

Dear parents and campers,

Welcome to 2023 Camp Adventurers! We are extremely excited to have you with us this year, and look forward to a fun filled and action packed summer full of excitement, adventure, and a chance to make new friends. This summer's camp will feature a variety of activities including arts and

crafts, games, outdoor activities, fieldtrips, and much more.

Please take a few moments to review this manual, as some of our policies have changed. This manual has been designed to help with questions you may have about our program. Enclosed you will find some important forms to fill out and return to us. Please return all forms to the main office as soon as possible, the information forms are the only forms you are to keep.

We MUST have all forms of information a week prior to you leaving your child(ren) the first day

of camp.

While all of the forms are very important, we ask that you specifically go over and discuss the camp

behavior policy and rules with your child. Remember safety is our number one concern!

A list of our June field trips will be available in May 2023 for you to view. Please understand that trips may be rearranged or changed due to weather or circumstances out of our control. You will receive a monthly schedule on the first day of every month. We will do our best to stick to this

schedule, but changes may be necessary.

Camp Director: Ms. Megan

Assistant Camp Director: Ms. Susan

If you have any questions or concerns now or throughout the summer, please feel free to contact the summer camp coordinator at meganv@washingtonparkdistrict.com or 309-444-9413.

Sincerely,

Camp Adventures Staff

SESSION	THEME	DATE	TIME
	Kicking It Off!	June 5 th – 9 th	9:00 am – 4:30 pm
ı	Luau Party	June 12 th – June 16 th	9:00 am – 4:30 pm
	Under the Sea	June 19 th – 23 rd	9:00 am – 4:30 pm
II II	Sports Mania	June 26 th – 30 th	9:00 am – 4:30 pm
	Stars and Stripes!	*July 3 rd – 7 th	9:00 am – 4:30 pm
III	Crazy Dayz	July 11 th – 15 th	9:00 am – 4:30 pm
	Hollywood	July 18 th – 22 nd	9:00 am – 4:30 pm
IV	Christmas in July	July 25 th – 29 th	9:00 am – 4:30 pm
V	Splish, Splash!	July 31 st – August 4 th	9:00 am – 4:30 pm
	Wrapping It Up	August 7 th – 11 th	9:00 am – 4:30 pm

CAMP FEES

Campers may register for the entire two-week session or for one week at a time. A \$50 non-refundable deposit must be made on each two-week session in which the participant will participate. Each camper's balance must be paid in full two weeks prior to the start of the camp.

BE SURE TO SIGN UP BY THE THURSDAY BEFORE CAMP STARTS.

DUE TO STAFFING, WE WILL NOT BE ABLE TO ACCOMADATE WALK-INS THIS SUMMER.

Two Week Sessions - Best Value!

Grades K - 2 and 3 - 6

<u>Code</u>	<u>Session</u>	<u>Days</u>	<u>Dates</u>	<u>Times</u>	Fee R/NR
3-4010-23 K - 2 3-4015-23 3 - 6	I	Mon – Fri	June 5 th – 16 th	9:00a.m 4:30p.m.	\$250/\$275
3-4020-23 K - 2 3-4025-23 3 - 6	II	Mon – Fri	June 19 th – 30 th	9:00a.m 4:30p.m.	\$250/\$275
3-4030-23 K - 2 3-4035-23 3 - 6	III	Mon – Fri	*July 3 rd – 14 th	9:00a.m 4:30p.m.	\$226/\$249
3-4040-23 K - 2 3-4045-23 3 - 6	IV	Mon – Fri	July 17 th – 28 th	9:00a.m 4:30p.m.	\$250/\$275
3-4050-23 K - 2 3-4055-23 3 - 6	V	Mon – Fri	July 31 st – Aug 1	1 th 9:00a.m 4:30p.m	. \$250/\$275

^{*}No camp on July 4th

Sign Up By Week

Grades K – 2 and 3 – 6

<u>Code</u>	Session	<u>Days</u>	<u>Dates</u>	<u>Times</u>	Fee R/NR
3-4011-23 K – 2 3-4016-23 3 – 6	Kickin It Off	Mon – Fri	June 5 th – 9 th	9:00a.m 4:30p.m.	\$150/\$160
3-4012-23 K - 2 3-4017-23 3 - 6	Luau Party	Mon – Fri	June 12 th – 16 th	9:00a.m 4:30p.n	n. \$150/\$160
3-4021-23 K - 2 3-4026-23 3 - 6	Under the Sea	Mon – Fri	June 19 th – 23 rd	9:00a.m 4:30p.r	n. \$150/\$160
3-4031-23 K - 2 3-4036-23 3 - 6		Mon – Fri	June 26 th – 30 th	9:00a.m 4:30p.m.	\$122/\$130
3-4022-23 K - 2 3-4027-23 3 - 6	Sports Mania	Mon – Fri	*July 3 rd – 7 th	9:00a.m 4:30p.n	n. \$150/\$160
3-4032-23 K - 2 3-4037-23 3 - 6	Crazy Dayz	Mon – Fri	July 11 th – 15 th	9:00a.m 4:30p.n	n. \$150/\$160
3-4041-23 K - 2 3-4046-23 3 - 6	Hollywood	Mon – Fri	July 18 th – 22 nd	9:00a.m 4:30p.r	n. \$150/\$160
3-4042-23 K - 2 3-4047-23 3 - 6		Mon – Fri	July 25 th – 29 th	9:00a.m 4:30p.n	n. \$150/\$160
3-4051-23 K - 2 3-4056-23 3 - 6	Splish Splash	Mon – Fri	July 31 st – Aug 4 ^t	th 9:00a.m 4:30p.r	m. \$150/\$160
3-4052-23 K - 2 3-4057-23 3 - 6	Wrapping It	Mon – Fri	August 7 th – 11 th	9:00a.m 4:30p.r	n. \$150/\$160

^{*}No camp on July 4th

Part Time Option

You pick 3 days a week!

Grades K - 2 and 3 - 6

<u>Code</u>	Session	<u>Days</u>	<u>Dates</u>	<u>Times</u>	Fee R/NR
3-4060-23 K-2 3-4080-23 3 – 6		Mon – Fri	June 5 th – 9 th	9:00a.m 4:30p.m.	\$110/\$120
3-4061-23 K-2 3-4081-23 3 – 6	•	Mon – Fri	June 12 th – 16 th	9:00a.m 4:30p.m	. \$110/\$120
3-4062-23 K-2 3-4082-23 3 – 6		Mon – Fri	June 20 th – 24 th	9:00a.m 4:30p.m	. \$110/\$120
3-4064-23 K-2 3-4084-23 3 – 6		Mon – Fri	June 26 th – 30 th	9:00a.m 4:30p.m. \$	110/\$120
3-4063-23 K-2 3-4083-23 3 – 6	=	Mon – Fri	*July 3 rd – 7 th	9:00a.m 4:30p.m	. \$90/\$98
3-4065-23 K-2 3-4085-23 3 – 6		Mon – Fri	July 11 th – 15 th	9:00a.m 4:30p.n	\$110/\$120
3-4066-23 K-2 3-4086-23 3 – 6	•	Mon – Fri	July 18 th – 22 nd	9:00a.m 4:30p.ı	m.\$110/\$120
3-4067-23 K-2 (3-4087-23 3 – 6		Mon – Fri	July 25 th – 29 th	9:00a.m 4:30p.n	n. \$110/\$120
3-4068-23 K-2 3-4088-23 3 – 6	•	Mon – Fri	July 31 st – Aug	4 th 9:00a.m 4:30p.	m \$110/\$120
3-4069-23 K-2 3-4089-23 3 – 6		Mon – Fri	August 7 th – 1	1 th 9:00a.m 4:30p	.m. 110/\$120

^{*}No camp on July 4th

What to bring to camp!

Each camper will have his/her own locker to put their items in each day.

Every day, campers should bring the following items:

- A back pack
- A sack lunch (including drink)
- A swimsuit
- A towel
- Water Bottle Your child will need their water bottle during our afternoon snack as well as during our frequent water breaks throughout the day.

All items should be clearly marked with camper's name.

PLEASE SEND A SWIMSUIT EVERYDAY. WE DO WATER ACTIVTIES DAILY!

SUNSCREEN

As a staff we do our very best to ensure campers do not get sun burned, but we need your help! It is much easier for us to have a camp supply of sunscreen instead of every camper having his/her own in their backpacks. Therefore, every camper is asked to bring 1 bottle of aerosol spray sunscreen per every week they attend! A sunscreen station will be made available so you can apply lotion to your child if desired. Our sunscreen bin is located at the Camp Adventurers table.

CLOTHING

Children attending camp will receive a camp T-shirt. Camp T-shirts will be required only on field trip days (Tuesdays & Thursdays). Campers will only receive one shirt. We recommend that your child be dressed in clothes that do not restrict participation in activities. Shorts or pants are recommended. Campers should also wear tennis shoes; no flip-flops or other open toed shoes may be worn. We will be playing a lot and sandals can break or cause injuries.

FIELD TRIPS

A minimum of one field trip per camp session will be taken. Some trips will be walking trips around town or trips where transportation will be provided. All entry fees for trips are included. **On field trip days, campers will be required to wear their camp T-shirts.***

TOYS FROM HOME

Please have your children keep their toys and personal possessions at home. IPads, hand-held video games, cell phones and other electronics are **NOT** allowed at camp. If they are found, they will be placed at the Park Districts front office until pick up time.

PRE & POST CAMP HOURS

Ten, twenty, and fifty hour coupons are available for you to buy if you are needing care <u>9:00a.m. And after 4:30p.m.</u>. The time is broken into 15 minute increments. (One box on your card equals 15 min) Our staff will keep the card and deduct the time used. Notes will be made on a regular basis on the sign-in/out sheets as to how many Pre/Post care hours your camper has left. Once staff has notified you of hours it is YOUR responsibility to make payments and ensure you have time on file. Once you run out of hours your child(ren) will NOT be allowed to come early or stay late until the balance is paid and more hours are purchased. Refunds/credits will not be issued for unused time. Late fee \$1 per minute after 6:00 p.m.

Campers must be pre-registered for pre and post camp prior to the start of camp. To register for pre/post camp, please contact the park office at 444-9413.

 Pre Camp Hours: 6:30 - 9:00 a.m.
 Ten Hour Coupon: \$35
 Code: 3-4070-23

 Post Camp Hours: 4:30 - 6:00 p.m.
 Twenty Hour Coupon: \$60
 Code: 3-4071-23

 Fifty Hour Coupon: \$125
 Code: 3-4072-23

TRANSPORTATION TO SWIM LESSONS & WPD PROGRAMS

We will be happy to provide transportation to swim lessons or other WPD programs that take place prior to 11:00 a.m. start time. Camp field trips/special activities do take priority. If a schedule conflict arises, please let us know. It is the parent's decision as to what program their child will attend or make other arrangements for transportation for their child. Communication with us is greatly appreciated. You will need to fill out an Activity Transport Form telling us what time the lesson/program is and the location. Look for our camp logo by the activity. If a camp logo is next to the activity we will provide transportation.

ARRIVAL/DEPARTURE

Camp is held at the Washington Park District Recreation Facility located at 105 S. Spruce Street. Parents are required to come into the building and accompany their children to our Camp Adventurers table. It is also required for the parents to pick up their children and sign them out with the appropriate staff member.

Only persons listed on the authorized pickup list can pick up your child. Persons picking up campers may be asked to show photo id. **Each child must be signed in and out daily.**

ABSENCES/ILLNESS

Please notify the Washington Park District at 444-9413 if your child will be absent or cannot attend due to illness. If a child becomes ill during the program a parent will be notified and

asked to pick up their child. If the parent is unavailable, the emergency contacts will be called. Your child must be fever free for 72 hours before returning to the program.

In case of contagious disease, please notify a Camp Adventurers staff immediately. All parents of campers at that site will be notified as soon as possible.

Fees cannot be adjusted for absences. Any refunds must be requested to the Park District no later than two weeks before the start of camp for a refund minus the deposit. If a refund is requested after this time a 50% refund will be given up to 2 business days before camp begins. No refunds will be given after that point.

MEDICATIONS

Counselors are not allowed to administer medication to any children unless the parents have notified the Park District Office that their child needs medication and have signed a **Medication Dispensing Information Form** and **Waiver.**

* A doctor's note must be on file. You need to provide a letter from your doctor stating the name of the medication your child is on, the dosage and what time the medication is to be given.



To help with communication during Summer Camp, please do the following. You may also use this on your home/work computer by going to Remind.com.

Join Remind

DISCIPLINE

The purpose of discipline is to help a child develop self-control and to learn to assume responsibility for his or her own actions. We use only positive statements, natural consequences and reinforcement to redirect negative behavior. Our Behavior Management Procedures is included in the following pages. Please go through this with

Enter this number 81010

Text this message

@kc2k24

Messages will include weather updates and special announcements.



your child and discuss these expectations. This form will need to be signed by both parent and child.

****Fighting and dangerous activity that threatens the safety of the camper and others may result in immediate suspension or expulsion from camp to be determined by camp staff and the Washington Park District supervisor. The Washington Park District reserves the right to make this decision as necessary. Refunds are not issued in the event of a suspension.

- This program adheres with many of the DCFS guidelines, but is not licensed or regulated by DCFC with the state of Illinois
- We are a "NO FIREARMS" facility.

Washington Park District Camp Adventurer's Behavior Management Policy

In order for us to have a safe and enjoyable summer, we have established some guidelines. Please read and discuss the rules, and consequences with your child. The following rules must be followed at all times, both while in our building and on field trips:

- 1. Campers must follow staff directions the first time asked.
- 2. Campers must stay with their assigned group and counselors at all times.
- 3. Campers must have permission to leave the designated camp areas.
- 4. Profanity, fighting, and disruptive behavior are not allowed.
- 5. Campers must participate in the scheduled activities.
- 6. Campers must respect camp property, camp staff, and other campers.
- 7. When riding the bus campers are expected to sit on their bottom with their feet on the floor and use appropriate indoor voices.
- 8. No gum, candy or toys from home.

If a camper is fighting, using profanity, destroying camp property, and/or being disrespectful to other campers or camp staff, they will be asked to sit out the rest of the day. A camp staff member will call the parent or guardian. Depending on the severity of the behavior the parent may have to come pick the child up.

Each camper will begin with three cards each day. If a camper violates any of the camp rules or misbehaves in any way, a counselor will pull a card. Each card has a consequence of different severity. The counselor will document the behavior, date, and time on our "pulled card/incident" sheet. If a camper does not follow the camp rules, discipline will be as follows:

1st offense (yellow): The camper will be asked to sit out of the activity for ten to fifteen minutes.

2nd offense (orange): The camper will be asked to sit out of the activity for thirty minutes to an hour and a camp staff member will contact the parent via a phone call to inform them of the inappropriate behavior.

3rd offense (red):

The camper will be asked to sit out the remainder of the day and a camp staff member will call the parent or guardian about the camper's behavior. Depending on the severity of the behavior the parent may have to come pick the child up at that point.

Any continued behavior after the 3rd offense will be a cause for suspension from camp at the discretion of the supervisor. Once the red card has been pulled the camper will not be able to participate in the scheduled field trip. If the behaviors occur in the morning, they will not participate in the afternoon field trip, but if the behaviors occur in the afternoon or on a field trip the camper will be unable to participate in the next field trip scheduled.

*This is given if a child was involved in an incident where there was no physical harm and they did not break any rules. Our top priority after safety is communication. We feel it is important to keep parents up to date on what is happening involving their child.

Any behavior incidents will be documented and a written incident report will be presented to the parent at time of pickup. Parents must sign the report and it will be put in the child's file.

A copy of the incident report will be available for the parent to take home.

After you have read and discussed the rules with your child, please sign and have the child write their name at the bottom of this form and return it on the first day of camp.

If you have any questions, please contact the park district office at 309-444-9414.



Assumption and Acknowledgement of Risk

Although Washington Park District has taken reasonable steps to provide me with appropriate equipment and/or skilled staff for my program, I acknowledge these programs have risks, including certain risks that cannot be eliminated without destroying the unique character of these programs.

These risks can cause loss or damage to my equipment, accidental injury, illness, or in extreme causes, permanent trauma, disability or death.

I understand that the Washington Park District does not want to frighten me or reduce my enthusiasm for this activity, but thinks it is important for me to know in advance what to expect and to be informed of the program's inherent risks. The following describes some, but not all, of those risks.

Possible injuries and illnesses include abrasions, lacerations, strains, sprains, and fractures; insect bites or allergic reactions; sunburn, heat exhaustion, dehydration, and other mild or serious conditions.

I understand and acknowledge that the enrollment of Minor and his participation in Activity is wholly voluntary and that there are physical risks and hazards connected with participation, including, but not limited to the risk of communicable disease such as COVID-19. I understand, acknowledge, and agree that Washington Park District is not responsible for and does not assume the costs of any medical testing, care, or treatment associated with the Minor's participation in the Activity, including, but not limited to, any medical testing, care, and treatment of the Minor or anyone with whom the Minor may have contact during or after the Minor's participation in the Activity.

I agree, on my own behalf, on behalf of Minor, and on behalf of others acting on my behalf to comply with all Washington Park District rules and regulations regarding Minor's participation in the Activity, including all rules and regulation that pertain to COVID-19. I understand and agree that noncompliance with any such rules and regulations by myself, Minor, or anyone acting on my behalf may result in termination of Minor's participation in the Activity. I further understand and agree that if Minor or anyone Minor has had direct recent contact with exhibits symptoms of COVID-19, as set out by the U.S. Centers for Disease Control, on the day of or within 14 days prior to the Activity, Minor will not participate in the Activity. I understand and agree that if Minor exhibits symptoms of COVID-19, as set out by the U.S. Centers for Disease Control, during the Activity, Minor will be required to leave the Activity immediately and notification must be given to Washington Park District. I understand and agree that any registration, activity, or program fees will not be returned if Minor's participation in the Activity is terminated under either of these circumstances. I understand and agree that if Minor or anyone Minor has had direct contact with exhibits symptoms of COVID-19, as set out by the U.S. Centers for Disease Control, within 14 days after the Activity, I will immediately provide notice of the same to Washington Park District.

I agree to assume responsibility for the inherent risks identified herein and those inherent risks not specifically identified. My participation in this activity is purely voluntary, no one is forcing me to participate and I elect to participate in spite of and with full knowledge of inherent risks.

Parent/Guardian Signature:	Date:
Minors Signature:	Date:
(Ages 17	7 & under)



Child Name	Childs Age	Birthdate
	Grade Entering in Fall	Nickname
Mothers Name	Home Phone	Child lives with
Home Address	Cell Phone	
Place of Employment	Work Phone	Mothers Birthdate
Fathers Name	Home Phone	Fathers Birthdate
Home Address	Cell Phone	
Place of Employment	Work Phone	
Additional persons tha	t your child may be released to and that we can ca We must have at least two names and numbers.	all in case of emergency.
Name	Relationship	Phone
Name	Relationship	Phone
Name	Relationship	Phone
Custody Information: Please list any co	onditions for custody, if applicable	
		Copy of legal papers on file? Yes No
Medical Information		
Physician's Name	Phone	
Preferred Hospital	Other info	
List any medications that your child takes: even if we will not be administering the medication to your child in case of emergency	List any medications/times in which your child will be taking at Camp Adventurers. Doctor's note required as well as original prescription bottle.	I give permission to the Washington Park District staff to administer the listed medications to my child.
		Parent Signature:
		Date:
 Photo Agreement : I hereby consent to the us	 se of my minor/ward photograph in the Wash	 ington Park District brochures, publications.
Washington Park District Facebook.		
Yes, I agree that my child's photos may Washington Park District.	be usedNo, I do not want my child i	n any photos to be used for
Tradiminator i and District.		
Parent Signature	Date	



Participant Information

Does your child have any allergies? (please list) Any special diet?		
Please let us help your child by listing what your child likes to do,	special needs, services, etc.	
(Hearing impaired, pertinent medical info, post traumatic disorde	r, etc.)	
D 1/0 11 61 1		
Parent/Guardian Signature:	Date:	

PLEASE READ CAREFULLY BEFORE SIGNING LIABILITY WAIVER FOR PARTICIPATION

Medical or accident insurance does not cover participation in Washington Park District activities. Each participant must furnish his/her own personal coverage. Many sport activities and programs have inherent elements of danger. Parent permission is needed to call an ambulance in any emergency. As a parent/guardian of a participant under 18 years of age, I hereby agree to hold harmless and indemnify the Washington Park District, its trustees, employees and Board of Commissioners from any responsibility for any accident, injury or damage that may occur as a result of the participant's acts or omissions. In case of an accident or sickness, I consent to emergency medical care provided by ambulance or hospital personnel.



Medication Dispensing Information

*Only Required if Medication is Dispensed

This form must be completed when medication changes.

BACKGROUND INFORMATION		(All information <u>MUST</u> be printed)	
Participant's Name:		Age:	
Address:			
Parent/Guardian's Name(s):			
		er Phone:	
Doctor's Name:	Phone:		
MEDICATION INFORMATION		(All information <u>MUST</u> be printed)	
		Time:	
Name: Dispensing & Storage Instructions:	Dose:	Time:	
		Time:	
Possible Side Effects:			



Permission to Dispense Medication

Waiver & Release of All Claims

The Washington Park District will not dispense medication to a minor child or other participant until the Permission to Dispense Medication and Medication Information Form has been fully completed by a parent or guardian. The Washington Park District's internal procedures on dispensing medication are available for review.

NAME OF PROGRAM:	DATE:
I the parent/guardi	DATE: an of
(Print your name)	(Print Child's Name)
give permission to the staff of the Washington Park Di	strict to administer to my child:
(Medication):	
(Medication):	
(Medication):	
I understand it is my daily responsibility to give the m prescription containers, or envelopes clearly labeled w	edication directly to the program staff in individual dosage containers, original with the following information:
1. PARTICIPANTS NAME 2. NAME	OF MEDICINE AND COMPLETE DOSAGE INSTRUCTIONS
In all cases the recommended dosage of any medicati	ion will not be exceeded. If after administering medication there is an adverse
reaction, I give my permission to the Washington Park	District to secure from any licensed hospital physician and/or medical personnel
any treatment deemed necessary for immediate care.	I agree to be responsible for payment of any and all medical services rendered.
minor child. In consideration of the Washington Park I discharge the Washington Park District, and its officers damages and losses I or my minor child may have, aris administering of medication. I further agree to indem agents, volunteers and employees from any and all cla	ks of physical injury in connection with the administering of medication to my District administering medication to my minor child, I do hereby fully release or s, agents, volunteers and employees from any and all claims from injuries, sing out of, connected with, incidental to, or in any was associated with the nify, hold harmless and defend the Washington Park District, and its officers, aims resulting from injuries, damages and losses sustained by me or my minor or in any way associated with administering of medication.
Parent/Guardian Signature:	Date:



Activity to Activity Transportation Request Form

Childs Name:	Age:
Activity:	Activity code:
Pick up Location:	*Only needed if not already at camp* (Ex. Washington Park Pool)
Drop off Location:	(Ex. Basketball Camp, WCHS Torry Gym)
Name of Activity:	
Time of Activity:	Age Group of Activity:
Additional Notes:	
Parent/Guardian(s) Name	(s) and Phone Numbers
Mother	Phone Number
Father	Phone Number
Emergency Contacts	
Name/Relationship	Phone Number
Name/Relationship	Phone Number
Washington Park District v	waiver and release
	ng in programs, services, activities, facilities, and events provided by the ivities have certain inherent risks that could result in serious life limiting and/or
volunteers from all claims resulting fro	Park District, Its elected officials, employees, independent contractors, or m any and all injuries sustained while participating in any programs, services, that arising out of sole negligence of the Washington Park District, Its elected tractors, or volunteers.
Parent/Guardian Signature	