



Teams Challenge Course

Experiential Trip

July 18th & 20th, 2018

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. This experiential approach to learning, 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

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. The Teams Challenge Course operate under a “Challenge by Choice” philosophy, allowing individuals to choose their level of involvement and responsibility.

Activity Information

Your child will engage in 8 hours of Teams Challenge Course activities over 2 days. This unique Team Challenge Course will progressively increase in difficulty over the 2 days. The Gurnee Teen Center will be open from 8am to 6pm. Youth may be picked up any time after Challenge Course Program until 6 pm at the Gurnee Teen Center. Please see attached (Team Challenge Program Guide) form for further day of activity information.

Fee for 2 days: \$50.00 (Needs-based scholarships may be available)

Time: 8:00am – 1:45pm (return time may vary depending traffic and other variables)

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

Lunch/Snacks: Please provide your child with a lunch, snacks (for 10 minute break) and beverages.

****For the safety of all participants appropriate behavior is expected at all times. If your child is unable to follow directions, you will be contacted and expected to pick your child up immediately at the Challenge Course.**

Must turn in completed Township Application and Teams Course Waiver by 7/10/18. This is limited to only 12 youth, entering/graduating from grade 6-8.

Questions: Contact Katy Padula at 847-244-1101 ext. *410 **(up until 7/10/18)**

Or

Alexi Stauffer at 847-244-1101 ext. *452 **(After 7/11/18)**

ONLINE REGISTRATION AND ADDITIONAL INFORMATION

www.wtyouthservices.com/youth-workshops-groups

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?		

<p>Make Checks payable to: Warren Township</p> <p>Drop Off Check/Application: Youth and Family Services</p> <p style="margin-left: 40px;">100 S. Greenleaf St.</p> <p style="margin-left: 40px;">Gurnee, IL 60031</p> <p>Scholarships available for residents only. Call 847-244-1101 ext. *401.</p>	<p>Registration due by 7/10/18—limited to 12 participants</p> <p>Fee: \$50.00</p> <p><input type="checkbox"/> Challenge Course 7/18/18, 7/20/18</p> <div style="border: 1px solid black; background-color: #e0f7fa; padding: 5px; margin-top: 10px; text-align: center;"> <p style="font-size: small; margin: 0;">FOR OFFICE USE ONLY</p> <p style="font-size: x-small; margin: 0;">Rec. by ____ Date ____ Cash ____ Check ____</p> </div>
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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: