



Winter Break Camp 2016

All children welcomed between K – 5th Grade

- Located in the Recplex Kids Klub Room 420 West Dempster, Mt. Prospect
- Hours of operation 7:00 AM - 6:00 PM.
- Drop off from 7:00 AM - 9:00 AM. Pick up from 3:30 PM - 6:00 PM.
- There is a \$5.00 cash late fee for every 5-minute or portion of that you are late.
- No refunds 5 business days prior to each day of camp.
- Minimum of 25 participants per day by Wednesday, December 14th to run the program.
- **\$315 for all nine days, or \$40 per day** (\$15 discount for 2nd child for all nine days, \$5 discount for 2nd child for individual days)

Dates	Trip	What to Bring
Monday December 19	All Day: Go Bananas	Lunch w/beverage & Extra Money
Tuesday December 20	AM: Bulls/Sox Academy PM: Sports games @ RecPlex	Lunch w/beverage, Socks & Gym shoes
Wednesday December 21	All Day: Peggy Notebaert Nature Museum	Lunch w/beverage
Thursday December 22	AM: JG Reptile Show PM: Swimming @ RecPlex	Lunch w/beverage & Swimming Supplies
Friday December 23	AM: Ugly Sweater Party PM: Schaumburg Water Works	Lunch w/beverage & Swimming Supplies
Tuesday December 27	AM: Rockin Jump Trampoline PM: Swimming @ RecPlex	Lunch w/beverage & Swimming Supplies
Wednesday December 28	AM: Funtopia Family Entertainment Climbing Fun in Glenview PM: Luau-Summer in December!	Lunch w/beverage, Socks & Gym Shoes
Thursday December 29	AM: Bowling @ Arlington Lanes PM: Swimming @ RecPlex	Lunch w/beverage, Socks & Swimming Supplies
Friday December 30	AM: Pickwick Theatre movie-Sing PM: New Year's Eve Party	Lunch w/beverage

If your child has any special considerations that the staff would need to know about please contact Kristina Winans or Kathy Muellner in advance at (847) 640-1000 or kwinans@mppd.org / kmuellner@mppd.org

This activity is not sponsored by Community Consolidated School District 59, or any of its schools, or groups officially associated with the District.



Winter Break Camp

Parent Registration and Permission Form 2016

- Please fill out this entire form and return to the Mt. Prospect Park District Front Desk
- **CIRCLE** each program registering for under **CODE**
- Please note: 3 dates require an **extra** permission slip. Please complete and attach at registration.

Dates	CODE	Extra Permission Slip Required
All Nine Program Days	29364	ALL 3: Bulls _____ Jump _____ Fun _____
Monday December 19	29363	
Tuesday December 20	29365	Bulls/Sox Academy - Attached _____
Wednesday December 21	29366	
Thursday December 22	29367	
Friday December 23	29368	
Tuesday December 27	29369	Rockin Jump Trampoline – Attached _____
Wednesday December 28	29370	Funtopia – Attached _____
Thursday December 29	29371	
Friday December 30	29372	

I hereby agree to abide by all Mt. Prospect Park District's rules and regulations as they pertain to Park District facilities or services, and any resulting consequences for failing to abide by them. By their very nature, many Park District programs involve body contact. Substantial physical exertion, emotional stress and/or use of equipment which represents a certain risk to users. It is recommended that you check with your physicians prior to participating in these activities. The Park District does not provide insurance protection for participants in Park District activities. Registration in any Park District facility use pass or admission assumes full responsibility on the part of the registrant for any risk, implicit or direct, by participation in said activity or facility. Further, the registration agrees to the following: I fully recognize the risks of injury or illness inherent in this program and represent to the Park District that I offer my authority for me or for my child to participate. I hereby release and discharge the Mt. Prospect Park District and its officers, directors, employees and volunteers from any and all claims, actions or causes of judgments whatsoever including attorney's fees and costs which might arise from said participation. I hereby execute this release and acknowledge that such participation is at my own risk. I hereby grant emergency treatment for my child if I cannot be reached.

Parent/ Guardian Signature: _____ DATE: _____

Child (ren) Full Name: _____ Grade(s): _____

Parent/ Guardian Contact: _____ Phone # _____

Emergency Contact: _____ Phone # _____

Emergency Contact will need to be available to pick your child up within 15 minutes.

- Please indicate below your child(ren) Swimming Permission
 Never went swimming **Taken basic swim lessons** **Is a strong swimmer**
- Children will need to complete a swim test in order to swim in deeper water
This test is not mandatory for children who would like to stay in water 3' 7" and under
 Yes Swim Test **No Swim Test** **Needs Lifejacket**

Any Special Concerns/Allergies: _____