



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Illinois Valley YMCA Summer Camp Flyer 2020



NO CAMP – FOURTH OF JULY (7/4/20)

SUMMER CAMP AT THE ILLINOIS VALLEY YMCA

~ Challenge Camp (Full Day – Full Week; Ages 6-10)

Your child will have the opportunity to participate in an array of organized educational and recreational activities, all of which promote social skills, self-confidence, sportsmanship, character development, and healthy kids!

Dates: June 15 – August 16 (Monday-Friday)

Time: 8:00a-4:00p

Before Care Available at 7:00am (\$3/Day) & After Care Available until 5:30pm (\$5/Day)

Cost:	<u>Weekly</u>
Members	\$115
Non-Members	\$140

As of now, we are limited to first come, first serve IVYMCA Members, full day – full week registration only! Credits won't be given for missed days.

Taking registration until Wednesday, June 10th

***Please bring lunch, water bottles, and sun block – The Y will not be providing these items!**

***Financial aid is available for those who qualify* inquire 815.223.7904**

ALL INCLUSIVE ILLINOIS VALLEY YMCA SUMMER DAY CAMP POLICIES

All participants must submit the proper enrollment forms, completed and signed on the first day the child attends camp. This information is confidential to our Staff and the registering parents and guardians.

Parents will be required to provide health information about their child/children by completing the proper medical and waiver forms following this policy page. These forms will be kept on file at the Illinois Valley Y and/or program site. It is necessary for the forms to be returned on the first day of camp.

Parents will be contacted in the event of sickness or accident involving their child. If a parent cannot be reached and emergency care is needed, such treatment will be provided by the Illinois Valley Community Hospital as authorized under the Summer Day Camp medical consent form. Children enrolled in Adventure Camp are not provided with any health insurance through the Illinois Valley Y.

Fees must be paid when registering your child. This is important for us to provide the best camp possible. All checks are to be made out to the Illinois Valley Y and should be paid at the YMCA at 300 Walnut Drive, Peru, IL 61354.

Children should NOT bring personal items, as too many items are lost, broken, or stolen.

The director with parental/guardian consent may distribute and medications the child may needs.

The hours of operation for Summer Challenge Day Camp will be from 8am to 4pm, Mon-Fri. Before and After camp care is offered at an additional cost from 7-8am and 4-5:30pm.

There will be a sign in/out sheet in the classroom Every camper must be signed in and out each day they attend camp by a parent/guardian of 18 years or greater in age.

If a parent or guardian is late in picking up a child, there will be a \$5 late charge for the first 15 minutes plus a \$3 charge for every minute after that.

The Summer Day Camp Director has the right to deny privileges or usage to anyone who is continually late in picking up their child or who abuses any of the other rules.

The Summer Day Camp staff will not allow a child to leave the building with anyone who is intoxicated, under visibly apparent drug use, or who may cause immediate harm.

The Y will not turn away any child who wishes to participate in the Camp because of their inability to pay.

Financial assistance is available through the Illinois Valley Y; Joanne Sabotta via email at jsabotta@comcast.net

The Y, Summer Day Camp Director have the right to change or add any rules that may improve the overall camp program.

**PLEASE KEEP THIS
SHEET TO REFER BACK TO**

YMCA Day Camp Protocols

Essential Workers Day Camp

1. All registration will be on-line with complete medical information provided. Same information as school-aged childcare.
2. Parents will drop off campers at a private entrance on side of Y facility. (Playground Entrance)
3. Staff will take temperature checks at entrance. Any temperature over 100.4 will follow CDC guidelines of returning home.
4. Attendance will be taken each day. Camp will initially be open for those attending each day. No more than 15 kids will be allowed per the guidelines. Minimum of 2 staff members, probably more if needed.
5. Kids will bring their own lunch and drinks. The Y will provide separate cups for water use. NO personal toys/electronics, devices from home!
6. No field trips on bus during phase 3.
7. All camp counselors will review all Y policies, training from Presidium on Child Abuse, safety, and CDC guidelines prior to camp.
8. Camper will be allowed to utilize Y facility gyms, activity areas under planned programs of staff. No other members, staff will utilize areas. Currently the Y is closed for members.
9. Camper areas will be thoroughly cleaned and disinfected every day.
10. Parents will be required to pick up child with a mask at private entrance area.
11. Restrooms will be cleaned and disinfected during the day and after camp.
12. Kids will be instructed daily on washing hands, use of disinfectants. Groups will be utilized to do prior to lunch, restroom, snacks, etc.
13. Facility area is large. Kids camp area will be 2,736 sq. ft. Gyms are 6,369 sq. ft. Locker rooms are 1,200 & 1,638 sq. ft. Social distance will have no problem in those areas.
14. Kids will utilize playground. Playground area is only open for campers. Will be cleaned daily. Fenced in playground.
15. One pool would be open for campers. The pool is 9,360 sq. ft. Lifeguards and staff will supervise. No other activity and members will be in Y facility while campers are in pool. Social Distancing will be required. Locker rooms are 1,638 sq. ft. for Men's and 1,200 sq. ft. for women's. Staff will supervise change areas and social distance. No other individuals are in facility. Locker rooms will be sanitized after each use by campers.

Peru Facility –

Mendota Facility – has limited sq. ft. of 5,000. No Pool. Closed to general membership.

CHILD NAME _____

DATE OF BIRTH _____

PARENTS NAME _____

WHAT CAMP WILL YOUR CHILD ATTEND _____

GENDER MALE FEMALE SIBLING(S) _____

EMERGENCY CONTACTS (Other than Parent/Guardian) WHICH ARE AUTHORIZED TO PICK UP CHILD

1. Name _____ Relationship to child _____ Phone _____

2. Name _____ Relationship to child _____ Phone _____

3. Name _____ Relationship to child _____ Phone _____

4. Name _____ Relationship to child _____ Phone _____

HEALTH HISTORY CONDITIONS

PROVIDE ANY ALLERGIES OR CONTIONS THAT YOUR CHILD HAS

PLEASE BE DETAILED

Emergency Medical Authorization: I give my consent for emergency first aid to be administered to my child by a staff member certified in first aid. I understand that for an accident involving injury of a more serious nature, an ambulance will be called. In the event of my child's sickness or accident, I expect to be contacted. However, if I cannot be reached, I the undersigned, hereby give my consent for the attending Y staff member to provide emergency care and/or treatment for my child through a clinic, Illinois Valley Community Hospital, or private doctor. I give my express consent for x-rays if the attending physician feels it is advisable or necessary. I give permission to the physician selected by the director to hospitalize, either at IVCH or another hospital that is deemed necessary, secure proper treatment, and to order injection, anesthesia, or surgery for my child as names above. I also agree to pay all costs and fees contingent upon any emergency medical care and/or treatment for my child as secured or authorized under this consent. This agreement shall continue as long as mu child is enrolled at a program of the Illinois Valley Y. I have adequate medical and liability insurance, and will provide proof of such upon request.

PARENT/GUARDIAN SIGN _____

POLICY HOLDER'S NAME _____

HEALTH INSURANCE PROVIDER _____

POLICY NUMBER _____

Waiver Release & Photography Release: In consideration of the Illinois Valley (hereafter YMCA) Summer Adventure Camp allowing my child to participate including participation in any and all activities where located, and travel to and from such activities. I/we do hereby Release and Discharge the Illinois Valley Y, its Board of Directors, the Administration, the agents, representatives and employees thereof, from any and all claims, demands and causes of action which may accrue to us/me, our/my heirs, executor or assigns, as a consequence of, and resulting from undertaking such activity, including personal injury or property damage which my child may sustain in the course of such activity participation.

I acknowledge that this activity is being provided as a benefit to my child and not for the benefit of the Y. I understand that the Y will assume no responsibility for damage, accidents, injuries, or medical injuries (including, but not limited to; broken bones, torn ligaments or tendons, back injury or soft tissue injury) and/or dental injuries/expenses incurred as a result of my child's participation in this activity.

I/we assume all responsibility for any damage that my child may cause to themselves, others, and/or property while participating in the activity. I/we release and waive, and further agree to indemnify, hold harmless, and reimburse the Board of Directors, the individual members, agents, employees and representatives thereof, from and against, any claim which I/we, or any other persons, firm or corporation may have to claim to have, known or unknown, directly or indirectly, for any losses, damages or injuries arising out of my child's participation in the activity or the rendering of emergency medical procedures or treatment, if any.

Photo: I hereby authorize the Illinois Valley YMCA to publish photographs taken during my youth's attendance in any of the 2020 summer day camps or programs. This authorization includes magazine publications, online, and video based marketing materials, as well as other publications. I hereby hold harmless the Illinois Valley YMCA from any reasonable expectations of privacy or confidentiality associated with the images specified above. I further acknowledge that my or my youth's participation is voluntary and that I will not receive financial compensation of any type associated with the taking or publication of these photographs or participation in marketing materials or other publications of the Illinois Valley YMCA. I acknowledge and agree that publication of said photos confers no right of ownership or royalties whatsoever. I hereby release the Illinois Valley YMCA, its contractors, its employees, and any third parties involved in the creation or publication of marketing materials, from liability for any claims by me or any third party connection with my or my youth's participation.

CHILD NAME _____

PARENT/GUARDIAN SIGNATURE _____

DATE _____