



Adler Day Camp 2016 Contact Information / Parent Agreement



Please check the Session(s) your child will be attending:

<input type="checkbox"/> June 6-10	<input type="checkbox"/> June 13-17	<input type="checkbox"/> June 20-24	<input type="checkbox"/> June 27-July 1	<input type="checkbox"/> July 4-8
<input type="checkbox"/> July 11-15	<input type="checkbox"/> July 18-22	<input type="checkbox"/> July 25-29	<input type="checkbox"/> August 1-5	<input type="checkbox"/> August 8-12

Grade entering in the Fall: **K** **1** **2** **3** **4** **5** **6** **7**

Child's Name: _____ Age: _____ DOB: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____

Parent/Guardian: _____ Parent/Guardian: _____

Daytime Phone #: _____ Daytime Phone #: _____

Cell #: _____ Cell #: _____

Email Address: _____

Emergency Contacts

Notify: (1) _____ Phone #: _____ or #: _____

(2) _____ Phone #: _____ or #: _____

Additional Authorized

Pick-Up Names: (1) _____ Phone #: _____ or #: _____

(2) _____ Phone #: _____ or #: _____

1. I hereby certify that (Participant) _____ is in normal health and capable of participating safely in the Adler Day Camp and has Health Insurance and that the Village of Libertyville and all other participating agencies are not liable for any accidents while participating in the Adler Day Camp.

2. Please list any allergies or other medication problems. Is your child currently taking medication? If Medication is being administered during camp hours (Must have Medication Form on File). _____

3. In a life threatening emergency, and the parent is not reachable, does the Adler Day Camp Staff have parental approval to transport child in Emergency Medical Service Vehicle to the nearest hospital? (Parent / Guardian Initials) _____.

4. I give permission to the Libertyville Recreation & Sports Complex Department to take pictures of my child for publicity use. (Parent / Guardian Initials) _____.

5. I give permission for my child to be transported in the Village of Libertyville Van and/or the Chartered School Bus for camp field trips (Parent / Guardian Initials) _____.

Signature of Parent / Guardian

Date



VILLAGE OF LIBERTYVILLE
RECREATION & SPORTS COMPLEX DEPARTMENT
SUMMER DAY CAMP 2016
SWIMMING INFORMATION SHEET

In order for us to better evaluate your child's swimming ability, please complete the following information and return it with the Contact Information/Parent Agreement Form no later than the Tuesday that proceeds the first day of the camp session. *Note: This form does not replace our swimming evaluation.

You can drop this sheet off at Adler Day Camp, the main office at the Libertyville Sports Complex or mail to: Village of Libertyville 1950 N. US Highway 45, Libertyville IL 60048, c/o JULIE LUDWIG.

CHILD'S NAME: _____ AGE: _____ GRADE: _____

To the best of your knowledge, how would you rank your child's swimming ability?

- Swimmer (swims comfortably without assistance)
- Swimmer of limited ability (can swim without assistance, but tires easily)
- Non-swimmer (needs assistance or a floatation device while in the water)
- DO NOT want my child to participate in the Adler Day Camp SWIMMING

Is your child comfortable jumping off diving boards? YES NO

Is your child allowed to swim in the deep well pool area at an aquatic facility? YES NO

Is there any other information you feel we should know about your child's swimming ability? _____

Which session(s) will your child be attending?

- | | | | |
|-----------------------|-------------------------|-----------------------|---------------------------|
| Session 1: June 6-10 | Session 2: June 13-17 | Session 3: June 20-24 | Session 4: June 27-July 1 |
| Session 5: July 4-8 | Session 6: July 11-15 | Session 7: July 18-22 | Session 8: July 25-29 |
| Session 9: August 1-5 | Session 10: August 8-12 | | |

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

In consideration of The Village of Libertyville ("the Village") granting the Participant the right and opportunity to participate in the program(s) identified in this Registration Form ("Programs"), and other good and valuable consideration, the sufficiency of which is hereby acknowledged, the Participant, hereby agree as follows:

Acknowledgement and Assumption of Risk of Injury: The Participant acknowledges that there is an inherent risk of injury in the Participant's participation in the Programs, and that, specifically and without limitation of the foregoing, the Programs may involve strenuous exertion or bodily contact that are hazardous recreational activities. The Participant acknowledges and agrees that they have sole responsibility, and the Village has no responsibility whatever, to determine whether the Participant is physically fit and otherwise able to participate in the Programs. The Participant agrees to assume the full risk of any injuries, including death, and at all costs, damages, and losses, including medical bills, that the Participant may sustain as a result of participating in the Programs, or as a result of the condition, maintenance, and use of any public property involved in the Programs.

Waiver and Release of Claims for Injury: The Participant shall, and does hereby, waive, release, and relinquish all claims of every kind, including claims for personal injuries, known and unknown, present and future that the Participant may have against the Village and its officers, agents, servants, and employees, arising out of, connected with or in any way related to the Programs or the Participant's participation therein, or as a result of the condition, maintenance, and use of any public property involved in the Programs.

Indemnity: The Participant shall, and does hereby, indemnify and hold harmless the Village and its officers, agents, servants, attorneys, and employees from and against any and all claims of every kind, including claims for personal injuries, known and unknown, present and future, that the Participant may have arising out of, connected with, or in any way related to the Programs or the Participant's participation therein, or as a result of the condition, maintenance, and use of any public property involved in the Programs.

Interest: The Participant acknowledges and agrees that they have no fundamental property or liberty interest in participating in the Programs, and that their participation in the Programs is conditioned upon the Participant's compliance with all Village regulations and instructions concerning the Program. The Participants have read and fully understands this document and executes it of their own free will and without any reservation whatsoever.

PLEASE SIGN HERE. One parent or guardian must sign if participant is under the age of 18 years.

SIGNATURE: _____ **DATE:** _____

