

Mini Adventurers Prek-Kindergarten

Afternoon Play Camp Prek-Kindergarten

Mini Adventurers 8:30 AM-1:00 PM @ Water Tower (10 Pine)

CHILDREN MUST BE BATHROOM INDEPENDENT AND POTTY TRAINED

Afternoon Play Camp 1:00 PM- 4:15 PM @ Water Tower (10 Pine)

CHILDREN MUST BE BATHROOM INDEPENDENT AND POTTY TRAINED

Participant's Name	D.O.B	Grade in 2023-2024	Age	Shirt size	Gender	Summers at camp prior to 2023
				YS YM YL S M L		
Street Address	City	State	Zip	Days of Attendance		
				M T W TH F		
Guardian Name (1)	Relation	Cell Phone	Work Phone	Email Address		
Guardian Name (2)	Relation	Cell Phone	Work Phone	Email Address		

In accordance with American with Disabilities Act please mark if any accommodation is needed for your child's enjoyment in our summer camp program. **YES NO** (Please Circle one) If yes, please describes any accommodation needed for your child's enjoyment in our summer camp program (Use back of form if more space is needed.)

Please speak with office staff before marking below

Office use: AW MED EF

Dates	PMT Deadline <i>Strictly enforced</i>	Mini Adventurers	Afternoon Play Camp	Office use only deposit - remit to secure spot prior to deadline	Office use only
Week 1 6/5-6/9	5/15	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 2 6/12-6/16	5/15	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 3 6/19-6/23	5/31	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 4 6/26-6/30	5/31	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 5 7/3-7/7	6/15	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 6 7/10-7/14	6/15	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 7 7/17-7/21	6/30	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 8 7/24-7/28	6/30	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 9 7/31-8/4	7/17	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH
Week 10 8/7-8/11	7/17	5 day <input type="checkbox"/> \$122 Flex 3 day <input type="checkbox"/> \$97	5 day <input type="checkbox"/> \$97 Flex 3 day <input type="checkbox"/> \$77	<input type="checkbox"/> \$15 <input type="checkbox"/> \$30 <input type="checkbox"/> CSH <input type="checkbox"/> CC <input type="checkbox"/> CK	<input type="checkbox"/> CK <input type="checkbox"/> WWW <input type="checkbox"/> LP <input type="checkbox"/> DT <input type="checkbox"/> CC <input type="checkbox"/> CSH

Riverside Parks & Recreation Camp Payment Guidelines



We are so happy to have your child in our Summer Camp! In an effort to serve all of our summer families with efficiency, we ask that you adhere to the payment guidelines detailed below. All questions/concerns may be directed to the Riverside Parks and Recreation Department at (708) 442-7025.

There will be **NO** makeup days, **NO** prorating and **NO** alternate attendance options. Weekly Camp registration closes on Thursday of the week prior at 11 AM, and must be paid in full. Weekly Camp Online registration is available until the weeks payment deadline, registration is still available until the Thursday of the week prior at 11 AM or until spaces fill. (i.e. Week one online registration will be open online until May 15th, in-person registration will still be available for week 1 until Thursday June 1st at 11 AM. After 11 AM Thursday Week 1, no one can be added to camp list for Week 2.)

Timeliness

Please be sure to adhere to all payment deadline dates in conjunction with the aligned week of registration. (WK1 and WK2 5/15, WK 3 and WK4 5/31, WK 5 and WK 6 6/15, WK 7 and WK 8 6/30, WK 9 and WK 10 7/17. If payment is not received by the deadline, the child(ren) will be removed from the weekly program and no deposits will be refunded. If no waitlist exists, there will be a **\$10 late fee** per week of enrollment. Spots are not guaranteed if you do not pay by the deadline. Please contact the Parks and Recreation office if you need to make arrangements due to emergency/unexpected situations.

Withdrawal from Camp

Each weekly registration requires a **\$15 DEPOSIT** to secure the participant's spot. Each \$15 deposit will be applied towards the weekly balance. There will be no penalties for any camp withdrawals made before May 1, 2023. Any withdrawals made on or after May 1, 2023, will result in the forfeit of the weekly deposit. After your full payment is made on the deadline, you may not receive a refund for the dates your payment covers. For example, your payment on May 15, 2023 covers weeks 1 & 2 of camp, if you choose to withdraw your child after the 15th, you will not receive a refund for weeks 1 – 2. If you withdraw before the payment deadline, you will receive your payment less the \$15 deposits and adjusted registration fees.

If your child needs to be withdrawn from a program, please notify the Riverside Parks & Recreation Department before the payment deadline by emailing (riversidepr@riverside.il.us) or by calling (708) 442-7025. If you do not receive a confirmation email, please follow up by phone. Failing to do so will result in the loss of the weekly fees. We appreciate your cooperation as other children may want to fill open camp spots.

Returned Checks/Non-sufficient Funds

In the event of a returned check, the responsible party will be charged a **\$35 NSF FEE** per Village Code. After one incident, checks will no longer be accepted. Future payment may be made with cash, cashier's check or credit card.

Camp T-shirt

Each participant will receive 1 camp t-shirt included in their initial registration. If available, replacement t-shirts may be purchased for **\$10 PER SHIRT**. If a child does not have their camp shirt upon arrival on a Field Trip Day, the child will be provided with the additional shirt if it is available and a \$10 fee will be automatically applied to the camp balance.

Payment Methods

The following payment methods will be accepted:

1. Online WebTrac- Pay off balance online under "Account" tab, scroll to "History & Old Balances", and then scroll to "Pay Old Balance" in household WebTrac account.
2. Automatic Payments through your Bank. Checks need to be made out to: Village of Riverside
To the attention of: the Riverside Parks and Recreation Dept. at 27 Riverside Road in Riverside, IL 60546.
3. In-Person at 43 E. Quincy St, Riverside, IL, 60546

Payment Reminders

Payment reminders will be sent 1 week before the payment deadline. Remember to pay by the deadline, if you need to cancel or make a changes please contact before us before the payment deadline.

Riverside Parks & Recreation Summer Day Camp Acknowledgment Form

Please fully complete all necessary paperwork and turn in all paperwork by April 27th, 2023 to the Riverside Parks & Recreation Department. Your child is not officially enrolled in camp until all required forms are turned in.

Important Documents

The Riverside Parks and Recreation Department 2023 Parent Manual for the Summer Camp program has been prepared for your information and understanding of the policies, philosophies, practices and benefits of our camp program. Please ensure you review the manual with your child so they fully understand the rules and procedures at camp. Please sign and submit the other documents if required along with this form. Parent Manual is available online at www.riverside.il.us

Government→ Departments→ Parks&Recreation→ Recreation→ SummerCampAtRiversideParksandRec



Indicates Additional Form to be turned into Riverside Parks and Recreation Department along with this

I, _____ (print parent/guardian), have thoroughly read a copy of the Riverside Parks and Recreation Department 2023 Parent Manual which outlines the goals, policies, benefits, and expectations of the Riverside Parks and Recreation Camp Program, as well as my responsibilities as a parent/guardian, and the responsibilities of my child (camper) enrolled in the program. I have familiarized myself with the contents of this manual. By my signature on this form, I fully acknowledge, understand, accept and agree that my child and I will comply with the information contained in the Riverside Parks and Recreation Department 2023 Parent Manual.

Participant Liability Waiver & Hold Harmless Agreement

Please read this form carefully. By registering for and participating in the above mentioned programs, or by registering your minor child/ward for participation in said programs, you are waiving your rights and/or the rights of your minor child/ward to all claims for injuries you or your minor child/ward might sustain arising from this program and you agree to indemnify, hold harmless and defend the VILLAGE OF RIVERSIDE for any claims arising out of participation in the programs. I give permission to the VILLAGE OF RIVERSIDE Parks & Recreation Department to take and use photos of participant/registrant and use these photos for marketing purposes for Riverside Parks & Recreation Department.

Adherence to careful sanitation, masking and social distancing protocols will not prevent the communication of disease, including COVID-19, in every situation. Furthermore, the policies contained in the manual should not be interpreted as setting a standard of precaution or care, or be deemed inclusive of all proper methods of precaution or care, nor exclusive of other methods of precaution or care reasonably directed to obtaining the same results.

The ultimate judgment regarding the propriety of any specific action must be made by each individual in consultation with their physician and in light of all the circumstances presented by the current pandemic, and the known variability and biological behavior of the individual's medical condition.

The protocols described in the manual and undertaken by Riverside Parks and Recreation Summer Camp reflect the best available information at the time they were prepared. The results of future studies may require revisions to the recommendations or procedures set forth in this manual.

The Village of Riverside does not make any warranty, express or implied, as to the accuracy or completeness of these protocols or any of the measures described therein, and undertakes no obligation and assumes no responsibility for any injury or damage to persons or property arising out of or related to the

procedures set forth in the manual and any information provided therein or for any errors or omissions. The sole risk of participation in Summer Camp is that of each individual alone.

In the event of any emergency: I authorize the public entity to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my minor child's immediate care and agree that I will be responsible for payment of any and all medical services rendered.



PARTICIPANT EMERGENCY FORM – 2 SIDED SHEET must be emailed back or dropped in Riverside Drop box.

This form requires standard registration information and other personal health facts about your camper. All boxes must be filled in. This sheet must be completed with all parent or legal guardian information, and also allows the parent or legal guardian to submit additional names and information of people that will be allowed to pick up their camper from the Riverside Parks and Recreation camp. Any changes to this form must be made by the administration at the Riverside Parks and Recreation Department. Email or call Riverside Parks & Recreation to follow the steps. ****When completing the swimming capabilities section, please do not select yes *and* no or write in 'maybe'. You must choose whether or not your child can swim. If you select yes, your child will be allowed to enter the deep ends of all swimming pools after passing a swim test with us, and will not be restricted from any water activities (diving boards, water slides, etc.).**



SELF SIGN-IN AND SIGN-OUT FORM (Optional starting in 3rd grade and up by request only)



MEDICATION AUTHORIZATION/RELEASE FORM (by request only)

I have read and fully understand and voluntarily agree to the above stated conditions of participation in the above program(s).

Child's Name: _____ **Date:** _____

(Please print clearly)

Parent's Signature: _____ **Date:** _____

Parent's Name: _____ **Date:** _____

(Please print clearly)

Riverside Parks & Recreation			Household Email Address (es):		
Emergency Form			_____		
Participants Name:			Select Days Attending		
			<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F <input type="checkbox"/> May vary		
Address:					
Birthdate:	Age:	Grade:	<input type="checkbox"/> Male <input type="checkbox"/> Female	School	
Mother/Legal Guardian:					
Address (if different):					
Home Phone:			Cell Phone:		
Work Phone:			Work Address/City:		
Father/Legal Guardian:					
Address (if different):					
Home Phone:			Cell Phone:		
Work Phone:			Work Address/City:		
Parents are <input type="checkbox"/> living together <input type="checkbox"/> separated <input type="checkbox"/> divorced <input type="checkbox"/> other:					
Fears/phobias? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:			Medical conditions/limitations? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:		
Does your child have allergies? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:			Is your child on medications? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:		
Dietary restrictions? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:			Is there medication required during the program? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are your child's immunizations including tetanus shot up to date: <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:			Can your child swim? <input type="checkbox"/> Yes (No Limitations) Permits child to take swim test with us, must pass for eligibility for no limitations. <input type="checkbox"/> No <i>Please note there is no "kind of."</i>		

Participants Name	
EMERGENCY NUMBERS AND TRANSPORTATION AUTHORIZATION	
How will your child be transported to the program? <input type="checkbox"/> Walk/Bike <input type="checkbox"/> Public Transportation <input type="checkbox"/> Car	
Please list those authorized to transport your child to and from the Riverside Parks & Recreation Department. In the event that someone who does not usually transport your child should arrive for pick-up, they will be requested to produce ID before the child will be released. The individuals listed below will also be contacted in the event of an emergency or illness if we are unable to reach you.	
Name:	
Relation:	Phone:
Name:	
Relation:	Phone:
Name:	
Relation:	Phone:
Name:	
Relation:	Phone:
Name:	
Relation:	Phone:
Signature of Parent/Legal Guardian	Date
EMERGENCY CARE AUTHORIZATION	
In the event of any emergency, I hereby authorize Riverside Parks & Recreation Department to secure from any licensed hospital, physician, or medical personnel any treatment deemed necessary for my child's/ward's immediate care and agree that I will be responsible for payment of any and all medical services rendered.	
I also, authorize staff to administer CPR & First Aid for which they are trained. In case of an accident or health emergency, paramedics will be called. Every effort will be made to contact parents or guardians immediately.	
Signature of Parent/Legal Guardian	Date
AUTHORIZATION TO PARTICIPATE IN ALL ACTIVITIES	
My child has my permission to participate in all activities at the Riverside Parks and Recreation Department facilities. All activities will be scheduled on a daily basis, weather permitting. I understand that my child will be supervised and the safety rules will be enforced. In addition, I understand that any photos or video taken by Village of Riverside employees during Village of Riverside programs/activities become property of the Village of Riverside and may be used for marketing purposes.	
Signature of Parent/Legal Guardian	Date