Ela Township

Spring Break Camp March 25-March 29, 2024





Ela Township Youth Department 847-438-9160

youth@elatownship.org www.elatownship.org/youth







Ela Township Youth Department Spring Break Camp 2024

ALL PARTICIPANTS MUST RESIDE IN ELA TOWNSHIP

Monday, March 25 Tuesday, March 26 Wednesday, March 27 Thursday, March 28 Friday, March 29

Times: 8:30am - 4:30pm Drop-Off: 8:30am - 9:30am

Pick-Up: 3:30pm—4:30pm

Grades: K-6th

Location: Ela Township Community Center 380 Surryse Road, Lake Zurich, IL 60047 847-438-9160

Cost: \$50 PER CHILD PER DAY

*Must cancel 2 weeks in advance to receive a refund or credit

Daily activities include field trips, group games/activities, arts & crafts, free time (board games, puzzles, etc.) and much more.

Participants need to bring their own sack lunch and 2 snacks.

Registration:

48 participants per day maximum

***Limited space available. Registrations will be accepted on a first come, first served basis.

Registrations may be dropped off at the Ela Community Center. Payment **MUST ACCOMPANY REGISTRATION** in order to reserve a spot. Cash, check, made payable to *Ela Township*, or credit card (2.65% fee added)

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DAY/DATE	FIELD TRIP	ATTENDING
Monday, March 25	Movie: Kung Fu Panda 4	YES / NO
Tuesday, March 26	Cuba Marsh	YES / NO
Wednesday, March 27	Bowlero	YES / NO
Thursday, March 28	Knox Park Day	YES / NO
Friday, March 29	USGTC	YES / NO

This information is VERY important, please take the time to be thorough and legible. **Child's Information:**

I II be I territe.			Last Name: _		
Age:	Birthday (M/D/Y): _	/	/ Grade:	School:	
First Name:			Last Name: _		
Age:	Birthday (M/D/Y): _	/	/ Grade:	School:	
First Name:			Last Name: _		
A ~~.	Birthday (M/D/Y):	/	/ Grade:	School:	
Parent/Guardian	Information: PRIM	IARY E-N	MAIL:		
Parent/Guardian		IARY E-N	MAIL:		
Parent/Guardian Parent/Guardian 1:	Information: PRIM	IARY E-N	MAIL:	Relationship:	
Parent/Guardian Parent/Guardian 1:	Information: PRIM	[ARY E-N _ Cell #: _	MAIL:	Relationship: _ Other #:	
Parent/Guardian 1: Address: Parent/Guardian 2:	Information: PRIM	[ARY E-N _ Cell #: _	MAIL:	Relationship: Other #: Relationship:	
Parent/Guardian 1: Address: Parent/Guardian 2: Address:	Information: PRIM	[ARY E-N Cell #: Cell #: _	MAIL:	Relationship: Other #: Relationship:	
Parent/Guardian Parent/Guardian 1: Address: Parent/Guardian 2: Address: Emergency Conta	Information: PRIM	[ARY E-N Cell #: Cell #: Parent/G	MAIL:uardian):	Relationship: Other #: Relationship: Other #:	

Do you give Ela Township permission to publish photographs of this child(ren) for promotional purposes? (i.e. Ela Township website, bulletin boards, weekly program update emails, etc.) No _____

Health Record: Child 1: Does this child have any medical concerns we should be aware of? No ____Yes ____ Does this child have any allergies we should be aware of? No Yes Allergic reaction: Treatment: Does this child have any social-emotional concerns we should be aware of? No ____Yes____ Coping Strategies: **Additional Information:** Please provide us with any additional information that would benefit this child's experience at our program. Child 2: Does this child have any medical concerns we should be aware of? No Yes Does this child have any allergies we should be aware of? No ____Yes _____ Allergic reaction: Treatment: Does this child have any social-emotional concerns we should be aware of? No ____Yes ____ Triggers: Coping Strategies: **Additional Information:** Please provide us with any additional information that would benefit this child's experience at our program. Child 3: Does this child have any medical concerns we should be aware of? No ____Yes____ Does this child have any allergies we should be aware of? No ____Yes _____ Allergic reaction: Treatment: Does this child have any social-emotional concerns we should be aware of? No Yes Triggers: Coping Strategies: ____ **Additional Information:**

Please provide us with any additional information that would benefit this child's experience at our program.

Ela Township Youth Department SPRING BREAK CAMP 2024

List of approved adult	s to pick up my child:			
Name:	Phone #:	Relationship:		
Name:	Phone #:	Relationship:		
Name:	Phone #:	Relationship:		
	is form, your child will not b tion to Ela Township Youth I	e released on their own or to any other person Department.		
Drop Off & Pick Up: Participants should be dro	pped off and picked up inside the	Program Dismissal:		
Participants should be dropped off and picked up inside the main entrance of the Ela Township Community Center. Participants must be accompanied by an authorized adult (parent/guardian, baby sitter adult, etc.) to/from the Community Center for drop off/pick up, as we require participants to be signed in/out by their authorized adult. Arrival time is between 9:00 and 9:30; late arrivals are subject to director approval. Drop off at field trips is strictly prohibited.		Ela Township has the right to dismiss any child whose behavior, attitude, or action is, in our judgment, contrary to the best interests of our program community. This includes but is not limited to: destruction of property, excessive fighting or other aggressive behavior, harassment, bullying, sexual behavior, theft, excessive disobedience, or for other conduct that is ruining another child's experience or is harmful to the program. Ela Township will not dismiss any child without first consulting with the child's parent.		
promptly	oring Break Camp program ends v at 4:30 pm***	Registration Confirmation:		
A \$5.00 fee will be assessed for late pickups. Up to the first 15 minutes is \$5.00 and an additional \$5.00 for every 5 minutes thereafter.		I am registering my child(ren) for the <i>Ela Township Spring Break program</i> . I have read, understand, and will comply with the rules stated in this packet. I confirm that the infor-		
Behavior Expectations:		mation I have given in this packet is true, complete, and accurate. I understand that it is my responsibility to inform El		
Township Youth Departm	ent programs. Ela Township more expectations as they pertain	Township Youth Department staff of any changes of information, particularly contact information.		
* Children take respons	ibility for their actions.			
* Children respect them and program equipme	selves, other children and staff, nt and environment.			
* Children participate in their ability.	n program activities to the best of			

Signature

Name (Please Print)

Date

Ela Township

SPRING BREAK CAMP



2024

Child Behavior Contract

Upon signing this document, both the parent and student agree to the guidelines set forth, and will abide by the discipline actions issued if this contract is not followed.

- I will be respectful of my fellow students and all program staff. This means that I will speak to others in a respectful manner and tone of voice.
- I will not threaten or cause physical harm towards others, including possessing sharp or other dangerous instruments.
- I will respect the personal space of others and keep my body to myself.
- I understand that disrespectful behavior includes, but is not limited to, hitting, punching, kicking, biting, spitting, swearing, lying, and refusing to listen to the Ela staff.
- I will be respectful of the Ela grounds, the Ela buildings, and any other location I may visit while attending the program.
- I will not litter, vandalize, steal, or destroy items that do not belong to me.
- I will not bring any *electronic devices* to play on while participating in this program and realize that if I need to contact a parent or guardian that can be done through an Ela staff member.
- I agree to follow all program rules including those that are not listed on this behavior agreement or rules set forth by Ela staff.

Child Name	Child Signature
Child Name	Child Signature
Child Name	Child Signature
Parent Signature	Date