

# 2018 SUMMER CAMP

## REGISTRATION PACKET

## & PARENT GUIDE

**PLEASE COMPLETE AND RETURN THE CAMPER INFORMATION FORM AND ALL  
REQUIRED SUPPLEMENTAL FORMS BY HEATHER MATTESON, YOUTH  
RECREATION MANGER BY FRIDAY, MAY 25, 2018.**

*Please feel free to contact me if you have questions or concerns*

Heather Matteson  
Youth Recreation Manager  
Huntley Park District 2015  
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# HUNTLEY PARK DISTRICT

## 2018 Camper Information Form



The parent/guardian must fill in the following information. The intent of this information is to provide camp personnel with the background for appropriate care. **MUST BE COMPLETED AND SUBMITTED BY MAY 25, 2018**

### Participant Information

Camper's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Male: \_\_\_\_\_ Female: \_\_\_\_\_ Age during camp: \_\_\_\_\_ Grade (fall 2018): \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Parent/Guardian Information

First Parent/Guardian: \_\_\_\_\_ Relation: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Primary Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_  
Primary Email: \_\_\_\_\_

Second Parent/Guardian: \_\_\_\_\_ Relation: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Primary Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_  
Primary Email: \_\_\_\_\_

### Emergency Contact/Alternate Pick-Up

Other than the persons listed above, please list those who are able to pick up your child within 20 minutes of call.  
Only persons listed above and below will be allowed to pick up your camper. **A photo ID is required each day at pick up.**

| Name  | Relationship | Phone # during camp hours |
|-------|--------------|---------------------------|
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |

### Medical Information

*The Huntley Park District welcomes individuals with disabilities into the program. Please describe any accommodations needed for successful inclusion into the program.*

**Does your child have a severe food or other allergy we need to know about?**

If your camper has a severe allergy and has medication, please complete a **Food Allergy Emergency Action Plan**.

| Food Allergies | Describe Reaction and how to Manage Reaction |
|----------------|--|
| _____          | _____  |
| _____          | _____  |

Other Allergies (Include insect or bee stings, hay fever, animals, etc.)

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Does your child have Asthma?                      YES                      NO

If so, please complete an **Asthma Action Plan** – Must be on file before child can attend camp.

Please list any medication your child is taking that we need to know about.

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Will staff be required to dispense medication during camp hours?                      YES                      NO

(If YES, please complete a **Permission to Dispense Medication Form**. This form must be completed and submitted to the Youth Recreation Manager before staff can dispense medication.)

## Swimming Permission

Campers will be going to **Stingray Bay (or other aquatic facility)** to swim 1-3 times per week and will be given a specific wristband that must be worn each time they are there. The colors of the wristbands indicate which parts of the pool the campers are allowed to be in so Counselors and Lifeguards can easily identify them and make sure they are where they're supposed to be.

|                           |  |
|---------------------------|--|
| <b>Orange Wristband =</b> | <b>Zero Depth Only: 0-30 inches deep</b> (black line painted on pool floor indicates where zero depth ends.) |
| <b>Blue Wristband=</b>    | <b>Zero Depth Only + Waterslides</b> (camper must be at least 42 inches tall to go down waterslides.)        |
| <b>Green Wristband=</b>   | <b>Anywhere in the pool including slides and diving well</b> (diving well is 11 feet deep)                   |

In order to be a **green wristband**, each camper **must** be swim tested by a counselor regardless of their experience outside of camp. A successful swim test consists of swimming the entire length of the lap lane, nonstop, without touching the ground, hanging onto the sides or getting assistance from a counselor/lifeguard. Lap lanes are 5 feet deep and 25 meters long.

**Note: A counselor or lifeguard will stay along the side of each camper during the swim test in case they struggle and need help.**

YES      NO

|  |  |  |
|--|--|--|
| <b>Do you want your child to be swim tested?</b><br><i>Note: If you child is not swim tested, he/she will automatically be an orange (or blue if indicated below.)</i> |  |  |
| <b>Do you give your camper permission to go down the waterslides?</b><br><i>Note: Child must be at least 42" tall to go down the waterslides.</i>                      |  |  |

**\*The same wristband rules apply when visiting other aquatic facilities.**

## District 158 Summer School

Is your child attending District #158 Summer School while enrolled in the Park District Summer Camp?      YES      NO

**If yes, please fill out the following information:**

What are the dates and times of Summer School? \_\_\_\_\_

Will your camper take a bus from camp to school?      YES      NO      If yes, what time is pick up? \_\_\_\_\_

Will your camper take a bus from school to camp?      YES      NO      If yes, what time will the bus drop of your camper at the HPD REC Center? \_\_\_\_\_

Additional Comments: \_\_\_\_\_

## Swim Lessons & Additional HPD Programs

Campers enrolled in additional Park District programs will be escorted to and from by a summer camp staff member if the program is Stingray Bay, HPD REC Center and/or Deicke Park and is during camp hours (6:30am-6:00pm, M-F.) If a program ends after camp; it will be the parent/guardian responsibility to pick up your child. (Examples may include, swim lessons, art classes, etc.)

| Please list all the programs that your camper is registered during camp hours. |            |          |            |          |
|--|------------|----------|------------|----------|
| Program Name   | Days/Dates | Location | Start Time | End Time |
|  |            |          |            |          |
|  |            |          |            |          |
|  |            |          |            |          |

## Camp T-Shirt

Each camper will receive 1 camp t-shirt FREE. Additional camp T-shirts can be purchased for \$10 each. Would you like to order an additional camp T-shirt?                      NO      YES                      How many? # \_\_\_\_\_ x \$10 = \$ \_\_\_\_\_

**Campers will receive a size appropriate t-shirt the first week of camp.**

## Additional Information

- May camp staff assist with applying insect repellent if needed?                      YES      NO
- If necessary, can staff provide insect repellent for your camper?                      YES      NO
- If necessary, can the staff provide sunscreen for your camper?                      YES      NO
- May camp staff assist with re-applying sunscreen to your camper's shoulders, back and face if needed?      YES      NO
- May be allowed to watch G rated movies?                      YES      NO
- May be allowed to watch PG rated movies?                      YES      NO

*In the event of an emergency, I authorize the Huntley Park District to secure any/all necessary medical attention from any accredited hospital and/or ward and further agree that I will be responsible for any and all medical services rendered. I have read and fully understand the Important Information, Waiver of Release of All Claims & Assumption of Risk. I further understand that my signature is required below in order to participate in Huntley Park District programs. In addition, I agree to abide by all of the policies/procedures contained in the Parent Handbook.*

**I understand that my child's picture may be taken for camp projects, Park District website, publications and marketing.** \_\_\_\_\_

*Initial*

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Date**

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**Huntley Park District  
Permission to Dispense Medication  
Waiver and Release of All Claims**

The Huntley Park District will not dispense medication to a minor child or other participant until the permission and Waiver to Dispense Medication and Medication Information Form have been fully completed by a parent or guardian. The Park Districts internal procedures on dispensing medication are available for review

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NAME OF PROGRAM: \_\_\_\_\_ DATE: \_\_\_\_\_

I the parent/guardian (print name \_\_\_\_\_)

Of (child's name, print) \_\_\_\_\_, give permission to the staff of the Huntley Park District **to administer to my child, (name of medication):** \_\_\_\_\_

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**I understand that it is my responsibility to give the medication directly to the program staff in individual dosage containers, or original prescription containers, or envelopes clearly labeled with the following information:**

**PARTICIPANTS NAME:** \_\_\_\_\_

**NAME OF MEDICINE AND COMPLETE DOSAGE INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**In all cases the recommended dosage of any medication will not be exceeded. If after administering medication there is an adverse reaction, I give my permission to the Huntley 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.**

**I recognize and acknowledge that there are certain risks or physical injury in connection with the administering of medication to my minor child. In consideration of the Huntley Park District administering medication to my minor child, I do hereby fully release or discharge the Huntley Park District, and its officer, agents, volunteers and employees from any and all claims from injuries, damages and losses I or my minor child may have, arising out of, connected with, incidental to, or in any way associated with the administering of medication. I further agree to indemnify, hold harmless and defend the Huntley Park District, and its officers, agents, volunteers and employees from any and all claims resulting from injuries, damages and losses sustained by me or my minor child and arising out of, connected with, incidental to or in any way associated with the administering of medication.**

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**Signature of Parent or Guardian**

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**Date**

**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: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Program Name: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**MEDICATION INFORMATION**

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 program staff with full instruction 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 Huntley Park District if any changes in the dispensing of medication change.**

\_\_\_\_\_  
**Signature of Parent or Guardian**

\_\_\_\_\_  
**Date**



# ILLINOIS FOOD ALLERGY EMERGENCY ACTION PLAN AND TREATMENT AUTHORIZATION

Child's  
Photograph

NAME: \_\_\_\_\_ D.O.B: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

TEACHER: \_\_\_\_\_ GRADE: \_\_\_\_\_

ALLERGY TO: \_\_\_\_\_

Asthma: ☐ Yes (higher risk for a severe reaction) ☐ No

Weight: \_\_\_\_\_ lbs

## ANY SEVERE SYMPTOMS AFTER SUSPECTED INGESTION:

LUNG: Short of breath, wheeze, repetitive cough  
HEART: Pale, blue, faint, weak pulse, dizzy, confused  
THROAT: Tight, hoarse, trouble breathing/swallowing  
MOUTH: Obstructive swelling (tongue)  
SKIN: Many hives over body

Or Combination of symptoms from different body areas:

SKIN: Hives, itchy rashes, swelling  
GUT: Vomiting, crampy pain

## INJECT EPINEPHRINE IMMEDIATELY

- Call 911
- Begin monitoring (see below)
- Additional medications:
- Antihistamine
- Inhaler (bronchodilator) if asthma

\*Inhalers/bronchodilators and antihistamines are not to be depended upon to treat a severe reaction (anaphylaxis) → Use Epinephrine.\*

\*\*When in doubt, use epinephrine. Symptoms can rapidly become more severe.\*\*

## MILD SYMPTOMS ONLY

Mouth: Itchy mouth  
Skin: A few hives around mouth/face, mild itch  
Gut: Mild nausea/discomfort

## GIVE ANTIHISTAMINE

- Stay with child, alert health care professionals and parent.

**IF SYMPTOMS PROGRESS (see above), INJECT EPINEPHRINE**

- ☐ If checked, give epinephrine for ANY symptoms if the allergen was likely eaten.  
☐ If checked, give epinephrine before symptoms if the allergen was definitely eaten.

## MEDICATIONS/DOSES

EPINEPHRINE (BRAND AND DOSE): \_\_\_\_\_

ANTIHISTAMINE (BRAND AND DOSE): \_\_\_\_\_

Other (e.g., inhaler-bronchodilator if asthma): \_\_\_\_\_

**MONITORING: Stay with the child. Tell rescue squad epinephrine was given. A second dose of epinephrine can be given a few minutes or more after the first if symptoms persist or recur. For a severe reaction, consider keeping child lying on back with legs raised. Treat child even if parents cannot be reached.**

☐ Student may self-carry epinephrine

☐ Student may self-administer epinephrine

**CONTACTS: Call 911 Rescue squad: (\_\_\_\_\_) \_\_\_\_\_**

Parent/Guardian: \_\_\_\_\_ Ph: (\_\_\_\_\_) \_\_\_\_\_

Name/Relationship: \_\_\_\_\_ Ph: (\_\_\_\_\_) \_\_\_\_\_

Name/Relationship: \_\_\_\_\_ Ph: (\_\_\_\_\_) \_\_\_\_\_

Licensed Healthcare Provider Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)

I hereby authorize the school district staff members to take whatever action in their judgment may be necessary in supplying emergency medical services consistent with this plan, including the administration of medication to my child. I understand that the Local Governmental and Governmental Employees Tort Immunity Act protects staff members from liability arising from actions consistent with this plan. I also hereby authorize the school district staff members to disclose my child's protected health information to chaperones and other non-employee volunteers at the school or at school events and field trips to the extent necessary for the protection, prevention of an allergic reaction, or emergency treatment of my child and for the implementation of this plan.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## DOCUMENTATION

- Gather accurate information about the reaction, including who assisted in the medical intervention and who witnessed the event.
- Save food eaten before the reaction, place in a plastic zipper bag (e.g., Ziploc bag) and freeze for analysis.
- If food was provided by school cafeteria, review food labels with head cook.
- Follow-up:
  - Review facts about the reaction with the student and parents and provide the facts to those who witnessed the reaction or are involved with the student, on a need-to-know basis. Explanations will be age-appropriate.
  - Amend the Emergency Action Plan (EAP), Individual Health Care Plan (IHCP) and/or 504 Plan as needed.
  - Specify any changes to prevent another reaction.

## TRAINED STAFF MEMBERS

Name: \_\_\_\_\_

Room: \_\_\_\_\_

Name: \_\_\_\_\_

Room: \_\_\_\_\_

Name: \_\_\_\_\_

Room: \_\_\_\_\_

## LOCATION OF MEDICATION

- ☐ Student to carry
- ☐ Health Office/Designated Area for Medication
- ☐ Other: \_\_\_\_\_

## ADDITIONAL RESOURCES

### American Academy of Allergy, Asthma and Immunology (AAAAI)

414-272-6071

<http://www.aaaai.org>

[http://www.aaaai.org/patients/resources/fact\\_sheets/food\\_allergy.pdf](http://www.aaaai.org/patients/resources/fact_sheets/food_allergy.pdf)

[http://www.aaaai.org/members/allied\\_health/tool\\_kit/ppt/](http://www.aaaai.org/members/allied_health/tool_kit/ppt/)

### Children's Memorial Hospital

773-KIDS-DOC

<http://www.childrensmemorial.org>

### Food Allergy Initiative (FAI)

212-207-1974

<http://www.faiusa.org>

### Food Allergy and Anaphylaxis Network (FAAN)

800-929-4040

<http://www.foodallergy.org>

This document is based on input from medical professionals including Physicians, APNs, RNs and certified school nurses. It is meant to be useful for anyone with any level of training in dealing with a food allergy reaction.

# Illinois Department of Public Health

## Asthma Action Plan

Patient Name \_\_\_\_\_ Weight \_\_\_\_\_ Date of Birth \_\_\_\_\_ Peak Flow \_\_\_\_\_

Primary Care Provider Name \_\_\_\_\_ Phone \_\_\_\_\_

Primary Care Clinic Name \_\_\_\_\_

Symptom Triggers \_\_\_\_\_

**Asthma Severity**

### Green Zone “Go! All Clear!”



- Breathing is easy
- Can play, work and sleep without asthma symptoms

**Peak Flow Range**  
(80% - 100% of personal best)

The **GREEN ZONE** means take the following medicine(s) every day.

**Controller Medicine(s)**

**Dose**

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Spacer Used \_\_\_\_\_

**Take the following medicine if needed 10-20 minutes before sports, exercise or any other strenuous activity.**

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### Yellow Zone “Caution...”



- Breathing is easy
- Cough or wheeze
- Chest is tight

**Peak Flow Range**  
(50% - 80% of personal best)

The **YELLOW ZONE** means keep taking your GREEN ZONE controller medicine(s) every day and add the following medicine(s) to help keep the asthma symptoms from getting worse.

**Reliever Medicine(s)**

**Dose**

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If beginning cold symptoms, call your doctor before starting oral steroids.

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**Use Quick Reliever (two - four puffs) every 20 minutes for up to one hour or use nebulizer once. If your symptoms are not better or you do not return to the GREEN ZONE after one hour, follow RED ZONE instructions. If you are in the YELLOW ZONE for more than 12-24 hours, call your provider. If your breathing symptoms get worse, call your provider.**

### Red Zone "STOP! Medical Alert!"



- Medicine is not helping
- Nose opens wide to breathe
- Breathing is hard and fast
- Trouble Walking
- Trouble Talking
- Ribs show

**Peak Flow Range**  
(Below 50% of personal best)

The **RED ZONE** means start taking your RED ZONE medicine(s) and call your doctor NOW! Take these medicines until you talk with your doctor. If your symptoms do not get better and you can't reach your doctor, go to a **hospital emergency department or call 911 immediately.**

**Reliever Medicine(s)**

**Dose**

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For more information on asthma, please visit the National Heart, Lung and Blood Institute at [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov), the U.S. Centers for Disease Control and Prevention at [www.cdc.gov](http://www.cdc.gov) or the U.S. Environmental Protection Agency at [www.epa.gov](http://www.epa.gov).

If you would like more information on Illinois' asthma program, please contact the Illinois Department of Public Health at 217-782-3300.

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# SUMMER CAMP PARENT GUIDE

The summer day camp programs are for school-aged children who have completed kindergarten through 8<sup>th</sup> grade. The goal of the program is to provide young people with opportunities to learn and explore.

Safety is our number one concern, along with fun and exciting programs. We provide many hands-on activities, sports and field trips. We take special care to make sure they are age appropriate for the children. Flexibility is an essential element of the program. By combining unstructured and structured activities it provides the camper with an opportunity to adapt and explore.

All campers are asked to try new things and then make a choice about whether they like it or not. Children are not forced to participate in activities they do not wish to join. They will be provided with an alternative choice.

## Camp Hours & Location

|                  |               |
|------------------|---------------|
| AM Extended Camp | 6:30am-9:00am |
| All Camps        | 9:00am-3:30pm |
| PM Extended Camp | 3:30pm-6:00pm |

### Camp locations are as follows:

AM Extended Camp and PM Extended Camp is held in the REC Center for camps K– 5<sup>th</sup> Grade and in at the Deicke Park Community Room for Teen Camp. Teen Camp sign-in/out will take place at the Deicke Park Community Room.

Please call or email if your camper will not be in attendance....especially on field trip days.

## GENERAL POLICY

Enrollment is open to any child entering kindergarten through 8th grades and ***provided the program can meet the needs of the child.*** ***We do not accept children in diapers and or pull ups.*** Enrollment is on a first come first serve basis and a wait list will be started once the available space is filled.

## WAIT LIST

If the program is full, additional registrations will go on a wait list. If a space opens up in the program, participants on the wait list will be contacted to see if they still want to attend the program. Generally, participants are taken off the wait list and added to the program on a first come basis.

## Summer Camp Contacts & Phone Numbers

**Registration Office - Payments**  
847-669-3180 ext.0

### **Youth Recreation Manager**

Heather Matteson  
Office: 847/669-3180 ext. 316  
Cell: 847/343-6586  
Email: Heather@huntleyparks.org

### **Teen Camp Director/Recreation Supervisor**

Todd Weber  
Office: 847-669-3824  
Cell: 847/514-6612  
Email: Todd@huntleyparks.org

### **All Camp Email:**

HPDSummerCamp@gmail.com

### **Sign-In/Out Table & Camp Supervisor**

847/514-2893 (6:30am-6:00pm)

### **Swim/Summer School Supervisor & Inclusion/Medication Supervisor**

224/760-4590

### **Kinder. & 1st Gr.:**

847/652-0426 (6:30-6:00pm)

### **2nd Grade:**

847/514-1332 (9:00am-3:30pm)

### **3rd Grade:**

847/514-2894 (9:00am-3:30pm)

### **4th Grade:**

847/344-3491 (6:30am-6:00pm)

### **5th Grade:**

847/343-1330 (6:30am-6:00pm)

### **Teen Camp Supervisor:**

847/344-0746

### **Teen Camp:**

224/760-4589

## **INFORMATION UPDATES**

If at any time the participant or parent/guardian's telephone number, address, or other pertinent information changes, please notify the Camp Supervisor or the appropriate staff person listed to the right.

## **INCLUSION REQUEST PROCEDURE**

If an ADA accommodation is needed to support an individual within any Huntley Park District program, an explanation should have been detailed on the registration form at the time of registration. An accommodation can be made for any individual based on their IEP goals and/or diagnosis. Some of the supports available can be, but are not limited to a 1:1 aide, sign language interpreter, rule modification or supply adaptation. If you need assistance and you did not explain this on the registration form contact the Recreation Supervisor-ET/Camp as soon as possible. They will in turn contact the Northern Illinois Special Recreation Association (NISRA) and a review of the request will occur.

## **ENVIRONMENTAL/MEDICAL ACCOMMODATION REQUIREMENTS & PROCEDURES**

Special accommodations include conditions that require emergency medications. This can include but is not limited to Diabetes or severe allergies of which these conditions require insulin or an Epi-pen. The Huntley Park District must be notified in advance of any conditions that can affect an individual and the proper medical protocols must be followed as explained in this handbook. If the request along with all needed documentation is not presented to the Park District in a timely manner, participation within the program can be delayed or denied. Submit a completed Permission to Dispense Medication waiver as well as a medical plan. The Huntley Park District will review and seek any clarification as needed to ensure the accommodation is met. Timeliness of all the information is important to ensure participation.

## **MEDICATION**

The Huntley Park District recognizes that program participants will, on occasion, require the consumption or administration of both prescription and non-prescription medications to maintain health. We require you to fill out the medical disbursement form available at the REC Center **before any medication will be accepted**. These forms should be completed **before the start of camp**. Medicine should be brought to the REC Center and left with a Camp Supervisor or a Recreation Supervisor. **Do not give medication to the camp counselors**. Medication will be locked in the Recreation Supervisor's office and administered by the camp staff daily.

If your camper has a severe allergy (nuts, bee stings, etc.) and/or if there is a prescribed EpiPen, please complete an **Allergy Action Plan**. If your camper has Asthma and may need to use an inhaler at camp, please complete and **Asthma Action Plan**.

## **Program Times and Daily Schedules**

Summer day camps run from 6:30am to 6:00pm, Monday through Friday, unless otherwise indicated.

- ☐ Typical camp programming runs from 9:00am-3:30pm. Camps are scheduled in one-week sessions to allow for vacation scheduling.
- ☐ We do not provide rates for less than 5 days.
- ☐ Drop-off and pick-up is at the REC Center.
- ☐ Campers spend most of their time outside. As this is an outdoor camp, we have many wooded areas and a pond. During inclement weather (below 55 degrees, heavy rain) and when it is extremely hot (above 92 degrees), the campers will seek shelter inside their designated area or indoors.

### Attendance and Participation

Campers are encouraged to participate when present, unless sick or injured, in which case parents/guardians will be notified and the camper will be sent home. Daily camp attendance is taken, but please notify staff of known absences. (*Camp Phone Numbers are on page #3*)

### Late Arrivals

**Please call your specific camp phone when dropping your camper off late to find out where they are located in the park. (*Camp Phone Numbers are on page #3*) Calling ahead of time will reduce the risk of frustration if you are running late to work, meeting, etc.**

- ☐ Parents/Guardians dropping off will be responsible to personally taking your camper to the location of the camp. (Rec Center, Stingray Bay, Deicke Park are a few examples.)
- If your child will be late on days when a field trip is scheduled, please check your trip listing **before** bringing the child to camp. Your child's group may have already left on a field trip. If the trip location is nearby, you may be able to drop your child off at that specific location; otherwise, you may need to find other arrangements for your child that day.

### Early Pick-up

In cases when you may be picking up your camper early, please notify the specific camp. Contact the Camp Coordinator ahead of time if possible. (Camp phone numbers are on page # 3)

### Late Pick Up

Please make sure to pick up your child promptly at 6:00pm and sign them out. **After 6:05pm, parents will be billed for \$1.00 per minute thereafter.** Participants whose parents are habitually late (more than 5 times) will be removed from the program. Staff determines the pick-up time. Children who are not picked by 6:30pm will be turned over to the Huntley Police if contact with parent/guardian has not been made. **If you're going to be late, you must call the Sign-Out table at 847/514-2893.**

### Inclement Weather

Inclement weather is defined as: **heavy rain**, lighting, thunder, temperature above 92 or below 55 degrees. During inclement weather camp will be at the REC Center or Deicke Park Community Room.

### Field Trips:

Please review your camp calendar and/or weekly newsletter for field trip information. In order to ensure your child's safety while on the field trips, we require that your child wear his/her day camp T-shirt on that day so that they will be highly visible. Some of the field trips include lunch and some do not. Most field trips are between the hours of 8:30am-4:30pm. There may be an occasional trip that requires us to return late. **Children should be dropped off no later than 15 minutes prior to the departure time.**

### Swimming:

All campers will take a swim test with the Stingray Bay staff before being allowed to go in the deep end and diving well. Campers will receive wristbands determining which areas of the pool they can swim. **GREEN** wristbands allow campers to swim in all areas, including the diving well and deep end. **BLUE** wristbands allow campers to go in zero depth (up to black line) and slides. **ORANGE** wristbands allow campers to swim in the zero depth through four feet.

**Admittance on waterslides is based on height and parent/guardian permission - not swim level.**

Swimwear should be brought every day and worn under their clothes on swim days. Kindergarten and 1<sup>st</sup> Grade campers **MUST** wear ONE piece suits only. NO bikinis allowed.

Campers will change in/out of swimwear in the REC Center Locker Rooms. Please remember to send a towel and sunscreen with your child. A hat is also advised. Please label both with your child's name. If your child burns easily you might want to consider sending a white T-shirt. Children go swimming at least twice a week. Non-swim days may include water activities.

### **Supervision at Stingray Bay**

Camp counselors will be stationed at various locations throughout the facility while the summer day camp is onsite. Campers will be supervised at all times, including locker room usage. Campers will need to notify a counselor when a bathroom break is needed. The counselor will escort campers to and from the family bathroom and/or locker room facilities.

### **Wristbands**

**Green** – allowed to go everywhere. Zero Depth, deep end, diving well and slides.

**Blue** – Allowed to go in zero depth (up to black line) and slides.

**Orange** – Only allowed to go into zero depth area.

### **Sunscreen**

Because camp is held outdoors, please apply sunscreen to your camper before she/he arrives for the day. Sunscreen is most effective 30 minutes after application. A recommended sunscreen of at least SPF 30 should be provided for each camper. Label the bottle with your camper's name. (Put name on Duct tape first) so that it can be returned if lost. Children are instructed to apply sunscreen every 2 hours. Staff will assist your child only if the child asks. Their help is limited to areas the child cannot reach. Sunscreen breaks are documented daily. **Please provide your camper with SPRAY-on sunscreen.**

### **Clothing:**

Keep in mind that your child will be involved in all kinds of play, some of which will involve messy materials. Clothes that must stay clean should not be worn. Sneakers, shorts, pants, and T-shirts would be very appropriate. This is an outdoor camp; **children will get dirty**. We do a lot of hiking and walking, so campers should wear comfortable shoes. **Please, no sandals (sandals/flip flops okay while at Stingray Bay.)**

### **What to Bring**

Your child will need a boxed/bagged lunch each day that does not need to be refrigerated. Backpacks are advised to hold lunches and sunscreen, water bottle, insect repellent, etc. Comfortable clothing is a must. **Kindergarten & 1<sup>st</sup> graders....please pack an extra set of clothes that we can leave at camp in case of an accident.** If your child is going on a field trip with money we suggest a fanny pack. **Counselors cannot hold onto campers' money.** The Park District is not responsible for lost or stolen items.



### **What NOT To Bring:**

Please limit toys, electronics and personal items from home. We will not be responsible for personal possessions.

Do not pack your child a lunch that needs refrigeration due to the outdoor nature of the camp. Campers will be allowed to purchase snack items and/or souvenirs on swim and field trip days. **Please limit this to \$5.00-\$10.00 per camper.** Camp staff will not be responsible for lost monies. Medication is not allowed without a medical disbursement form. **Do not send medication with your child.**

### **Personal Items & Electronic Devices**

**Electronic devices such as DS, iPads, tablets, etc. can only be used during the "AM/PM Extended" portion of camp (6:30-8:30am & 4:30-6:00pm.) If your camper is to bring such items the following rules apply:**

1. **No chargers allowed.** For the safety of the campers we will not allow them to use electrical outlets during camp.
2. **Campers name MUST be on everything (device itself, plus games, accessories, cases, etc.)**
3. **All items must remain in camper's backpack when not in use.**
4. **Devices and games may NOT be lent out to other campers. To avoid misplaced items, we discourage "sharing."**
5. **Cell phones are not allowed.** If your child has a cell phone he/she must keep it in their backpacks. If you need to reach your camper during the day please contact the grade specific phone.

**If electronic devices start to cause camp disturbances the Youth Recreation Manager may ban the use of them for the entire summer.**

*The Huntley Park District and its staff are not responsible for lost, misplaced, damaged or stolen items.*

Do not bring personal items to camp. Personal items include, but are not limited to the following: skateboards, cell phones, toys, sporting equipment, pets or any violence related item. Occasionally, the camp will have special days when "special items" are allowed. During those days, campers are responsible for their own belongings. Campers will be required to put their personal belongings in their backpacks when not in use. **Remind your child to NOT leave these items sitting out in the open. Please put your child's name on everything.** *The Huntley Park District and its staff are not responsible for lost, misplaced, damaged or stolen items.*

### **Food Policies:**

Campers need to bring a complete lunch everyday including a beverage, unless included with the field trip. Campers have the option of purchasing lunch/snacks at the concession stand at Stingray Bay while at the pool on their swim days. Please keep in mind, if Stingray Bay is closed due to weather, the **concession stand will also be closed.** We provide a snack and beverage everyday at 3:30pm. **Summer Camp is not peanut free; please inform staff if your child has a peanut allergy.**

### **Bathroom Facilities**

Campers will be using the outdoor public restroom facilities and port-o-potties that are available. Children will be sent to the restroom in pairs or groups.

### **Code of Conduct**

The Park District Staff has implemented a code of conduct policy for all of our camp programs. These rules apply to all participants and parents/guardians. The following are the rules that all participants will need to follow in a joint effort to make the camp experiences positive and successful for all everyone enrolled in the camp programs. Parents/guardians and children alike are asked to read over these guidelines and sign this form before attending camp.

- **No bullying, verbal or physical abuse, threatening, obscene, disrespectful or physical violence will be tolerated.●**
- ☐ **All threats and threatening behavior will be taken seriously and reported to the proper authorities.**
- ☐ **Participants must show respect to all staff, participants, all property, equipment and facilities.**
- ☐ **There may be no physical contact, verbal or physical harm towards any participants.**
- ☐ **Participants may not place themselves or others in dangerous situations through actions or behavior.**
- ☐ **No weapons or items that may be used as weapons may be brought to the program.**
- ☐ **Participants may not leave the program area without permission.**
- ☐ **Participants are responsible for their actions and belongings (Bags, jackets, school supplies, items brought from home with permission, etc.)**
- ☐ **No refunds will be issued for suspensions or suspended days of camp.**

### **Discipline Policy**

It is our philosophy for discipline to teach participants to take responsibility for their own actions. We try to accomplish this through using specific directions, redirecting a child, positive reinforcements, motivation and through leading by example. Since each participant may have different ways of learning, several methods may be used.

- **1st Offense** – Verbal Warning (depending on the severity, several warnings may be given).
- **2nd Offense** – A behavior report will be filled out and filed with the Youth Recreation Manager and the parents/guardian. The parents will be required to sign the report, which will remain in the participants file. The staff will work with the participant and parents to correct the behavior. (This may be issued immediately, without warnings for serious infractions).
- **3rd Offense** – Suspension- the participant will be suspended from the program for one to three days. The suspension will be in effect immediately or the first day following (depending on the severity). The first time will be for one day and the second time for up to three days. The parent will be notified by a Camp Supervisor or the Youth Recreation Manager. Upon return from a three day suspension, if behavior continues, the Youth Recreation Manager may permanently suspend a participant from the Summer Camp programs. Depending on the situation and the degree of the offense, the participant may be permanently dismissed from the program following the issuance of a behavior report.

At Summer Camp, we hold a “Zero Tolerance to Violence” policy. A participant that is physically or verbally abusive to another participant, volunteer or Park District staff will be immediately suspended without any prior warning. No bullying, verbal abuse, threatening or physical violence towards Park District staff or any participant will be tolerated. All threats and threatening behavior will be taken very seriously and will result in an immediate suspension and possible dismissal from the program. In an effort to help reinforce positive behavior, Group Leaders will go over the camp rules the first day of each session of camp.

### **Code of Conduct-Parent**

Parents are expected to follow the program rules and treat the staff with respect. All program and/or staff issues, comments or concerns should be directed to a Camp Supervisor or Youth Recreation Manager, not the camp counselors. A child whose parents verbally abuse staff will be removed from the program. This includes sarcasm, criticism, yelling, screaming and/or negative comments directed at staff and/or other parents. The police will be called to remove any parent who appears out of control.

### **Communication with Camp Staff**

We appreciate open communication with parents to avoid any misunderstanding about the goals of our camp program. Each camp will have a parent communication log that we encourage families to use when relaying important information. We will do our best to address your concerns and to resolve them in a fair and prompt manner. Your cooperation and support is greatly appreciated in regards to this matter.

### **Emergency First Aid Procedures**

In cases of minor injury, the staff will administer simple first aid and will notify the parents at the time of pick-up. For more serious injuries requiring medical attention, the staff will call 911 and contact the parent(s). If neither parent can be reached, the staff will try to reach the emergency contact person specified on the camper’s application form. **Please be certain to keep all telephone numbers on file with the Park District current.**

### **Health Care Policies and Procedures**

Since we are unable to take care of a sick camper, we ask that you be especially aware of impending illness. Parents will be called to come pick up their child if the child is vomiting, has a temperature, or diarrhea. You must take your child home if we feel that s/he needs to see a doctor, is contagious, or requires prolonged individual staff attention which interferes with the safety of the remaining members. **The counselor is required to report any cases of communicable diseases to the local board of health.** Such reports shall include the name and home address of any individual in the program known to have or suspected of having a communicable disease. **Please do not send a sick child to camp!**

### **Head Lice**

Any child who is found to have head lice/nits will be sent home immediately and will not be allowed to return to the program until his/her head is free of lice/nits. Please assist us with this problem by following these few simple guidelines below:

1. Remind your child to not share combs/brushes at camp.
2. No sharing hats.

3. Check your child's head daily.
4. Notify the Camp Supervisor immediately if problem exists.
5. Begin treatment right away. (Recreation Supervisor can provide written information on treatment of head lice.)

### **Summer School**

If your child will be attending summer school, we will need the dates, pick up and drop off location and times in writing **before** the start of camp. Without the proper information in writing, prior to the start of camp, we cannot be held responsible if your child misses school. **Please complete the Summer School section on the *Additional Program form*.** If you have questions regarding transportation, please contact the District 158 Transportation. If you have questions or concerns regarding camp call or email Heather Matteson, Recreation Supervisor-ET/Camp at 847-669-3180 ext. 316 or [heather@huntleyparks.org](mailto:heather@huntleyparks.org).

### **Swim Lessons/other Park District Activities**

If your child is enrolled in a Huntley Park District activity, located on the Park grounds, and the activity is during camp hours, we will take the child to and from the activity. Another activity may include swim lessons or a program at our REC Center. Please submit, in writing, the dates, location and times **before** the start of camp. If the program ends after 6:00pm Monday-Friday, the parent/guardian is responsible for pick-up. **(Please complete the Campers Registered additional HPD Programs on the *Additional Program form*.)**

**\*\* Campers will NOT ATTEND swim lessons, summer school, etc. if it falls on a scheduled field trip day unless the lesson/school end before trip departs. \*\***

### **Photographs**

Pictures may occasionally be taken of the campers throughout the summer. These pictures are used for historical and marketing purposes (seasonal brochure, website, Facebook, etc.) By registering for the Huntley Park District Summer Camp, you have granted us permission to use your images. If you do not wish to have your child photographed, please make sure you notify the Youth Recreation Manager.

### **Soliciting/Babysitting**

Staff is not permitted to babysit children who are enrolled in the Camp and/or Extended Time Program. This includes weekend, holidays and evening hours. Staff is prohibited from purchasing items from the children. Parents are not permitted to solicit goods or services during program hours and/or on Park District property.

### **Visitors/Parents**

Parents and/or visitors are not permitted to remain with their children during camp hours or on field trips. If you wish to have lunch with your child, please do so at a different location in the park. This rule is for the safety of all the children and will be enforced.

## **Camp Fees**

Camp fees for residents is \$160 per session (\$165 non-resident.) Each session is one week. No rates are provided for less than 5 days. The first session fees are due at time of registration. There is a \$25.00 **non-refundable** deposit due on each remaining session due at time of registration. (The \$25.00 deposit will be applied to the balance due on each session.) Remaining camp fees are due on the Wednesday before the session start date. Campers will not be allowed to attend camp if session balance is not paid in full. You may sign-up for auto-debit, pay online, in person or over the phone.

- Please make all checks payable to Huntley Park District. They may be mailed to Huntley Park District, 12015 Mill St, Huntley IL, 60142 or you may make your payment at the Park District REC Center. The **staff is not allowed to accept payments. Credit card payments can be made over the phone. Contact 847/669-3180 ext. 0.**
- Any payment which is returned to us from the bank will be charged a \$25.00 service fee and all subsequent payments must be made in cash or credit card.

## **Camp Refund Policy**

Camp refund requests must be made in writing. Verbal refund requests will not be accepted. Requests made more than 14 days prior to session start date will receive a refund minus the \$25 non-refundable deposit. Requests made less than 14 days prior to start date will receive a refund minus the \$25 non-refundable deposit and \$10 administration fee. **No refunds will be issued after the start of each camp session unless accompanied by a medical note. No refunds or credits will be given for days your child does not attend camp. We are unable to prorate fees for days missed due to illness, vacation, holidays or behavior suspensions.** This policy is strictly enforced to allow completed of camp preparations ranging from staff scheduling, camper groupings, field trip arrangements and supply purchasing. Your understanding and cooperation is greatly appreciated.

## **Extended Time & Summer Camp Tax Information**

The Extended Time and Summer Camp Programs are recreation programs but depending on your circumstances the cost of the program may qualify as child care for a tax deduction. If you and your tax advisor decide you can use this, **the tax ID number is 36-26-14811.** *Please retain your receipts for tax purposes. The Huntley Park District does NOT send out a tax statement. If you need to copies of your monthly receipts and have a household account, you may go online and view/print you payment history.*

**How do I login online?** Go to <https://webtrac.huntleyparks.org/wbwsc/webtrac.wsc/wbsplash.html>

- Enter your Username & Password
- Scroll over MY ACCOUNT near top of page and click on REPRINT A RECEIPT
- You will see a column of Your Household Receipts with receipt numbers and dates, click to view and print individual receipts.

***I do not have a Username or Password, how do I receive one?***

- Contact the HPD Registration Office at 847/669-3180 ext. 0 and request to have a username and temporary password emailed to you.

### **Camp Contact Information**

- Information and/or questions regarding registration or camp fees, please contact the Registration Desk at (847) 669-3180 ext. 0
- To make a payment over the phone please call (847)669-3180 ext. 0
- If you have specific camp questions and/or concerns, please contact Heather Matteson, Youth Recreation Manager at (847) 669-3180 ext. 316 or via email at [heather@huntleyparks.org](mailto:heather@huntleyparks.org).
- Camper Drop-Off and Pick-Up is located in the REC Center and Teen Camp is at Deicke Park. If you need to speak with a camp staff in regards to a late pick-up or alternate person picking up, please call the specific camp phone number (listed on page 3.)

## **SUMMER CAMP CHECKLIST**

**Please make sure your camper comes to camp with the following items:**

- ☐ Backpack
- ☐ Water Bottle
- ☐ Change of Clothes in Ziploc Bag (Kindergarten & 1<sup>st</sup> Graders)
- ☐ Sunscreen (Spray – No Lotion for K-1<sup>st</sup> grade)
- ☐ Insect Repellent
- ☐ Sack Lunch
- ☐ Beach Towel
- ☐ Hat or Visor
- ☐ Empty Ziploc/Grocery Bag for Wet Swimsuit on Pool Days
- ☐ White T-shirt for those who burn easily

**\*\* Everything needs to be labeled with your child's name on it. \*\***

Writing their name on masking tape with a permanent marker seems to work better than writing the name directly on to the object (water bottle, sunscreen, etc.)