

Vernon Hills Park District Camp Forms (4 Pages)
Due June 4th Session 1 and July 2nd Session 2 (Girlfriends, Sports Camp, The Crew)
Due June 11th Session 1 and June 25th Session 2 (Camp Triple E)

Cover Sheet: Page 1

My Child Attends Camp:

Session 1:

Session 2:

(If you have multiple children in camp, each child will need their own set of Camp Forms)

My Childs Name Is:

My Name is (Guardian):

I can be reached at the following in case of urgency:

() _____ **Email:** _____

Noteworthy Comments:

**Please take the time to write out any information here that you think the Recreation Supervisor,
Camp Director and Camp Counselor should know prior and during start of camp.**



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Camp Transportation Authorization Form: Page 2

Child's Name _____

The following people have permission to transport my child:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

For the following questions, please circle yes or no:

My child is allowed to walk home from camp at the end of the camp day Yes No

My child is allowed to bike home from camp at the end of the camp day Yes No



Participant Conduct Policy: Page 3

The Vernon Hills Park District reserves the right to suspend, expel or deny participation in any program, event or facility to any person whose behavior materially interferes with, or disrupts the quality of those offerings, the enjoyment of them by other participants, or the ability of staff to conduct or manage the activities or facility. Parents, please take a few moments to go over these steps with your child.

1. A child's parent or guardian shall be notified of the first incident.
2. The second incident shall require the presence of a parent or guardian at a meeting with the Camp Director and a Park District Administrator/Supervisor.
3. A third incident will result in an expulsion or suspension of the child from the program, event or facility.

If a child engages in behavior which poses a threat of bodily harm to themselves or to others, an immediate meeting with the parent or guardian may be called. If such behavior warrants it, immediate suspension or expulsion may result.

I have read and understand the Participant Conduct Policy of the Vernon Hills Park District.

Parent/Guardian Signature

Camper's Signature



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Camper Data Form: Page 4

Please complete this form and return it to the Vernon Hills Park District Office, 635 North Aspen Drive, Vernon Hills, IL 60061 or fax to (847) 996-6801. One form per child please

Child's Name _____ Age ____ Birth Date _____

Grade in Fall _____

Address _____

Parent/Guardian _____

Home #: _____ Work #: _____

Cell # _____

Emergency Name _____ Phone _____

Will your child be taking medication while at camp? YES _____ NO _____

*****IF YES, please come to the Sullivan Center for a Medication Dispensing Information Form and a Permission to Dispense Medication Waiver. These are not available on-line or by mail.**

Please list below any medications your child receives but DOES NOT take at camp.

NAME OF MEDICATION	DOSAGE	SIDE EFFECTS
_____	_____	_____

Are there any physical or medical conditions or limitations? Please explain.

Any fears, anxieties or concerns you'd like us to know about, to help make your child's camp experience a good one? _____

ALLERGIES

Does your child have known allergies? YES _____ NO _____

If Yes, please list:

