

**Town of Wakefield**

**Board of Health**

**William J. Lee Memorial Town Hall**

**One Lafayette Street**

**Wakefield, MA. 01880**

**Tel. (781) 246-6375 Fax. (781) 224-5018**



**Application for a Recreational Camp (Non Profit)**

**Permit Fee: WAIVED**

***(Please Print)***

Name of Camp: \_\_\_\_\_  
Site Address: \_\_\_\_\_  
Site Telephone: \_\_\_\_\_  
Name of Camp Owner: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

Name of Camp Operator (if different): \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

Name of Health Care Consultant: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

Type of Camp: Day: \_\_\_\_\_ Residential: \_\_\_\_\_ No. of Participants: \_\_\_\_\_  
Hours of Operation: \_\_\_\_\_ Age Group: \_\_\_\_\_ to \_\_\_\_\_  
Dates of Operation: Opening: \_\_\_\_\_ Closing: \_\_\_\_\_  
Swimming Pool: Yes \_\_\_\_\_ Pool Permit No. \_\_\_\_\_ No \_\_\_\_\_  
Bathing Beach: Yes \_\_\_\_\_ No \_\_\_\_\_  
Meals Provided: Yes \_\_\_\_\_ Food Permit No. \_\_\_\_\_ No \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_  
Official Title: \_\_\_\_\_

See next page for a list of documents that must be completed and submitted before your application for a license can be fully processed. You are strongly encouraged to complete these documents as soon as possible and submit them in advance. This will expedite the licensing process.

Camp Director's Name: \_\_\_\_\_ AGE: \_\_\_\_\_  
Coursework in Camping Administration: \_\_\_\_\_  
Previous Camp Administration Experience: \_\_\_\_\_

Health Care Consultant Name: \_\_\_\_\_  
Type of Medical License (*must be a physician, nurse practitioner, or physician assistant with pediatric training*): \_\_\_\_\_  
MA License Number: \_\_\_\_\_

Health Supervisor Name: \_\_\_\_\_ AGE: \_\_\_\_\_  
Type of Medical License, Registration or Training (*See 105 CMR 430.159 (C)*) \_\_\_\_\_

Aquatics Director Name: \_\_\_\_\_ AGE: \_\_\_\_\_  
Lifeguard Certificate \_\_\_\_\_ Expiration \_\_\_\_\_  
Issued By: \_\_\_\_\_ Date: \_\_\_\_\_  
American Red Cross \_\_\_\_\_ Expiration \_\_\_\_\_  
Certificate: \_\_\_\_\_ Date: \_\_\_\_\_  
American First Aid \_\_\_\_\_ Expiration \_\_\_\_\_  
Certificate: \_\_\_\_\_ Date: \_\_\_\_\_  
Previous Aquatics Supervisory Experience: \_\_\_\_\_

Health Care Consultant Name: \_\_\_\_\_  
Type of Medical License (*must be a physician, nurse practitioner, or physician assistant with pediatric training*): \_\_\_\_\_  
MA License Number: \_\_\_\_\_

Firearms Instructor Name: \_\_\_\_\_  
National Rifle Association \_\_\_\_\_  
Instructor's Card (*or equivalent*): \_\_\_\_\_  
Date Certified: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Horseback Riding Instructor Name: \_\_\_\_\_  
License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Stable Location: \_\_\_\_\_  
Licensed in Accordance with MGL Ch. 111 S 155, 158: Yes \_\_\_\_\_ No \_\_\_\_\_

Attach the names, ages, applicable current certifications (if any), such a First Aid, and the anticipated role at the camp of all supervisory staff (see below). Use as many pages as necessary to complete this.

Supervisory staff means those persons with the responsibility, authority and training to provide direct supervision to camper groups. This may include counselors, junior counselors, general activity leaders or other staff who provide supervision to campers without assistance.

**Required Documents:**

See the MA Regulations for Minimum Standards for Recreational Camps for Children, State Sanitary Code, Chapter IV – 105 CMR 430.000 and the guidance documents issued by the Department of Public Health, Division of Community Sanitation for additional assistance with developing the following documents:

Staff information forms

Procedures for the background review of staff (105 CMR 430.090)

Copy of promotional literature (105 CMR 430.190(C))

Procedures for reporting suspected child abuse or neglect (105 CMR 430.093)

Health care policy (105 CMR 430.159(B))

Discipline policy (105 CMR 430.191)

Fire evacuation plan-approved by local fire department (105 CMR 430.210(A))

Disaster plan (105 CMR 430.210(B))

Lost camper plan (105 CMR 430.210(C))

Lost swimmer plan (105 CMR 430.210(C))

Traffic control plan (105 CMR 430.210(D))

Day Camps – contingency plan (105 CMR 430.211 (weather related))

Primitive, Trip or Travel Camps – Written itinerary, including sources of emergency care, and contingency plans (105 CMR 430.212)

Current certificate of occupancy from local building inspector (105 CMR 430.451)

Written statement of compliance from the local fire department (105 CMR 430.215)

If applying for initial license after January 1, 2000 – lab analysis of private water supply (if applicable) 105 CMR 430.300, .303

Transportation – Liability insurance

Please note: If you are applying for an original camp license, that is, the original camp license in each community where the camp is located, you must file a plan showing the following with the Board of Health at least 90 days before your desired opening date (see MGLch.140s32A).

Buildings, structures, fixtures and facilities

Proposed source of water supply

Works for disposal or sewage and waste water

### **Lost Camper Plan**

During the lost camper search, the camp director will be in charge of the entire search to avoid confusion and wasted time.

When a camper is missing, the following information will be reported to the camp director and counselors:

Camper's name, sex and age  
Last place the camper was seen  
What the camper was wearing, size and hair color  
Length of time missing  
Number of staff in the area  
Other people in area (non staff)

Procedure for local search:

All campers gather at a designated area  
Each counselor conducts a roll call of his or her group  
Conduct a search of bathrooms and camp staff is assigned to search the surrounding area.  
Check to determine if the camper was picked up by the parents or made other special arrangements. Contact the parent or guardian to determine if the child was picked up without notifying the camp director.

If the camper is still not found:

Keep the rest of the campers together and assign staff to keep the group entertained.  
Assign staff to conduct a wider search of the buildings and surrounding area, call out name and activate 3 blows of a whistle if the camper is found.  
Notify emergency personnel if the camper is not found immediately or if the camper requires emergency medical intervention.  
The search must continue until all campers are accounted for.