



DAY CAMP

Spring, 2011

Dear Camp Participant:

Enclosed you will find pertinent info for the 2011 Summer Camp Program. ***New for 2011.....register by the week!*** Children between the ages of 6-13 may participate. The weekly cost of the camp includes two camp t-shirts (you will receive a max of three shirts if you register for four or more weeks) all Arts & Crafts, supplies, games, and field trips (Waldamere Park not included unless you sign up for all eight weeks during our Early bird registration). All children are required to wear camp t-shirt on designated days.

Early Bird Registration runs from March 28 through April 29. During this time, a resident registrant will receive \$5 off of the weekly price of \$65 (Early Bird Price \$60) **There is an additional weekly \$5 Transportation Fee if you are using the bus service to or from camp.** Register for all 8 weeks during Early bird & we will include Waldamere Park Admission for your child! Register now, pay weekly, ask us how!

Non-resident Early Bird Registration runs from April 18-29. During this time, a non-resident registrant will receive \$5 off of the weekly price of \$100 (Early Bird Price \$95) **There is an additional weekly \$5 Transportation Fee if you are using the bus service to or from camp.** Register for all eight weeks during Early bird and we will include Waldamere Park Admission for your child! Register now and pay weekly, ask us how!

To qualify for Early Bird Registration, you must return the completed registration form, bus form and additional payment form plus a copy of a current utility bill and payment to Willoughby Parks & Recreation, 1 Public Square, Willoughby, 44094 or drop it off at our office Monday through Friday, 7:30 am - 4:30 pm. We accept Master Card, Visa and Discover or make checks payable to "**The City of Willoughby.**" **Register for three or more weeks and pay weekly.** Full bus transportation fee and first week of camp is due when you register, remaining weeks will be charged on your credit card the Thursday prior to the next camp week. Please complete the attached form.

Before & After Care No price increase for 2011!! Complete the Before and After Care information sheet and your credit card will be charged every Friday morning for the past week's hours. The cost is \$3/ hour. Before & After Care is from 6:30-9:00 am and/or 3:00-6:00 pm. Cost includes supervision and a snack/drink during each session.

PLEASE read the site descriptions to pick the correct site for your child. **In addition, only 65 children will be accepted at each site per week.** Once that total is reached, all children will be placed on a waiting list -- **NO EXCEPTIONS.** This means that our counselor to child ratio is 1:13.

Willoughby Parks & Recreation Department

Important Info About Summer Camp.....

Each camp is conducted primarily as an outdoor program. The buildings will serve as an organization and inclement weather area. Listed below are the amenities of each site:

Daniels Park - North

Pavilion
Restrooms
Playground
Drinking Fountain

Ryan Park @ Ridge Acres

Pavilion
Port O Potty
Playground
Drinking Water

Daniels Park South

Pavilion
Restrooms
Playground
Drinking Fountain

1. Camp hours are from 9:00 am until 3:00 pm. Please pick your children up at 3:00 pm, counselors are not responsible for children before or after camp. Late Pick-up Fee of \$5 per 5 minutes will be charged if you are late in picking up your child. Child can not return to camp until amount is paid.
2. Children need to pack a lunch & drink everyday unless specified, no refrigerators are provided.
3. Due to extreme heat, children might want additional drinks in a cooler.
4. Candy/prizes will be passed out on a regular basis.
5. A full day of FUN is guaranteed!
6. Don't forget your sunscreen; counselors are **NOT** permitted to apply sunscreen to a child.
7. Camp T-shirts must be worn on specified field trips.....no shirt, no fun! Check your flyer!
8. Don't miss the Early Bird Specials!! Early Bird ends on April 29, 2011.
9. Camp is closed on Monday, July 4th.
10. Mark your names on all belongings.
11. If you need to contact your child for an emergency, please call 440-953-4200.
12. Flyers will be e-mailed on Fridays, they are also available at http://www.willoughbyohio.com/rec_dept/forms.html
13. When the whistle blows, we ask children to freeze. Please explain this to them.
14. If you have any concerns, please talk to your Head Counselor.
15. If another adult will pick up your child, please write a note to the counselors. No note, no pick-up!
16. Children must sign in/out everyday with a counselor.
17. Willoughby Parks & Recreation is not responsible for lost/stolen items. Parent will be contacted to pick up inappropriate items, i.e. ham radio, etc.
18. Please explain "Good Sportsmanship" to your child -- it's O.K. to lose.
19. If your child is on medication, you must complete the medication form – ask us for the form.
20. We will try to use the Buddy System at all times.
21. Children must obey the counselors/bus drivers at all times.
22. Everyone goes on field trips, please see the weekly flyer for departure and return times.
23. Spending money may be brought on field trips, but counselors are not responsible for it. Please make sure that children have pockets, fanny packs or zipped coin purses.
24. When it is thundering and lightning, outdoor playgrounds will be bussed to indoor facilities (Willoughby Senior Center).

Here's what is planned:

June 13-17	Adventure Zone
June 20-24	Pioneer Waterland
June 27-July 1	Lake County Captain's Game
July 5-8	Inflatables
July 11-15	Pioneer Waterland
July 18-22	Cleveland Metroparks Zoo
July 25-29	Fun N' Stuff
August 1-5	Waldamere Park Trip



----- **March 18, 2011** -----

Playground Bus Runs -- June 13 through August 5, 2011

There is an additional weekly \$5 Transportation Fee if you are using the bus service to or from camp.

Please be at your bus stop 5 minutes prior to the scheduled pick-up time

Gilson @ Daniels Park

(pick-up time)		(drop off time)
8:23 am	River Isle Apts.	3:05 pm
8:25 am	Abbotts Mill Dr.	3:08 pm
8:27 pm	Lost Nation Rd./Wood Rd.	3:09 pm
8:30 am	Melrose Farms/Steve Guard	3:13 pm
8:33 am	Grant Elementary School and Gale/Hurricane	3:16 pm
8:36 am	Lost Nation Rd./Bell	3:19 pm
8:40 am	Westminster Ln./Picadilly and Lost Nation Rd./Mary Clark	3:24 pm
8:45 am	Lost Nation Rd./North Bay	3:28 pm
8:47 am	Osborne Park Pavilion	3:33 pm
8:52 am	Leeward/Tamarac	3:38 pm
9:05 am	Daniels Park	

Ryan Park @ Ridge Acres

(pick-up time)		(drop off time)
8:30 am	Oakridge/Hickory, Oakridge/Kellogg Court	3:13 pm
8:38 am	Big Turtle II – Bus Shelter	3:18 pm
8:42 am	Colonial/Grand, Colonial/Atwood, Beacon/Halle	3:25 pm
8:47 am	Timberidge/Ridge Rd.	3:25 pm
8:50 am	Pembroke School, Aspenwood Lane/SOM Center, Big Turtle 1/Rt. 91	3:28 pm
8:55 am	Willoughby Senior Center	3:33 pm
9:02 am	Ryan Park @ Ridge Acres	

Daniels Park Playground

(pick-up time)		(drop off time)
8:40 am	E. 364 th Street, 365 th Street	3:25 pm
8:47 am	Sharpe/Hughes, Sharpe/Clark	3:20 pm
8:52 am	Willoughby Senior Center	3:15 pm
8:55 am	Center/Wilson, Wilson/River	3:10 pm
9:00 am	Polo Park/Carl	3:10 pm
9:00 am	Kirtland Rd./Gardenside	3:05 pm
9:05 am	Daniels Park	



Child's Name _____

Please complete and return at time of registration. Check the 2011 bus stop your child will be waiting at:

Gilson @ Daniels Park Playground

- _____ River Isle Apts.
- _____ Lost Nation Rd./Wood
- _____ Lost Nation Rd./Bell
- _____ Melrose Farms
- _____ Lost Nation Rd./North Bay
- _____ Westminster Ln./Picadilly
- _____ Grant Elementary School
- _____ Osborne Park
- _____ Before & After Care at Senior Center
 - _____ Drop off time in the AM
 - _____ Pick up time in the PM
- _____ Drop Off at Camp

Ryan Park @ Ridge Acres

- _____ Oakridge/Hickory
- _____ Oakridge/Kellogg Court
- _____ Cedarwood Apartments
- _____ Big Turtle II – Bus Shelter
- _____ Colonial/Atwood
- _____ Colonial/Grand
- _____ Pine Ridge Apts. by 2nd set of garages
- _____ Before & After Care at Senior Center
 - _____ Drop off time in the AM
 - _____ Pick up time in the PM
- _____ Walk
- _____ Drop Off at Camp

Daniels Park Playground

- _____ E. 365th St., E. 364th St.
- _____ Kirtland Rd./Gardenside Dr.
- _____ Euclid/Jordan
- _____ Sharpe/Clark
- _____ Sharpe/Hughes
- _____ Willoughby Senior Center
- _____ Before & After Care at Senior Center
 - _____ Drop off time in the AM
 - _____ Pick up time in the PM
- _____ Center St./Wilson Ave.
- _____ Wilson Ave./River Rd
- _____ Drop Off at camp

Willoughby Parks & Recreation Summer Day Camp

Child's Name _____ Camp site _____

Print Parent's Name _____ Cell Phone (____) _____

Home Phone (____) _____

I am a resident of Willoughby, complete this box, non-Willoughby residents go to box at bottom of page:

WILLOUGHBY RESIDENTS COMPLETE THIS BOX

My Willoughby resident child is registering for:

_____ To/From Bus Service – \$5 x # weeks attending

_____ Weekly Fee - \$65 (\$60 Early Bird)

_____ YES, I will be paying in full

_____ YES, I will be making weekly payments with the credit card info below. I MUST register for three (3) or more weeks. At time of registration the entire bus fee and one week of camp must be paid. All remaining weeks will be charged to your credit card on the Thursday prior to the start of the camp week.

Please complete credit card info: MC Visa Discover

Card # _____ Expiration Date _____ V-code _____
3 digit code on back of card

NON-WILLOUGHBY RESIDENTS COMPLETE THIS BOX

My non-Willoughby resident child is registering for:

_____ To/From Bus Service – enclose \$5

_____ Weekly Fee - \$100 (\$95 Early Bird)

_____ YES, I will be paying in full

_____ YES, I will be making weekly payments with the credit card info below. I MUST register for three (3) or more weeks. At time of registration the entire bus fee and one week of camp must be paid. All remaining weeks will be charged to your credit card on the Thursday prior to the start of the camp week.

Please complete credit card info: MC Visa Discover

Card # _____ Expiration Date _____ V-code _____
3 digit code on back of card

Willoughby Parks & Recreation Summer Day Camp

Child's Name _____ Birthday _____ Age _____
 Address _____ City/Zip _____
 Home Phone (____) _____ Other Parent Home Phone (____) _____ Mom Dad
 (Please circle)
 E-Mail _____

Please complete **ALL** phone numbers that apply:

Mom's Work phone (____) _____ Dad's Work phone (____) _____
 Mom's Cell phone (____) _____ Dad's Cell phone (____) _____
 Step Mom's Home phone (____) _____ Step Dad's Home phone (____) _____
 Step Mom's Work phone (____) _____ Step Dad's Work phone (____) _____
 Step Mom's Cell phone (____) _____ Step Dad's Cell phone (____) _____
 Whom to call in case of emergency (other than parent) _____ (____) _____

Site/Weeks (please circle each week attending):

	6/13	6/20	6/27	7/4	7/11	7/18	7/25	8/1
_____ Daniels Park North (old Gilson)	1	2	3	4	5	6	7	8
North of Gilson Park, including Erie Rd. & Osborne Park								
_____ Daniels Park South	1	2	3	4	5	6	7	8
King Edward Court to Shankland to Euclid Ave. to Sharpe Ave.								
_____ Ryan Park @ Ridge Acres	1	2	3	4	5	6	7	8
Robinhood Drive to Oakridge Drive to Pine Ridge Apartments								

T-shirts: Children are required to wear t-shirts on certain field trips – **2 are included with camp fee.** Please check the appropriate size:

_____ YOUTH Medium 10-12 _____ YOUTH Large 14-16 _____ ADULT Small 34-36
 _____ ADULT Medium 38-40 _____ ADULT Large 42-44 _____ ADULT X-Large 42-44
 _____ Yes, order an extra t-shirt, Additional \$6 charge

Medical Consent: In the event you cannot contact me or the other person listed on this card:

I grant consent I hereby give my consent for treatment deemed necessary by:

Preferred Physician - Dr. _____ phone number (____) _____

Preferred Dentist - Dr. _____ phone number (____) _____ OR

in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and the transfer of the child to _____ (preferred hospital) or any hospital accessible. This authorization doesn't cover major surgery unless the medical opinions of two (2) other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

I refuse to grant consent I do not consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the Parks & Recreation Dept. to take the following action"

Is your child allergic to any medications? YES NO If YES, _____
 Does your child have any allergies? YES NO If YES, _____
 Is your child taking any medications? YES NO If YES, _____

Signature of Parent/Guardian

Date