

Joliet Park District Participation Information Form (Please select program below)



- SUMMER CAMP
 SRJC
 TRACK CAMP
 LITTLE SPROUTS
 KIDS AT HART
 EARLY CHILDHOOD
 TROY TROJANS
 SUNSHINE & RAINBOWS/ KINDERGARTEN STAR CONNECTION

Participants Name: _____ Male or Female: _____

Address: _____

Birthdate: _____ Age: _____ Grade: _____

T-Shirt Size (please circle one):
 YOUTH: 6/8 10/12 14/16
 ADULT: Small Medium Large

Mother/Legal Guardian _____

Father/Legal Guardian _____

Address _____

Address _____

Home phone _____

Home Phone _____

Cell Phone _____

Cell Phone _____

Work Phone _____

Work Phone _____

Work Address: _____

Work Address: _____

Street/City/State/Zip Code

Street/City/State/Zip Code

Parents are: Living Together Separated Divorced Other

ADDITIONAL EMERGENCY/ PICK-UP CONTACTS:

Please list those authorized to transport your child to and from the program.

Name _____ Name _____ Name _____

Relation _____ Relation _____ Relation _____

Phone Number _____ Phone Number _____ Phone Number _____

In the event that someone who does not usually transport your child should arrive for pick-up, they will be required to produce a photo ID before a child will be released. The Individuals listed above will also be contacted in the event of an emergency or illness if we are unable to reach you.

Signature of Parent or Guardian: _____ Date: _____

Will your child be walking/riding their bike to and from the program?*	Yes	No	
IF YES, YOU WILL NEED TO FILL OUT THE PERMISSION TO LEAVE AND RETURN PROGRAM WITHOUT ADULT ESCORT			
Does your child have any medical conditions?	Yes	No	Please explain:
Does your child have any physical limitations that would require adaptive activities?	Yes	No	Please explain:
Does your child have allergies?	Yes	No	Please explain:
Does your child have dietary restrictions?	Yes	No	Please explain:
Does your child have seizures?	Yes	No	If yes, how often?
Is your child on medications?	Yes	No	If yes, list medications:
Is medication required during the program hours?	Yes	No	
IF YES, YOU WILL NEED TO FILL OUT THE PERMISSION TO DISPENSE MEDICATIONS WAIVER & INFORMATION SHEET			
Are your child's immunizations up to date:	Yes	No	
When was your child's last tetanus shot?	Date:		
Can your child swim?	Yes	No	Please describe, in detail, your child's swimming abilities:
Does your child use adaptive devices in the water?	Yes	No	Please explain:

*Does not apply to SRJC, Sunshine & Rainbows Early Learning Center, Kindergarten Star Connection or Early Childhood participants.

On what level does he/she participate in most activities? High Moderate Low None	Please explain what types of activities your child enjoys:		
What type of structure does he/she respond to best during activities? Highly Structured Moderately Structured Unstructured	Please explain:		
Is your child able to follow directions?	Yes	No	Please explain:
Which type of directions work best? Verbal Demonstration Combination of both	Please explain:		
How does he/she relate to a group most of the time? Prefer to be with group Prefer to be by him/herself	Please explain:		
Please describe the type of discipline your child responds to best:			
Is he/she able to adjust to new settings easily?	Yes	No	Please explain:
Does your child cope with unexpected changes in daily schedule?	Yes	No	Please explain:

PARTICIPANT'S FUN FACTS: PLEASE ASK YOUR CHILD TO PROVIDE THESE ANSWERS.

Favorite Activity _____	Favorite Animal _____
Favorite Candy _____	Favorite Flower _____
Favorite Place They Like To Go _____	Favorite Sports Team _____
Favorite Color _____	Favorite Song/Group _____
Favorite Food _____	Favorite Season _____
What Do They Want To Be? _____	

EMERGENCY CARE AUTHORIZATION

In the event of any emergency, I hereby authorize Joliet Park District 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 guardian immediately.

Signature of Parent or Guardian: _____ Date: _____

ACTIVITY AUTHORIZATION:

My child has permission to participate in all activities at the program. I also understand that these activities will be taking place on the Joliet Park District Property (including but not limited to the Multi-Purpose Center, Hartman Recreation Center, Inwood Park, Joliet Memorial Stadium, Harlow Lockwood Sports Complex, Provena Saint Joseph Inwood Athletic Club and Splash Station Waterpark.) 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. This is not intended as a waiver or release of any legal responsibility.

Signature of Parent or Guardian: _____ Date: _____

LATE FEE STATEMENT:

I understand that my child may be picked up five minutes before or after ending time of the program/camp that I have registered them for. If I arrive after this time, a late fee will be assessed for the program, with one courtesy allowance. The late fee is \$10.00 for 5-15 minutes after pick-up and an additional \$5.00 for each 5-minute period beyond 15 minutes. An acknowledgement form must be signed and the fee must be paid by the following business day or my child will not be able to attend the program that day. I understand that if this is the fourth time this child has been picked-up late, my child may be dismissed from the program.

I have read and understand the Late Fee agreement with the Joliet Park District.

Signature of Parent or Guardian: _____ Date: _____

MOVIE PERMISSION

My child has permission to view movies at the program. I understand that all movies shown will have ratings of "G" or "PG".

Signature of Parent or Guardian: _____ Date: _____

Please list any movies that you feel may not be appropriate for your child/children: _____

Sign & Return to the Joliet Park District

Joliet Park District Programs Behavior Guidelines and Disciplinary Procedures

Participants are expected to always exhibit appropriate behavior in order to maintain a safe and enjoyable environment. As with any large group of children, a strict discipline policy must be enforced by the Joliet Park District Staff. We ask that you, as parents, please go over this information with your child so they are aware of the consequences of unacceptable behavior. Below is a list of some common unacceptable behavior that will not be tolerated.

1. Harming one's self such as, but not limited to
 - A. Leaving designated grounds without permission
 - B. Leaving designated group without permission
 - C. Physical damage to self
 - D. Possession, use or transfer of alcohol, illegal drugs, tobacco or tobacco products...this includes matches and lighters

2. Harming others such as, but not limited to:
 - A. Fighting
 - B. Throwing objects at or near others
 - C. Bringing or using weapons...knives, glass, sharp objects, etc.
 - D. Extreme verbal use
 - E. Profanity
 - F. Other aggressive behaviors

3. Damage to property
 - A. Vandalism
 - B. Tantrums resulting in damage to property
 - C. Breaking, damaging or destroying property
 - D. Theft: taking any item that does not belong to the participant

Note: Parent/Guardian of program participants will be responsible for any damages caused by their child/participant.

DISCIPLINE PROCEDURES

Staff will reinforce appropriate behavior through firm statements and redirection of activity. Listed below are the discipline procedures for campers who are exhibiting unacceptable behavior.

Time Outs are used as a disciplinary measure for minor infractions of the program rules. During a time out, a participant will have to sit out from activities including games, crafts, swimming or a special event. If the misbehavior continues or if a more serious infraction has taken place, the 3 strike process will begin to take effect.

1st strike: Warning: A form will be given to the parents/guardian to be signed and acknowledged by the parent/guardian and program participant.

2nd strike: Warning/Suspension: A form will be given to parent/guardian to be signed. Also, a meeting will be held with the participants and parent/guardian in which suspension for the following day may be a result if deemed necessary by Program Director.

3rd strike: Warning/Suspension: A form will be given to parent/guardian to be signed. Also, a meeting will be held with the participant and parent/guardian of participant in which suspension may be a result if deemed necessary by Program Director

OUT!: Participants will be dismissed from current session of program or for the next couple sessions. A refund will not be issued for any missed days due to unacceptable behavior.

****The Joliet Park District staff reserves the right to suspend or expel any participant whose actions are seen as detrimental to the camp program. Each situation will be evaluated on its own merit. The staff may develop additional rules for each site as they deem necessary.

I have read and discussed the Discipline Policy of the Joliet Park District with my child. I also acknowledge that I received adequate information and understand the disciplinary action taken by the Joliet Park District.

Signature of Parent or Guardian: _____ Date: _____

Signature of Child: _____ Date: _____