LAKE FOREST

PARKS AND RECREATION

Parent Manual

WELCOME TO SUMMER DISCOVERY CAMP!

Dear Parents,

The Lake Forest Recreation Department eagerly anticipates welcoming your child to the Summer Discovery Summer Camp. With a lineup of captivating activities, we guarantee your child will embark on an unforgettable summer adventure!

We kindly request that the forms enclosed within this manual be submitted prior to your child's first day at camp. These forms are vital for ensuring the safety and smooth operation of our program. Your child's participation is contingent upon the submission of these forms.

If you have any questions about the information contained in this manual, please feel free to contact me at the Recreation Department at:

Office Phone- (847) 810-3947 (this phone does NOT receive text messages. Phone calls only)
Email: hinckerc@cityoflakeforest.com

Sincerely,
Christopher Hincker
Summer Discovery Director

Summer Discovery Summer Camp
PARENT MANUAL

INTRODUCTION: Summer Discovery offers an enriching experience and fosters a playful environment where children can delve into various subjects including science, literature, and art. Through engaging indoor and outdoor activities, participants not only have fun but also cultivate foundational skills that ignite a passion for learning and discovery.

PROGRAM FORMAT: Summer Discovery is designed to allow young learners the opportunity to develop social, cognitive, motor, and verbal skills, and develop the desire for research and exploration. Each child will have the chance to participate in small groups and individual activities.

WHERE: Kinderhaven Preschool Academy- Located at the Lake Forest Recreation Center (400 Hastings Rd.)

WHEN: Monday-Friday (there are M-F, T/TH and M/W/F schedule options)

START/END DATE: June 8th-July 31st from 9:15am-11:45am (or 12:30pm for lunch extension)

- **CAMP CONTACT:** Christopher Hincker is the camp director for Summer Discovery. Their direct number is (847) 810-3947 (Office). Please direct any questions or concerns to the camp director. They may also be contacted through email at hinckerc@cityoflakeforest.com. If your child is absent or sick, please send an email to let the staff know. ***The phone does NOT receive text messages, so phone call or email is the best method of communication.***

- **PICK UP AND DROP OFF PROCEDURE:** We've implemented a convenient carline drop-off system for daily arrivals and departures. Upon arrival, cars will proceed to their designated line, where a staff member will greet your child, assist them out of the car, and escort them to the playground. At pickup we will have cars line up and counselors will bring campers to their perspective cars.
    - The camp staff will expect the same person to pick up and drop off each day. Please inform us if another adult will be picking up your child. Please find an enclosed transportation form that indicates who may be allowed to drop off or pick up your child. The person's name MUST appear on this list for the staff to release your child. Showing ID will be required if staff are not familiar with the person.

- **MEDICAL/DIETARY CONCERNS:** If your child has any medical or dietary issues, please let the Camp Director know in advance. Epi pens and medication should be clearly labeled and given to the Director. Please also complete the attached allergy form.
- **CLOTHING:** For your child's safety and enjoyment, please dress him/her in play clothes and **CLOSED TOED SHOES—NO SANDALS OR FLIP FLOPS, PLEASE!** The campers spend part of their day outside running, jumping, climbing, and playing games. It is important that they wear

clothing and shoes that allow for maximum participation. Because we will be outdoors and working with messy materials, please do not dress your child in his/her best clothing.

- **PLEASE LABEL EVERYTHING THAT COMES TO CAMP!** This is the most efficient way to make sure everything comes home from camp after a busy day!

- **PHOTOS & NEWSLETTERS:** We will be posting photos of campers throughout the week on the BAND app. This is a private page that only our campers' families will have access to. A newsletter will be sent out via email each week. The newsletter will highlight the past week's activities, theme days, etc.

- **HOME TOYS:** Please do not have your child bring toys or trinkets from home. We do not want lost items that have importance to your child.

- **SUNSCREEN:** Please apply sunscreen to your child before he/she comes to camp. Due to skin allergies, we WILL NOT reapply sunscreen unless it is specifically your child's sunscreen, and a parent/guardian asks us to do so.

- **POTTY TRAINING IS NOT REQUIRED BUT:** The counselors are NOT allowed to change a child's soiled diapers. They will call the parent/guardian to change the child if the child is unable to change themselves. Please have someone designated to change your child that is within 10-15 minutes away from camp.

- **SICK POLICY:** If your child is sick, please do not send them to camp. We want to keep everyone healthy, so please keep them home until they are 24 hours symptom free without medication. Thank you in advance!

WHAT TO BRING TO CAMP EACH DAY:

- **WATER BOTTLE**
  - Please label with first and last name as many campers have similar water bottles.
- **SNACK**
  - Campers should bring their own snack from home each day they attend camp.
  - Summer Discovery Camp is PEANUT/TREE NUT FREE! CHILDREN WILL NOT BE ALLOWED TO EAT ANY ITEM CONTAINING ANY NUT PRODUCTS!
  - Please put the snack in a LABELED lunch bag or box!
  - A separate lunch box for those children registered for the lunch extension.
- **BACKPACK:**
  - Please send your child with a labeled backpack large enough to hold all their belongings.
- **SPARE CLOTHING:**
  - Please bring a spare set of LABELED clothing including shoes, socks, shirt, underwear, and pants.

APPROVED TRANSPORTATION FOR MY CHILD

Camp Name: _____

Child's Name: _____

APPROVED TRANSPORTATION

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

I give my permission for anyone from the above list to transport my child to and from camp. I understand that these are the ONLY people allowed to provide transportation for my child to and from camp unless I notify the director in writing indicating another person. My child WILL NOT BE released to anyone who is not on this list or who does not have my WRITTEN permission. Showing ID may be required.

Parent's Name: _____

Parent's Signature: _____

Date: _____

PLEASE TURN IN THIS FORM BEFORE THE FIRST DAY OF CAMP!

Summer Discovery

Permission for Pictures

My child, _____, may be included in any picture taken at camp; these may be used to interpret the camp programs through the press or social media. They may also be used for publicity or in camp newsletters. Any such photography will be done under the supervision of the Director.

_____

Parent/Guardian /Date

Summer Discovery

Permission for Walks

I give permission for my child, _____, to accompany their camp on short walks in the nearby vicinity. I understand that the camp staff will take every precaution to ensure the safety of my child.

_____

Parent/Guardian / Date

PLEASE TURN IN THIS FORM BEFORE THE FIRST DAY OF CAMP!

Allergy/Medical Information

PLEASE TURN IN THIS FORM EVEN IF YOUR CHILD HAS NO MEDICAL CONCERNS!

Allergies:_____

_____

*If your child has any allergies, please provide a detailed allergy action plan, epi-pen/medication along with this form.

Health Concerns:

Is your child potty trained? YES NO

Other important Information:

PLEASE TURN IN THIS FORM BEFORE THE FIRST DAY OF CAMP!

Summer Discovery Camp

Lake Forest Parks and Recreation Department
EMERGENCY INFORMATION

Child's Name_____ Birth date_____
Address_____ Home Phone_____
Parent Name_____ Parent Name_____

Parent's Work Name_____ Parent's Work Name_____
Work Address_____ Work Address_____
Work Phone_____ Work Phone_____
Cell phone_____ Cell phone_____

IN AN EMERGENCY:
Physician's Name_____
Address_____ Phone number_____
Any Medical concerns (ie. allergies, etc.)_____
_____

*Please list (in order of preference) those persons that we are authorized to call and release your child to in case of an emergency or illness should the parents be unable to be reached.

1.Name_____ Address_____
Phone_____ Relationship to child_____

2.Name_____ Address_____
Phone_____ Relationship to child_____

3.Name_____ Address_____
Phone_____ Relationship to child_____