



Teams Challenge Course

Experiential Trip

September 16 and 23 for Grades 9-12

October 7 and 14 for Grades 6-8

An amazing experience awaits your group at the Teams Challenge Course, nestled in the woods of Meadowhill Park. The Course consists of a series of outdoor activities, cooperative games, trust initiatives and team-building exercises designed to assist in personal development.

Based on an experiential approach to learning, a facilitator will provide your group with a customized team-building program that can help develop lifelong benefits, such as:

- Increased self-confidence
- Improved problem-solving abilities
- Effective communication skills
- Cooperation for effective teamwork
- Awareness of strengths and limitations
- Trust in yourself and others
- Coping skills for handling anxiety

As individuals stretch the boundaries of their comfort zones, they learn to work together to triumph over difficult tasks. The Teams Challenge Course operate under a “Challenge by Choice” philosophy, allowing individuals to choose their level of involvement and responsibility.

The challenge programs connect the adventure and discovery process to real-life issues that represent significant challenges. After each activity, participants share their insights about the group process and relate the initiative to work or school. Our facilitators encourage the team members to consider changing how they think and act in order to function more effectively.

This program helps children learn to overcome fear and how to work as part of a team. This is an ideal program for children who may be timid and uncertain about trying new things, or struggles with mild anxiety. The program is facilitated by the Northbrook Challenge Course staff and the masters level clinicians with Youth Services.

Activity Information

Your child will engage in 6 hours of Teams Challenge Course activities over 2 consecutive weekends. This unique Team Challenge Course will progressively increase in difficulty over the 2 days. In order to maximize group cohesion and success over challenges youth must be able to participate in both days. The day will begin and end at the Gurnee Teen Center, where they will be transported to the Northbrook Park District in a Township vehicle.

Children who register for this program must be able to manage their behavior and be engaged in the activity. Any participant who is unable able to manage their behavior and effectively participate may be removed from the program. Group cohesion and safety are essential, and behaviors that distract or take away from the experience are contraindicated.

Fee for all 2 days: \$30.00 / Non Resident \$ 60.00

(Needs-based scholarships may be available for Township residents.)

Time: Leave: 8:00 am and Return 1:30 pm (return time may vary depending traffic and other variables)

Where: Participants will start and end day at Gurnee Teen Center. Youth Services will take care of all transportation to and from the activities.

Lunch/Snacks: We will provide a cooler and ask that children be sent with a lunch, any snacks and beverages.

Weather: While it's our preference to do the activities outside, much of the program will be shifted indoors in case of inclement weather.

REGISTRATION INFORMATION

Must turn in completed Township Application and Teams Course Waiver by 9/9/17 for September class and September 30 for the October class. This is limited to only 12 youth per session.

Options:

1. Complete Registration Form and mail in to Warren Township Youth Services, 100 S. Greenleaf St., Gurnee, IL. This method may not guarantee your spot if the program fills before we receive your application
2. Complete the online registration at www.wtyouthservices.com/youth-workshops-groups and send in Northbrook waiver as a PDF (youthservices@warrentownship.net) or fax to 847-244-0867. This method guarantees your child's spot.

Questions: Contact Katy Padula at 847-244-1101 ext. *410

Registration

Parent/Payer's Name	Home #	Cell #
Address	City/Zip	Email
Child's Name	Age	Grade
Emergency Contact	Phone	Relationship to Participant
Do you require any special accommodations?		

Make Checks payable to: Warren Township	
Drop Off Check/Application: Gurnee Teen Center	Fee: \$30.00/NR \$60.00
17801 W. Washington St	<input type="checkbox"/> Sept. 16 and 23 (grade 9-12) <input type="checkbox"/> Oct. 7 and 14 (grade 6-8)
Gurnee, IL 60031	
Scholarships available for residents only. Call 847-244-1101 ext. *401.	FOR OFFICE USE ONLY Rec. by ____ Date ____ Cash ____ Check ____

Liability Release

In exchange for permission for me and/or my child to participate in the Team Challenge Course and Gurnee Teen Center, I hereby grant the following release from Liability on my own behalf and on behalf of my child.

I, on my own behalf, and also as parent and/or guardian on behalf of the minor child identified below, release, discharge and hold harmless the Youth Program Teacher, any related associations, Warren Township and its officers, directors, employees, agents, landlords, lessees, sponsors and franchisees (hereafter the "Released Parties") from any and all liability for injury to my child's person, my person, or other persons, and to my child's property, my property or other persons' property, arising out of or in connection with, or caused in an any manner by my participation or my child's participation in the Youth Programs or Classes.

I acknowledge I hereby have been advised to consult, and have consulted, with my physician and/or with my child's physician with respect to any past or present injury, illness, health problem or any other condition or medication that I and/or my child now have, previously have had and/or now may have that may affect my and/or my child's participation and ability to participate in and to endure the Youth Programs or Classes.

In the event that I and/or my child becomes ill or injured during or as a result of participation in the Youth Programs or Classes, I hereby authorize the Released Parties to arrange for such emergency medical attention as they, in their sole judgment, may deem to be required to preserve my life and/or health and/or the life and/or health of my child. I hereby release, discharge and hold harmless the Released Parties, as well as any person or entity that provides such emergency medical attention, from any and all liability in connection with any injury to my or my child's person or property arising in connection with or as a result of such emergency medical treatment.

Child's Name (print): _____

Parent/Guardian Signature: _____ Date: _____

Student Questionnaire

List all current and past health challenges/injuries/operation/diagnoses:

List any allergies your child has:

List any medications your child is currently taking:

Please share any other information you think might be helpful for me to know in order to create the most positive experience for your child: