stimulus that may have a strong impact on the child's behaviour and the best way to support the child when this occurs.

*Is the child sensitive to noise? Yes No

Yes, specify:

*Does the child have any fears? Yes No

Yes, specify:

BEHAVIOUR AND SAFETY

*Does the child have any obsessions/rituals that could interfere with participation? Yes No

Yes, please specify:

*Does the child understand the concept of danger? Yes No

Yes, please specify:

AUTONOMY

*Can the child eat and drink independently?

Yes No, please specify:

*Can the child change and dress themselves?

Yes No, please specify:

*Does the child require assistance when going from one place to the other?

No Yes, please specify:

*Can the child be responsible for their personal belongings?

Yes No, please specify:

HYGIENE

*Does the child require assistance for toileting? No Yes, please specify:

Does the child easily partake in suggested hygiene etiquette (i.e. handwashing, wearing a face covering or mask, pulling up pants, diaper/pull-ups wearing etiquette, etc.)? Yes No, please specify:

Does the child require any specific support that requires an adult to be within close proximity to the child?

No Yes, please specify:

RECOMMENDATION

*YMCA day camps may include large groups, several visits to local parks, possible outings and loud group activities. Knowing this, in your professional opinion what form of support do you feel the child would require to safely participate in a YMCA day camp this summer:

Can share a companion Requires their own companion Does not require a companion

Knowing the nature of our camp environment, is there any additional information you wish to share with us regarding the child (i.e. additional interventions, concerns, possible unmentioned behaviours, etc.)?

I, _____, in the capacity of _____, attest that the above
(name of professional) (professional's title)
information provides an accurate representation of the needs and behaviour of _____.
(child's name)

I understand that the YMCAs of Québec day camps request this information so that they may assess the possibility of a successful day camp experience for this child.

Professional's Signature **Date:** ____ / ____ / ____
yyyy mm dd

PLEASE NOTE

The parent/guardian of the child must agree to the disclosure of the **Needs Assessment** to the YMCA day camps by completing and signing the designated portion included in the **Family Authorization**.

Additional Comments or Notes:

Empty rectangular box for additional comments or notes.