



2026 SUMMER REGISTRATION PACKET

EXTENDED TIME FOR RECREATIONAL ACTIVITIES IN SALISBURY

Located at Salisbury Central School & Lake Wononscopomuc

- Licensed child care by the State of Connecticut
- Program for children ages 5-12
- Monday-Friday 8:45 am - 5:15 pm
- Dates of Operation: June 29th – August 7th*

*We hope to add an additional week of camp if staffing allows. We will reach out to all registered participants if this is the case.

EXTRAS will fill spots on a priority basis. Our priority will start with families who live in Salisbury Central School District (priority until 4/17). We then process out of town applicants. Please be aware that we use a first-come-first-serve policy.

EXTRAS can receive your completed packet by email or physical mail, as well as dropped off at either Salisbury Central School & the Salisbury Town Hall:

EXTRAS

P.O. Box 548

45 Lincoln City Road

Salisbury, CT 06068

extrasprogram@gmail.com

Please have packet and health forms
completed and returned by:

Friday May 29th, 2026

space is limited & fills up quickly!

Dear Parents,

Welcome to the EXTRAS Program! It has been our pleasure serving the families of Salisbury since 1988. EXTRAS (Extended Time for Recreational Activities in Salisbury), started as an after school program for the school-aged children of Salisbury Central School, and has expanded to include a summer program for the children of Salisbury & families who live in the greater area.

The primary purpose of EXTRAS is to provide a safe, stimulating, nurturing and educational environment for our young people. The EXTRAS program strives to ensure an atmosphere where children are encouraged to pursue healthy and wholesome activities within structured guidelines.

We will capitalize on the individual strengths of our staff as well as assets and resources offered by parents and the community whenever available. With our staff, parents, and community we will achieve our goal of enriching and enhancing the lives of our children. All our services are provided with the utmost attention to ethical practices and principles.

Please take a few moments to review the contents of the Summer Registration Packet and the Parent Handbook. These packets contain valuable information regarding our schedule, rates, swimming lesson opportunities, and the procedures that we will be following this session. All forms, including providing a recent physical, must be completely filled out before your child may attend the EXTRAS program (a Connecticut State requirement). Any unpaid bills to EXTRAS need to be paid before your child can attend the program. Please inquire if you'd like to learn more about tuition assistance that is available.

We welcome any of your suggestions! Our goal is to work together with you to provide the most positive experience for your child during their most formative years!

Sincerely,

Alexander Baker
EXTRAS Director

Sheila DePaola
Assistant Director/Head Teacher

EXTRAS REGISTRATION FORM

Tuition Agreement

Full Day Rate: \$50/day

Half Day Rate*: \$35/day

***AM Half Day** offered for 6 yrs old or under

***PM Half Day** for Region 1 Summer School students only.

Tuition assistance and/or payment plans are available, please email us for more information.

Payment Information:

Billing will be weekly and payment is expected prior to your child's attendance for that week. Invoices will be emailed a week in advance and are due by the end of the week it is sent out.

There must be a zero balance from previous programs before a child may be enrolled

Absences of the enrolled child/ren due to illness, family circumstances, or other reasons will still be charged for contracted days. Parents/guardians must give two weeks *emailed* notice before reductions or withdrawal from the program will be reflected in the billing.

_____ (parent/guardian's initials)

EXTRAS has the right to remove a camper from the program if tuition is not paid on time (two weeks or more past due) unless other arrangements have been made (i.e. paying every two weeks or monthly.)

Weekly invoices are due in full prior to your child attending camp _____ (parent/guardian's initial)

Director: _____ Date: _____

Parent/Guardian: _____ Date: _____

Summer School

My Child/ren _____ will attend the Summer Learning Program (Summer School) from _____ to _____.
(Apply through your child's school)

EXTRAS REGISTRATION FORM

Schedule Agreement

On this day _____, 2026, I, the parent/guardian of _____ am enrolling him/her/them in the EXTRAS program. On the following days, he/she/they will be attending the program.

Please mark the days your child/ren will be attending EXTRAS during the summer, using the following symbols. There is a two day minimum per week. Any changes to this schedule must be made at least two weeks in advance to avoid a charge.

X Full Day 8:45am-5:15pm

AM (6 yrs old or under): 8:45am–1:00pm

PM (offered to children enrolled in Summer School only) 1:00pm–5:15pm

IT IS SUGGESTED THAT YOU MAKE A COPY OF THIS SCHEDULE FOR FUTURE REFERENCE

	Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Total
Week 1 June 29 - July 2					CLOSED	\$
Week 2 July 6 - July 10						\$
Week 3 July 13 - July 17						\$
Week 4 July 20 - July 24						\$
Week 5 July 27 - July 31						\$
Week 6 August 3 - August 7						\$
Week 7* August 7-August 14	TBD	TBD	TBD	TBD	TBD	

*We hope to add a 7th week of camp if staffing allows. We will reach out to all registered participants if this is the case. If you know of anyone interested in working with us this summer please have them reach out to us!

We will reach out by May 29th if your child/ren are on a waitlist for any of the dates.

In early June we will email all registered campers our daily schedule and procedures.

EXTRAS REGISTRATION FORM

Injury, Sickness, Emergency Health Care, and Medical Insurance Provisions

I understand that participation in the EXTRAS Program involves a higher degree for risk of injury or sickness to my child/ren. I understand that the EXTRAS Program, the Board of Education, and the Town of Salisbury do not provide any medical insurance coverage for injuries sustained during any activities of the EXTRAS Program, or while on school or town property.

In case of a medical emergency, I understand that every effort will be made to reach me. If this is not possible, I hereby give permission to the staff of the EXTRAS Program to secure proper emergency medical or surgical care or hospitalization for my child/ren.

In acknowledging the above, I hereby give permission for my child/ren, _____ to participate in the EXTRAS Program for the summer 2026 session.

Parent/Guardian _____ Date _____

Medical Insurance Information

Insurance Company _____

Policyholder _____

Policy Number _____

It is the responsibility of the parent/guardian to inform the program director of EXTRAS, in writing, of any changes in medical insurance that occur after the date this form is signed.

If without medical insurance, check here ____.

I further agree to be personally responsible, whether or not medically insured, for any medical bills resulting from injuries or sickness to my child/ren sustained from any activities while participating in the EXTRAS Program. _____ **(parent/guardian's initials)**.

EXTRAS REGISTRATION FORM

State of Connecticut Licensing Requirements

I have read and understand the information in the parents' registration packet and parent handbook and agree to abide by the policies and procedures outlined therein.

Parent/Guardian _____ Date _____

Payment

I agree that I am financially responsible for the time I have requested to be reserved for my children's participation in the EXTRAS Program, as well as any future changes in schedule, regardless of their attendance.

I agree to pay for each registered week prior to the start of that week, as well as make the final payment for the summer session by August 1st, one week before the program ends.

Parent/Guardian _____ Date _____

Permission for Child to be Removed by Another Party

In case of emergency, I give permission for any of my emergency contacts to remove my child/ren from the EXTRAS Program in my stead.

Parent/Guardian _____ Date _____

Photographs/Web Site

Photographs of the children participating in our program may be taken and appear in the local newspapers. They may also appear on the EXTRAS Facebook page and/or printed promotional materials. Your child will not be named.

I **GIVE** permission to have _____ photographed.

Parent/Guardian _____ Date _____

I **DO NOT** give permission to have _____ photographed.

Parent/Guardian _____ Date _____

Any Special Instructions/Requests concerning photographs:

EXTRAS REGISTRATION FORM

Sunscreen/Insect Repellent Permission

I give permission for the EXTRAS staff to apply sunscreen and/or insect repellent to my child/ren_____. I agree to provide sunscreen and/or insect repellent. In the event that the sunscreen and/or insect repellent I provided are/is not available, EXTRAS staff will use their own. (Insect repellent will be free of DEET.)

I also agree to have my child/ren sunscreensed before/upon signing them in._____(parent/guardian's initial)

Parent/Guardian_____Date _____

Outside Play/ The Grove

EXTRAS staff and students will spend as much time as possible outside. Students must be dressed appropriately for outdoor play and the Salisbury Town Grove each day. This includes appropriate shoes and attire for the walk, the playground, and the beach/swimming. EXTRAS staff transport the students to the Grove via walking. If there is anticipated inclement weather, parents will be notified via email that morning if EXTRAS will stay at Salisbury Central for the day.

I understand that my child(ren) will walk to the Grove daily and will be prepared for large amounts of outdoor time at camp.

Parent/Guardian_____Date _____

Movie Permission

I give my child/ren_____permission to watch a PG rated movies on the rare occasion EXTRAS spends the day at the school (e.g., rainy days).

Parent/Guardian_____Date_____

-or-

I DO NOT give my child/ren_____permission to watch a movie while at EXTRAS.

Parent/Guardian_____Date_____

EXTRAS REGISTRATION FORM

Permission for Child to Participate in Summer Swim Program

I have read and understand the following: EXTRAS Waterfront Rules, The Town of Salisbury Code of Conduct for Children and Parents at the Grove, and the EXTRAS Emergency Action Plan.

Parent/Guardian _____ Date _____

Recreational Swim

I give my child/ren _____, permission to participate in daily recreational swim time at the Town Grove with the EXTRAS staff.

Parent/Guardian _____ Date _____

SWIM LESSONS

The EXTRAS Program partners with the Town of Salisbury's Recreational Staff for the summer season. This partnership has allowed us the opportunity to offer daily Red Cross Certified Swimming Lessons free of charge to any children while enrolled at EXTRAS. Each lesson is split into age appropriate groups, and are 30 minutes long.

***For campers 8 & up- lessons are mandatory if campers wish to participate in deep water activities such as kayaking, canoeing, paddleboarding, or sailing.**

I would like my child/ren _____ to participate in Swim Lessons at the Town Grove while they are attending Summer EXTRAS

I DO NOT want my child/ren _____ to participate in Swim Lessons at the Town Grove while they are attending Summer EXTRAS.

Parent/Guardian _____ Date _____

***By giving permission for swim lessons, your child/ren will be expected to attend daily lessons. Opting out of a day will require day-of parent permission.**

EXTRAS REGISTRATION FORM

Medical Information

If you indicated that your child had allergies, medications, restrictions on page 2 of the registration form please complete the information below.

Remember:

A current copy of each child's health assessment and immunization form must be provided. A current copy of the doctor's order for EACH medication for EACH child must be on file before your child(ren) can attend. Please add pages as needed.

Child's Name:

Allergy/Medications	Intervention used (medication /action taken)	Last time that the allergy was treated.

Medications: Please note that over the counter and prescribed medications for short term illnesses cannot be dispensed by staff members.

They must be administered by the parent or guardian.

****Due to HIPPA regulations, EXTRAS is not informed of your child's IEP or Medical information unless it is provided by you. In order to best meet your child's needs please indicate below any information that will assist us in providing a successful setting. Undisclosed conditions may impact EXTRAS ability to provide care in a timely manner.** EXTRAS follows ADA guidelines for participation in our program, however, if a child with a disability applies for admission and needs one-to-one care to benefit from a child care program, then a personal assistant will be provided at no cost to the child care center (usually by the parents or through a government program).The ADA generally does not require centers to hire additional staff or provide constant one-to-one supervision of a particular child with a disability. Additional personnel may only be provided at the cost of the parent or government organizations per ADA guidelines.

Restrictions or supports:

Does your child(ren) require any equipment or personnel in their regular school day?

Indicate Yes or No

Yes: (indicate the type of support needed. Attach separate narrative if needed) _____

No, my child does not use special equipment or receive personnel support in their regular school day.

SICK CHILD

If, during the day, any of the following symptoms appear, then your child will be separated from the rest of the people in the group. You will be contacted immediately and **MUST** pick up your child within 30 minutes of being notified.

Symptoms include:

- Fever of 100 degrees Fahrenheit or higher
- Shortness of Breath
- Chills
- Sore Throat
- Vomiting

HAND/RESPIRATORY HYGIENE

Staff and children will engage in regular hand washing with soap and water for at least 20 seconds when:

- Before and after eating,
- After sneezing, coughing, or nose blowing,
- After using the restroom,
- Before handing food,
- After touching or cleaning surfaces that may be contaminated

If soap and water are not available, EXTRAS will use an alcohol based hand sanitizer if available. Use of alcohol based hand sanitizers will always be supervised by adults.

All staff and children will be required to do the following:

- Cover cough and sneezes with tissues or the corner of the elbow,
- Encourage children, when appropriate to cover coughs and sneezes with tissues or the corner of their elbow,
- Dispose of soiled tissues immediately after use,
- Wash hands after each cough or sneeze.

***More information can be found in the Parent Handbook**

Parent Handbook

I have reviewed the EXTRAS Parent Handbook. A member of the EXTRAS staff has verbally discussed the discipline policy with me. I understand all policies and procedures and understand that if I do not follow them I may be asked to remove my child from the EXTRAS program.

Parent's Signature _____

Date _____

Director's Signature _____

Date _____

If any changes are made to the handbook all parents will be notified immediately in writing by the Director.

EXTRAS Emergency Action Plan

In the event of an emergency at the swimming area EXTRAS will follow the process below.

1. All water activities stop.
2. Buddy system. Buddy leaders account for everyone in their group (head count).
3. Buddy groups are all accounted for.
4. All groups exit the swimming area and go to the designated area. The area will be clearly marked and be an adequate distance from the water.
5. EXTRAS staff completes a head count.
6. EXTRAS director confirms the head count.
7. The EXTRAS staff when applicable makes phone calls and plans diversionary activities.

EXTRAS WATERFRONT RULES

1. No one is allowed in the water area without the primary lifeguard on duty.
2. Unauthorized equipment or material such as books, food, or glass receptacles of any sort are not allowed in the water area.
3. No one is permitted past the little raft.
4. Buddy system in effect at all times.
5. Gum chewing is not permitted in the water area.
6. Appropriate use of balls or objects is permitted only in designated water areas.
7. Running, pushing, or dunking is not permitted.
8. Diving is not permitted off any section of the dock area.
9. Beginners are to stay in the area designated by staff and primary lifeguard.
10. No personal swim equipment such as face masks, fins, goggles, or snorkels are to be taken outside designated area.
11. Enter water only through designated areas.
12. EXTRAS staff/leaders are with their group at all times.
13. Buddy group leader is notified immediately when child is leaving their group. EXTRAS staff leader will accompany child out of water to designated area.
14. Clean all areas before leaving.
15. Complete children head count will be done before leaving water area. Notify primary lifeguard if anyone is missing.

*** Failure to follow waterfront rules may result in child injury and/or loss of waterfront privileges.

SALISBURY TOWN GROVE

RULES & REGULATIONS

- No one 11 years of age and under will be allowed unless they are supervised by a responsible person and/or 12 years or older.
 - Bicycles are prohibited on beaches, walkways, and in parking lots. All bikes should be parked in the bike racks.
 - Generally, only audio devices utilizing earphones will be allowed. Inconsiderate use of radios will not be tolerated.
 - Flotation devices are only allowed in the enclosed kiddy area.
 - Digging on the beach will only be allowed on the lower tier, next to the water.
 - Ball playing, Frisbee throwing, or running is limited to open spaces.
 - Cell phone users should be considerate of others and your surroundings.
 - No dogs allowed at any time.
-
- **All EXTRAS staff will know the Emergency Action Plan and Waterfront Rules..**

The management of the Grove will not allow any of the following activities:

Abusive Language

Sand throwing

Littering

Loitering in the store

Fighting

Entering unauthorized areas

Defacing property

Distracting lifeguards on-duty

Indecent acts

Excessive driving speeds

Drugs and/or alcohol

EXTRAS Packet Checklist

- You have attached a copy of your child/ren's most recent physical and immunization records and sent it to EXTRAS.** Your child may not begin the program until we have these items.
- You have completed and signed or put initials in **all sections** of the packet.
- You have reviewed the EXTRAS Parent Handbook located on our website at extrasprogram.com **before** signing the Parent Handbook acknowledgement page. (If you would like a paper copy of the Parent Handbook please contact the director).
- If your child requires medication in an emergency situation (such as allergic reaction or asthma) you have requested by phone or email, or have downloaded the medical packet from www.extrasprogram.com.
This packet must be completed by a physician and returned along with any medication before your child can begin the program.
- If you will need financial assistance and you live in the Salisbury Central School district, you have requested a camp scholarship application from EXTRAS or Salisbury Family Services.