



GENOA TOWNSHIP PARK DISTRICT

Summer Care Program

Registration Packet & Parent Guide

All camper forms must be returned prior to the start of the campers first day of camp.

If you have any questions or concerns, please contact:

Doug Kenney
dougk@genoaparks.com

Kids Klub and Day Camp Director
400 E. Second Street
Genoa, IL 60135
815/784-5612 office 815/784-5051 fax



www.facebook.com/GTPDKidzklub

Summer Camp Parent Handbook

The philosophy of Camp Chamberlain is to provide a fun and safe environment. The program is designed to allow children to explore and gain new experiences. It is very important not to totally structure the program, as children need a chance to unwind, relax and play with their peers. The camp program will offer both structured and unstructured activities each day. Activities include arts and crafts, sports, games, creative play, board games, swimming and field trips.

Staff is aware that each child has different needs. Some children are very excited, active and need to run off their tensions, while others need a quiet place to relax. The staff will make every effort to assure that the individual needs of each child are met. The children will have a variety of activities to be involved with.

Camp Contacts & Phone Numbers

Camp Phone 815/757-0660 4:00-6:00 pm

Superintendent of Recreation

Doug Kenney 815/784-5612 ext. 304
dougk@genoaparks.com

Administration Office – Billing/Payments

Monica Napiorkowski May 31-August 10
815/784-5612 ext. 301

Monican@genoparkdistrict.com

Sandi Rease 815/784-5612 ext. 302
sandir@genoparkdistrict.com

General Policy

Enrollment is open to children ages 5 through 11 years old and *provided the program can meet the needs of the child. We do not accept children in diapers or pull ups.*

Information Updates

If at any time the participant or parent/guardians telephone number, address or other pertinent information changes, please notify the Camp Director or the appropriate staff person listed on the list above.

Concerns/Problems

Any troubles your child has at other activities or at home may affect behavior during the program. Please keep us informed of any circumstances so we can be sensitive to your child's needs. The staff would like to work as a team with family. Your input is vital to accomplishing this goal.

Photographs

Pictures may occasionally be taken of the campers through the summer. These pictures are used for historical and marketing purposes (seasonal brochure, website, Facebook, Instagram, etc.) By registering for Genoa Park District Summer Day Camp, you have granted us permission to use your child's images.

Emergency Medical

We will always try to provide a safe environment for your child. If a child is injured at camp, the staff will administer first aid to any minor injury (bumps, bruises, cuts, scratches, etc.) If a serious injury occurs, the parent/guardian will be contacted by phone immediately and a staff person will remain with the child until the parent arrives. If you cannot be reached, we will call the emergency numbers you provided on the information form. In the unlikely event of a serious injury or illness that requires emergency medical attention, paramedics will be called, and if need be, transported via ambulance to the nearest facility. A staff member will accompany them to that nearest facility. If your child becomes ill while at camp, we will call you to notify you of the situation. If your child has a fever or is vomiting, or experiencing diarrhea, we will request that your child be picked up as

soon as possible. The site supervisor will determine if your child should be removed for that day due to the illness. If it is decided that it would be in the best interest to do so, AN AUTHORIZED PERSON MUST PICK THE CHILD UP FROM CAMP.

Health Policy

Children with contagious illnesses or infestations (such as head lice) will not be permitted to stay in the Camp Discover while the illness or infestation is still active. While we do realize this may be an inconvenience, we must follow health guidelines on this matter, to ensure the safety and health of all our students and staff.

COVID-19 Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have: Fever or chills-Cough-Shortness of breath or difficulty breathing-Fatigue-Muscle or body aches Headache-New loss of taste or smell-Sore throat-Congestion or runny nose-Nausea or vomiting-Diarrhea-Trouble breathing-Persistent pain or pressure in the chest-New confusion-Inability to wake or stay awake- Bluish lips or face If your child is showing symptoms of COVID-19, we will ask you to pick up your child immediately. Your child will be quarantined in the administration room until you come to pick up your child. In order to return to our program, the participant must be symptom free for 72 hours after the last symptom, a note from doctor confirming a negative test result.

Head Lice: The participant must be nit free in order to return to the program and a release note from a healthcare professional should be obtained and submitted 2 full business days prior to a student's intended return.

Conjunctivitis (Pink Eye): Participants with bacterial conjunctivitis may not return to the program until the active infection passes or until 24 hours after treatment begins.

Viral Conjunctivitis: Requires a doctor's release stating the participant does not have bacterial conjunctivitis.

Chicken Pox: Participants with chicken pox may return to the program when all blisters have dried and formed scabs, about 7 days after the onset of the rash.

Streptococcal Sore Throat: Participant may return to the program 24 hours after the treatment begins, providing there has been no fever for 24 hours and antibiotics will continue for 10 days.

Fever: Any fever over 99.5 participants should stay home. Participants must be fever free for 24 hours before returning to the program.

Medication

Campers that need to take medication need to fill out a medication form before we can dispense any medication. *The form can be picked up at the front desk.* Medication can be dropped off at that time to the Superintendent of Recreation or Camp Director. Medication needs to be in the original prescription bottle with the child's name on it and specific directions for dosage. The correct dosage must be on the bottle. Please do not let campers carry their own medication. We prefer not to dispense over-the-counter medication, but if it is imperative the medication form must still be filled out and the medication must be clearly marked with the child's name, the name and dosage of the medication and explicit directions of administration.

Allergy/Asthma

If your camper has a severe allergy (nuts, bee stings, etc.) and or/if there is a prescribed EpiPen, please complete and **Allergy Action Plan**. If your camper has Asthma and may need to use an inhaler at camp, please complete and **Asthma Action Plan**. All medication forms can be picked up in the administrative office.

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. Please notify staff of any known absences. (See numbers on page #2)

Camp Activities

Camp leaders will be responsible for the activities for the campers. These will include art and nature activities, games, swimming, quiet time and some free play time. Organized activities will take place from 9:00 am – 4:00 pm. 4:00-6:00 pm we will be at Chamberlain Park. If we have severe weather, rain or extreme heat, we will stay in the camp area.

Drop off/Pick up Policies

Arrival to Camp

Absences or arrival after 9:00 am

If a camper will be absent or arriving late to camp, it is important to call the Park District and leave a message for the Camp Director and staff, 815-784-5612 ext. 305.

Early Pick Up

In cases you may be picking your camper up early, you **MUST** notify camp staff when dropping your child(ren) off in the morning.

Late Pick Up

Please make sure to pick up your child promptly at 6:00 pm and sign them out. Starting at 6:01 pm, you will be charged \$10.00 for every 15 minutes pickup is delayed. Payment is due at the time of pickup paid directly to staff. Participants whose parents are habitually late (more than 5 times) will be removed from the program. If you're going to be late, please call the camp phone at 815/757-0660 if after 4:00 pm.

Departure from Camp

Parents/guardians are **required to sign their children out each day of camp**. If your child will need to leave camp early, please leave a written note at the sign-in table in the morning to let us know that you will be picking up your child early and what time. Campers can be signed out at the park district office or where the camper's activities are taking place when being picked up early. **Only the people listed** on the "Personal Information Form" will be authorized to pick up your child(ren) at camp. If there is any change in a pick-up person, the change needs to be made on the form ahead of time. If it is a one-time thing, we will need a note given to us ahead of time by the parent. We do check ID's. ***Please see COVID-19 attachment for additional pickup information.***

What should campers wear?

Campers should wear clothing appropriate for the weather. Camp will be outside as much as possible. Shorts and T-shirts are usually perfect. Your child will come home dirty with some things that may not come out in the wash, so please make sure they wear play clothes. All campers need to wear socks and gym shoes. Sandals are not permitted. Sunblock should be applied before coming to camp. Camp leaders will remind children at times during the day to reapply sunblock. Parents are required to provide sunblock for their camper. The Park District will not be responsible for providing sunblock.

Items campers need to bring

- A large healthy lunch with enough left over for an afternoon snack and beverage
- Sunblock with an SPF of at least 30, SPRAY BLOCK IS RECOMMENDED
- Book to read during down time
- Extra change of clothes (optional)
- Water bottle (optional)
- Plastic bag for wet clothes (optional)
- A backpack to put everything in – with their name on it

What not to bring to camp

Money

Gum

Glass bottles

No electronic equipment (phones, video games/devices, etc.)

No personal possessions from home (toys, action figures, trading cards, etc.)

EVERYTHING NEEDS TO BE LABELD WITH YOUR CHILDS NAME ON IT

Genoa Township Park District and Staff Are Not Responsible For Lost, Misplaced, Damaged Items

Cell Phone policy

If parents require that their child possess a cell phone with them at camp for emergencies or after camp hours, the cell phone **MUST** remain in their back pack while at camp.

Fire Arms Policy

Firearms are prohibited on park district property. No Firearms Signs are posted clearly on all park district doors, which are located on the main office, pool door and day camp room entrance door.

Background Check Policy

All camp/club staff comply with the background check and clearance procedure through Illinois Department of Human Services CCAP. The park district also provides a background check through a third party for all park district staff. This is required on a yearly basis.

Please Note: Genoa Township Park District is not licensed or regulated by DCFS.

Swimming

All campers will take a swim test with the Chamberlain Park Pool staff before being allowed in the pool. Campers will receive wristbands determining which areas of the pool they can swim. GREEN wristbands allows swimmers to swim in all areas of the pool. They are only allowed to use the bowl slide if: they can tread water for 1 minute without assistance, meet the 48" height requirement, and if given parental permission. RED wristbands are only allowed in water that is no deeper than their chest. They may use the small blue slide if they meet the 42" height requirement and if given parental permission.

Swim Lessons

Campers are given a 10% discount if they attend camp 5 days a week and attend the morning sessions. Discount is not available for the evening session or if the camper attends less than 5 days a week. Your camper will be escorted to and from their swim lesson by a camp counselor. If your camper is not an attending camp on a swim lesson day you are responsible for getting your child to the lesson. No refunds will be given for missed lessons. This includes but not limited to, vacation or sick days.

Supervision at Chamberlain Park Pool

Campers are placed in small groups with a camp counselor with access to the areas their bands allow them to go. Campers will be supervised at all times while at the pool. Campers will need to notify a counselor when a bathroom break is needed. Campers will be escorted to and from the locker room facilities.

Sunscreen

Because camp can have outdoor activities, please apply sunscreen to your camper before he/she arrives for the day. A recommended sunscreen of at least SPF 30 should be provided for your camper. Please provide your camper with SPRAY on sunscreen. Label the bottle with your campers' name. Put name on duct tape first so that it can be returned if lost. The Park District will not provide sunscreen. If your child burns easily, you might want to consider sending a white t-shirt and hat. Campers are instructed to apply sunscreen at every swim break, which occurs every hour on the hour. Also, at that time we hydrate and use the restroom. Staff will assist your child only if the child asks. Help is limited to areas the child cannot reach.

Camp Code of Conduct

In keeping with our program goals, we encourage fun for all of our participants. However, certain rules are necessary to ensure everyone's safety and enjoyment. Participants are expected to:

- Show respect for all participants and staff
- Treat others the way you want to be treated
- Keep your hands, feet and objects to yourself
- Be polite and courteous and listen when others are talking
- Always clean up after yourself
- Stay with your group
- Show respect for equipment, supplies and facilities

Discipline at Camp

As with any large group of children, discipline must be reinforced by camp staff and the parents. We ask that you, as parents/guardians, please go over this information with your child so they are aware of the consequences of poor behavior. There are certain consequences that may affect me or my child(ren's) participation or attendance of field trips for not following policies and procedures.

Below is a list of some common behavior problems, but not limited to, that WILL NOT be tolerated at camp:

- Endangering the health and safety of the children and/or staff
- Theft or damage to camp facilities or personal property
- Continuous disruption of the program
- Lewd or obscene behavior
- No obscene or foul language
- No photographic devices
- Leaving the program area without permission

First offense: Explain to the child the park district rules, what they did that was incorrect and why they should not repeat the action. This seems to work most of the time.

Second offense: Same as above, but with removal from the activity.

Third offense: Same as above, but with parental notification at this point. Ongoing problems after the third warning will involve a parent conference with possible removal from camp. **Depending on the infraction, any of these steps may be eliminated.**

There is zero tolerance for violence at the Genoa Township Park District.

Camp Fees

Camp fees are based on your daily needs for 3 – 5 days a week. Below you will find a list of our weekly rates and payment schedule. There is a \$35.00 non-refundable registration fee along with a \$10.00 per week per child deposit that is due at the time of registration. Camp payments are due on Friday prior to the start of the following week. ***Campers will not be allowed to attend camp if the weekly fee has not been paid in full.***

Resident 1 st /2 nd Child(ren)	Non-Resident 1 st /2 nd Child(ren)
5 Days \$180.00/\$170.00	5 Days \$200.00/\$190.00
4 Days \$150.00/\$140.00	4 Days \$165.00/\$155.00
3 Days \$120.00/\$110.00	3 Days \$130.00/\$120.00
2 Days \$100.00/\$90.00	2 Days \$110.00/\$100.00
1 Day \$50.00/\$45.00	1 Day \$55.00/\$50.00

Attached you will find a credit card automatic authorization form. You MUST have a current credit card on file at all times. **No refunds will be given for missed camp days.**

Weekly Payment Schedule

Week #1—05/30/23-06/02/23
Week #2—06/05/23-06/09/23
Week #3—06/12/23-06/16/23
Week #4—06/16/23-06/23/23
Week #5—06/26/23-06/30/23
Week #6—07/05/23-07/07/23
Week #7—07/10/23-07/14/23
Week #8—07/17/23-07/21/23
Week #9—07/24/23-07/28/23
Week #10-07/31/23-08/04/23
Week #11-08/07/23-08/11/23

Payment Due

Friday—May 26, 2023
Friday—June 02, 2023
Friday—June 09, 2023
Friday—June 16, 2023
Friday—June 23, 2023
Friday—June 30, 2023
Friday—July 07, 2023
Friday—July 14, 2023
Friday—July 21, 2023
Friday—July 28, 2023
Friday—August 04, 2023

Tax Information

Summer Care 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, ***our tax id is 36-6006293. Please retain your receipts for tax purposes. The Genoa Township Park District does NOT send out a yearend tax statement. Receipts will be sent via email. Please make sure we have a current email on file.***

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Genoa Park District

2023 Summer Care Camp Information

The parent/guardian must fill out the following information. The intent of this information is to provide camp staff with the appropriate care. **MUST BE COMPLETED AND RETURNED PRIOR TO THE CAMPERS FIRST DAY OF CAMP.**

PLEASE PRINT CLEARLY

Participant Information

Participants Name: _____ Nick Name: _____

Address: _____ City: _____ Zip: _____

Date of Birth: _____ Male: _____ Female: _____

Parent/Guardian Information

First Parent/Guardian: _____ Relation: _____

Address: _____ City: _____ Zip: _____

Primary Contact #: _____ Cell#: _____

Primary Email: _____

(Receipts will be emailed to this email address)

Second Parent/Guardian: _____ Relation: _____

Address: _____ City: _____ Zip: _____

Primary Contact #: _____ Cell#: _____

Email (optional): _____

Attendance

Weeks/Day Attending:

(please put an X next to the weeks and days your child will be attending camp)

Week #1—05/30/23-06/02/23 _____

Monday _____

Week #2—06/05/23-06/09/23 _____

Tuesday _____

Week #3—06/12/23-06/16/23 _____

Wednesday _____

Week #4—06/16/23-06/23/23 _____

Thursday _____

Week #5—06/26/23-06/30/23 _____

Friday _____

Week #6—07/05/23-07/07/23 _____

Total Days Attending per Week

Week #7—07/10/23-07/14/23 _____

Week #8—07/17/23-07/21/23 _____

Week #9—07/24/23-07/28/23 _____

Week #10-07/31/23-08/04/23 _____

Week #11-08/07/23-08/11/23 _____

Emergency Contact/Alternate Pickup

Other than the persons listed above, please list those who are able to pick up your child within 20 minutes of a call. Only persons listed above and below will be allowed to pick up your camper. **A photo ID will be required for anyone that is not a daily pickup person.**

Name	Relation	Number During Care Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Custody/Guardianship

Who has legal custody of this child? _____

Address _____ Phone _____

If guardianship is involved, who is the legal guardian of the child? _____

Address _____ Phone _____

If there is a custody issue with any child you must provide a copy of a court order that provides us with who has legal custody. If in the process of a separation or legal proceedings involving custody, we will require a letter signed by both biological parents that states who is authorized to pick up your child, and that the park district may contact either person regarding issues involving the child.

Additional comments: _____

Medical Information

Does your child have a severe food or other allergy that we need to know about? (If your camper has a severe allergy that requires medication, please complete a **Food Allergy Emergency Action Plan**. Forms are available upon request.)

Food Allergies	Describe reaction and how to manage reaction
_____	_____
_____	_____

Other Allergies (include insect or bee stings, hay fever, animal, etc.)

_____	_____
_____	_____

Does your child have Asthma?

Yes ☐

No ☐

If so, please fill out an **Asthma Action Plan** (available upon request) – Must be on file before child can attend camp.

Will staff be required to dispense medication during camp hours?

Yes ☐

No ☐

(If yes, please complete a **Permission to Dispense Medication Form**-available upon request. This form must be completed and submitted to Camp Director, Wendy Barthel before staff can dispense medication.)

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

Behavior Concerns

If your child has any special medical, physical, psychological and/or emotional needs or receives special services from the school district, please list in detail below. Lack of information may adversely affect the park district's ability to accommodate the needs of your child.

Swimming Permission

Campers will be going to the pool 4 days a week and will be given a specific color wristband that must be worn each day they are at the pool. The color of the wristband indicates the area of the pool they are allowed to swim in so counselors and lifeguards can easily identify them and make sure they are where they are supposed to be.

Green Wristband=Anywhere in the pool including waterslides, bowl slide (48") small blue slide (42")

Red Wristband=Can swim in water that is no deeper than chest deep and must be within an arms reach of a counselor at all times, small blue slide (42" tall), wading pool (7 years old or younger).

In order to be a green wristband, each camper **must** be swim tested by a pool manager regardless of their swim experience outside of camp. A successful swim test consists of swimming an entire length of the pool (25 yards) using a strong freestyle or breast stroke (doggie paddle & under water swimming is not allowed), non-stop, without touching the bottom/side of pool or getting assistance from lifeguard. Final decision is up to the pool manager. Also, a 1-minute treading water test is required if the camper would like to use the bowl slide. **(Please note, a lifeguard will stay alongside each camper during the swim test in case they struggle or need help.)**

Child's Swimming Ability: ☐ Non-Swimmer ☐ Beginner ☐ Intermediate ☐ Advanced

YES NO

Do you want your child to be swim tested?	<input type="checkbox"/>	<input type="checkbox"/>
Do you give your child permission to use the Bowl Slide? (48" Tall to ride)	<input type="checkbox"/>	<input type="checkbox"/>
Do you give your child permission to use the small blue slide? (42" Tall to ride)	<input type="checkbox"/>	<input type="checkbox"/>

The same wristband rules apply when visiting other aquatic facilities

Swim Lessons

Campers enrolled in swim lessons will be escorted to and from the pool deck with a counselor. Campers are in the class that starts at 10:10 am to allow them to eat lunch with their friends. If signing up for swim lessons, please sign up early to guarantee a spot at that time. (Campers receive a 10% discount if they attend 5 days a week.)

	Session/s	YES	NO
Is your child enrolled in swim lessons?		<input type="checkbox"/>	<input type="checkbox"/>
Will your child be participating in swim lessons?		<input type="checkbox"/>	<input type="checkbox"/>

Additional Information

- | | | |
|--|------------------------------|-----------------------------|
| ➤ May camp staff assist with applying insect repellent? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| ➤ If necessary, can staff provide insect repellent for your camper? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| ➤ If necessary, can staff provide sunscreen for your camper? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| ➤ May camp staff assist with re-applying sunscreen to your campers back, face, shoulders, if needed? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| ➤ May be allowed to watch G rated movies? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| ➤ May be allowed to watch PG rated movies? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| ➤ Did you review the handbook with you child(ren)? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Before retuning your packet, did you remember to.....

- fill out all blanks. Leave nothing empty
- fill out park district registration form (separate form)
- pay the \$35.00 non-refundable registration fee

Waivers and Release/Policy Acceptance

The Genoa Township Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Genoa Township Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for the below listed programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs. You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

Warnings of Risk

Transportation

Please read this form carefully and be aware that in consideration for the Genoa Township Park District providing transportation services to/for our Summer Camp Program, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of said services, including but not limited to, vehicle operations and boarding and exiting the vehicle.

I recognize and acknowledge that the Genoa Township Park District is neither a common carrier nor in the business of providing transportation services to the public. I further recognize and acknowledge that there are certain risks of physical injury to vehicle passengers, and I voluntarily agree to assume the full risk of any injuries, damages or loss, regardless of severity that my minor child/ward or I may sustain as a result of participating in any and all activities connected with or associated with receiving transportation services, including, but not limited to, injuries, damages and loss arising out of negligent operation or supervision of the vehicle. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) against the Genoa Township Park District, including its respective officials, agents, volunteers and employees (hereinafter collectively referred as "Parties"). _____Initials

Swimming

Swimming is intended to challenge and engage the physical, mental and emotional resources of each participant. However, despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including drowning. Understandably, not all hazards and dangers can be foreseen. The very nature of swimming is hazardous and risky, including but not limited to fatigue and overexertion, poor swimming skills, failing to avoid dangerous areas, horseplay, diving or cannon-balling into shallow water and striking the bottom or side of the pool, inadequate supervision or instruction, lack of conditioning, becoming disoriented, striking other swimmers, defective or inadequate equipment, striking one's head on the bottom when using a diving block, slip and falls on the deck or within the locker facility, chemical exposure and all other circumstances inherent to the sport of swimming. In this regard, it must be recognized that it is impossible for the Genoa Township Park District to guarantee absolute safety. _____Initials

Canoeing

Canoeing is intended to challenge and engage the physical, mental and emotional resources of each participant. However, despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including drowning. All hazards and dangers cannot be foreseen. Certain risks include, but are not limited to, dangerous weather and water conditions such as rapids, deep or cold water, above and subsurface rocks and obstacles, hydraulics, strainers and ledges, acts of God, and insect bites. Other risks include capsizing, being pinned between rocks, logs or trees, hypothermia, sunburn, heatstroke, dehydration, inadequate supervision or instruction, horseplay and carelessness, poor canoeing technique or swimming skills, loss of balance, collision with other canoes or stationary objects, paddling the canoe in waters too difficult for the canoeist's capability, inadequate or defective equipment, and failure to wear a personal floatation device or other safety equipment. In this regard, it is impossible for the Genoa Township Park District to guarantee absolute safety. _____Initials

FieldTrip

Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity/program. Understandably, not all hazards and dangers can be foreseen. Participants must understand that depending upon the particular activity, certain risks, dangers and injuries due to acts of God, inclement weather, slips and falls, inadequate or defective equipment, inadequate supervision or instruction, premises defects, carelessness, horseplay, vehicle accidents and all other circumstances inherent to recreational activities/programs exist. In this regard, it must be recognized that it is impossible for the (District/SRA) to guarantee absolute safety. _____Initials

Waiver and Release of all Claims and Assumption of Risk

Please read this form carefully and be aware that in signing up and participating in the programs listed below, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with these programs (including transportation services and vehicle operations, when provided). I recognize and acknowledge that there are certain risks of physical injury to participants in these program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs against the Genoa Township Park District, including its officials, agents, volunteers and employees.

In the event of an emergency, I authorize the Genoa Township Park District to secure and/All necessary medical attention from an accredited hospital 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 All Claims Assumption of Risk. I further understand that my signature is required below in order to participate in Genoa Township Park District programs. In addition, I agree to abide by all of the policies/procedures contained in the parent handbook.

I do hereby fully release and forever discharge the Genoa Township Park District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with Genoa Township Park District programs.

If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Parent/Guardian Signature _____ Date _____



GENOA TOWNSHIP PARK DISTRICT

Credit Card Automatic Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled or till the end of the program.

Credit Card Information
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____ Address: _____
Contact Phone Number: _____
Contact Email: _____
Card Number: <u>Do Not Email CC # FAX or DROP off ONLY</u> _____
Expiration Date (mm/yy): _____
Cardholder ZIP Code (from credit card billing address): _____
Program: _____
Childs Name: _____

Please note you must have a current card on file at all times

I understand that this authorization will remain in effect until I cancel it in writing/phone call, and I agree to notify the Office Manager in writing/phone call, of any changes in my account information or termination of this authorization *at least 1 day prior to the next billing date*. Transactions will occur: **weekly, every Friday**. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I acknowledge that the origination of Credit Card transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this Credit Card and will not dispute these scheduled transactions; so long as the transactions correspond to the terms indicated in this authorization form.

I hereby authorize Genoa Township Park District to process credit card transactions in the agreed amount as set forth in the payment fee schedule provided to me in the parent handbook based on the amount of days attending.

Customer Signature

Date

Any schedule changes need to be made by Thursday by 12:00 pm. Credit card will be charged the original amount as set forth in your schedule on Friday mornings