

LISLE PARK DISTRICT'S

NO NAME

TEEN CAMP

PARENT MANUAL



1925 Ohio Street, Lisle, IL 60532
(630) 964-3410 - LISLEPARKDISTRICT.ORG



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TEEN CAMP

**CELL PHONE NUMBER
(630) 675-5125**

This is the direct line to the No Name Teen Camp staff. Please call or text if you are running late for drop off/pick up or if there is an emergency and you have to pick up your child early from camp. We ask that you use this number only in these cases or some sort of emergency.

Many factors come into play when traveling to and from a field trip. If camp is running significantly late parents will be contacted. If you are unable to reach your child on their cell phone, please call the camp number. The teens are encouraged to leave the phones aside in order to be fully engaged in camp activities.

NO NAME TEEN CAMP

The camp is designed for 6th, 7th, 8th and 9th graders who are looking for an exciting way to spend the summer.

PAYMENT POLICY

Registration and payments for each camp session will be accepted up to the listed deadline. In order for your child to participate in camp, registration must be completed online or at the Lisle Park District registration office. Payments will not be accepted on site.

REFUND POLICY

- Full refund minus the service fee (\$5.00) if request is made on/or before the registration deadline.
- 50% refund minus the service fee (\$5.00) if request is made after the registration deadline through the Saturday before each session.
- No refund the day of or after the session starts.

CAMP HOURS

Regular camp hours are from 9:00am-5:00pm. **Children may not be dropped off before 9:00am or picked up later than 5:00pm unless enrolled in extended hours.**

AM extended hours for camp are from 7:30am-9:00am. PM Extended hours are available through Camp Summer Quest and run from 5:00-6:00pm. **There will be a \$1.00 per minute charge per child for every minute after the regularly scheduled pick up time.**

SIGN IN/OUT PROCEDURES

No Name Teen Camp utilizes a sign in/out policy for all of its participants. For your child's safety, please sign your child in and out daily. We will have a Parent Release Form available to release your camper to someone other than those listed on the camper emergency form.

DROP OFF/PICK UP

Extended camp drop off and regular camp drop-off and pick up will be at the Band Shelter in Community Park. Late arrivals delay the start of everyone's day. Some field trips will require camp to leave promptly at 9:00am. Please do not pick your teen up early. Most field trips are scheduled to be back at 5:00pm. Teens will not be released early unless previous arrangements have been made.

Parents have the option of letting their teens walk or bike to/from camp for the regular camp day. Staff is not responsible for the campers until they sign themselves in at 9:00am. Staff is no longer responsible for the campers after they sign themselves out at 5:00pm. Please fill out the release form at the back of this packet for your child to be able to walk or bike to camp.

ABSENCE POLICY

If you know your child will be absent, please notify the staff beforehand. On field trip days, please call or text the camp phone by 8:45am if your camper will not be attending. On non-field trip days, please be sure to call or text the camp phone if we aren't at the Bandshell. The camp phone number is 630-675-5125

FIELD TRIPS

We will go on a field trip three days a week. Admission fees are included in the registration fees. Permission forms must be signed by a parent/guardian for the camper to go on the trip. Additional waivers may be required for certain trips. Teens may bring extra spending money on trips if they choose. Field trips will typically be on Tuesdays, Wednesdays and Fridays. This may change depending on weather and trip availability. Field trips typically depart around 9:00am and return at about 5:00pm. A complete list of trips is available at www.lisleparkdistrict.org.

OVERNIGHT TRIP

This summer we will hold an overnight trip the week of June 20th. Campers will attend camp as usual on Thursday June 22nd and then stay overnight in Community Park. To ensure that all the campers are safe and have fun during the campout, we will have a special set of rules and procedures for this field trip. If campers do not follow these rules, parents will be called to pick up their child. If your child does not wish to stay overnight, parents are welcome to pick up their child from camp on Thursday before 10pm. There will be no refunds for not attending the overnight trip.

SWIMMING

Teens will go to Sea Lion Aquatic Park on non-field trip days of each week. Please check the week's calendar to find out when other swimming trips are scheduled. Please have your child bring a swimsuit, towel and sunscreen to camp when camp is scheduled to swim. Please label each item with your child's name.

LUNCHES

Each camper must bring his/her own lunch, including beverage. The lunches cannot be refrigerated so please pack something that will not spoil. Also please write your child's name on his/her lunch. We recommend you also pack an afternoon snack for your child in addition to his/her lunch.

RAINY DAY PROCEDURES

Camp meets rain or shine. If an outside trip has been planned for a rainy day, we will go on an alternate trip. Drop off/pick up during inclement weather will be at the Community Center or Recreation Center. Please call the camp phone for the specific location.

CAMP ATTIRE

Campers should wear comfortable, cool clothes such as jeans or shorts, socks and gym shoes, suitable for athletic activities. **No sandals will be permitted.**

TECHNOLOGY

The use of cell phones, iPods, iPads, handheld game systems, etc. will be permitted on a limited basis at the discretion of the staff. Staff reserves the right to confiscate any such device for the duration of the day. This is camp where we encourage camper interaction. In most cases the use of these devices limits that interaction. The Lisle Park District is not responsible for lost, stolen or damaged property. If you are not able to reach your child on their cell phone, please call the camp phone at 630-675-5125.

TAX INFORMATION

We do not provide Section 125, reimbursement accounts or tax information to parents for No Name Teen Camp. It is the parent's responsibility to keep track of expenses by keeping cancelled checks, credit cards slips or to ask the park district for a receipt.

PHOTOGRAPHS

Photographs and videos are taken of participants to use for promotional purposes. By registering for a program, you have granted us permission to use your child's image for promotional purposes unless otherwise stated.

PARENT RESPONSIBILITIES

- Communicating your child's needs with staff
- Dropping off and picking up your child on time and signing them in/out
- Communicating any changes that pertain to your child with staff

CAMPERS RESPONSIBILITIES

- Respect others, self and property
- Talk in a pleasant manner - no foul language allowed
- Be safe

CODE OF CONDUCT

To ensure an enjoyable and safe program for all participants, the Lisle Park District has developed a behavior code. Participants shall:

1. Show respect to all participants, staff, and volunteers. Participants should follow program expectations and take direction from staff.
2. Refrain from using abusive or foul language.
3. Refrain from threatening or causing bodily harm to self, other participants, staff, or volunteers.
4. Show respect for equipment, supplies, and facilities.
5. Not possess any weapons.

Additional expectations are developed for specific programs, as deemed necessary by staff. The behavior required of participants and stated in the policy listed above applies to all parents, friends, relatives, or others accompanying the participants to any Park District program. The Lisle Park District reserves the right to suspend a participant whose behavior endangers his or her own safety or the safety of others.

SPECIAL NOTES

If your child has any special needs or if you have any questions concerning your child please speak with a Teen Camp Counselor.

Please fill out the attached Camper information and return to a Teen Camp Counselor the first day of camp.

The supervisor for No Name Teen Camp is Mary Liz Jayne, Recreation Program Manager. For questions and concerns please call (630) 353-4306 or email mljayne@lisleparkdistrict.org.

**LISLE PARK DISTRICT NO NAME TEEN CAMP 2017
CAMPER INFORMATION FORM**

Please return to Teen Camp Counselor by the first day of camp

Child's Name _____ Home Phone _____

Address _____ Cell Phone _____

Age _____ Birth Date _____ School _____ Grade in Fall 2017 _____ Gender _____

Parent's Name _____ Daytime Phone _____

Parent's Name _____ Daytime Phone _____

In case of emergency and we are unable to contact either parent

Name _____ Daytime Phone _____

Relationship _____ Cell Phone _____

Name _____ Daytime Phone _____

Relationship _____ Cell Phone _____

Please list any allergies (seasonal, food, medicines) we should be aware of: _____

Does your child use any medication that he/she will be bringing with them to camp? _____

Are there any special needs your child has that may limit his/her success in the program?

Any likes/dislikes or fears your child may have: _____

We will be swimming most days during camp.

Please circle the word that most accurately describes your camper's swimming abilities:

Non swimmer

Advanced

(Able to swim a full length of the pool lap lanes as well as swim in the dive well)

Camper's Name _____

The following people have permission to pick up and transport my child:

Name _____ Relationship _____

Phone _____ Cell Phone _____

Name _____ Relationship _____

Phone _____ Cell Phone _____

Name _____ Relationship _____

Phone _____ Cell Phone _____

Name _____ Relationship _____

Phone _____ Cell Phone _____

Is there anyone restricted from picking up your child from camp? _____

Name _____ Relationship _____

Please let us know of any changes that occur during camp regarding your information above.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in No Name Teen Camp, you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of the No Name Teen Camp, including, but not limited to, field trips, and transportation services, when provided.

I recognize and acknowledge that there are certain risks of physical injury to participants in the No Name Teen Camp and I agree to assume the full risk of any such injuries, damages or loss regardless of severity, which my child/ward or I may sustain as a result of participating in any activities connected or associated with any such program(s). I waive and relinquish all claims my child/ward or I may have against the Park District and its officials, employees, agents, servants and volunteers as a result of participating in any of the above program(s). I hereby fully release and discharge the Park District and its officers, agents, servants and employees from any and all claims from injuries, damage or loss which I or my child/ward may have or which may accrue to me or my child/ward on account of my participation or the participation of my child/ward in any of the above program(s).

I have read and fully understand the above program details and Waiver and Release of All Claims and Assumption of Risk.

Parent/Guardian signature _____ Date _____

BEHAVIOR EXPECTATIONS NO NAME TEEN CAMP LISLE PARK DISTRICT

Thank you for enrolling in No name Teen Camp. In order to ensure the quality of this program and safety of the teens, each participant must follow the expectations set forth for this program.

Behavior Issues: Staff follows a behavior model in which positive behaviors are rewarded rather than focusing solely on negative behavior. However, there may be times when negative behaviors will need to be addressed. If the teen camp staff encounters behavior issues with any teen, he/she will first attempt to resolve the problem with the teen. If this fails, a strike may be issued and the Recreation Program Manager will be consulted; followed by the parents. There is a strict three strike policy. If a teen gets three strikes throughout the course of the summer, he/she will be suspended from the program. **NO REFUNDS WILL BE GIVEN IF A TEEN IS GIVEN A DAY OFF OR SUSPENDED FROM THE PROGRAM.** Every parent/guardian is required to read this policy with his or her teen, sign it and return it with the other forms.

General Expectations for Conduct in No Name Teen Camp

Disrespectful attitudes and actions toward staff and other teens will result in a one day suspension. Fighting, hitting, foul language, theft, destruction of property, etc. **WILL NOT BE TOLERATED.** They will result in a one day suspension. A teen may be allowed three warnings per day before they receive a one day suspension (strike) for their actions.

Consequences:

Staff will keep a written record of serious/chronic behavior issues and will notify parents/guardians of such occurrences. Staff will give out "yellow cards" and "red cards" as a way to document and notify parents of behavior issues. If problems persist, the teen may be given out strikes. Please discuss these expectations with your teen, sign, date and return.

Strike One: Written warning, parent signs form.

Strike Two: Written warning, parent signs form, and one day suspension.

Strike Three: Suspended for the remainder of the program. **No Refunds Given!**

I have discussed the expectations and consequences of No Name Teen Camp with my teen.

Teen's Name (please print)

Date

I have discussed the behavior expectations with my teen and they understand what is expected from them in the camp.

Parent/Guardian Signature

Teen Signature

OFFENSE #1

Date Participant's Name

Description of Incident _____

Parent/Guardian Signature

Staff Signature

OFFENSE #2

Date Participant's Name

Description of Incident _____

Parent/Guardian Signature

Staff Signature

OFFENSE #3

Date Participant's Name

Description of Incident _____

Parent/Guardian Signature

Staff Signature

Recreation Supervisor

MEDICATION DISPENSING INFORMATION

This form must be completed for each program session or when medication changes

BACKGROUND INFORMATION:

Participant's Name: _____ Age: _____

Address: _____

Parent's/Guardian's Name(s): _____

Daytime Phone: _____ Cell Phone: _____

Doctor's Name: _____ Phone: _____

MEDICATION INFORMATION

Name: _____ Dose: _____ Time: _____

Dispensing & Storage Instructions: _____

Possible Side Effects: _____

Name: _____ Dose: _____ Time: _____

Dispensing & Storage Instructions: _____

Possible Side Effects: _____

Name: _____ Dose: _____ Time: _____

Dispensing & Storage Instructions: _____

Possible Side Effects: _____

OTHER INFORMATION:

I understand that it is my responsibility to give the medication directly to the Head Counselor with full instructions in individual dosage containers, clearly labeled envelopes, or in original prescription bottles.

In all cases, medication dispensing can only be changed or modified by completing another Permission and Waiver to Dispense Medication Form and Medication Information Form.

I hereby acknowledge that the above information provided for the dispensing of medication for my minor child, guardian, ward or other family member is accurate. I also understand that it is my responsibility to inform the agency if any changes in the dispensing of medication change.

Signature of Parent or Guardian

Date



CAMPER SELF-RELEASE AGREEMENT

Before Camp

I, _____, give my permission for my child, _____
to walk/bike to camp at the beginning of the camp day (9am). I realize that my child will not
be supervised until sign-in at 9am.

(Parent Signature)

(Date)

After Camp

I, _____, give my permission for my child, _____
to walk/bike home at the conclusion of the camp day (5pm unless otherwise noted). I realize
that my child will not be supervised once they are released from the program.

(Parent Signature)

(Date)

Severe Weather Policy

In case of severe weather, NNTC staff will NOT allow campers to walk or bike home. In this situation, parents and other emergency contacts will be called to come pick up the teen.