

W.I.L.D.K.A.T.S. CAMP

Wild In the Lord Discovering Kids All Through Summer

St. Paul Lutheran Church
5650 North Canfield Avenue
Chicago, IL 60631
(708) 867-5044

JUNE 17, 2019 - AUGUST 2, 2019

Hello Families!

Spring is definitely in the air! **W.I.L.D.K.A.T.S. Camp** invites students entering **Pre-School (4 year olds) through age 10** to attend a fun-filled summer! By sending your child(ren) to **W.I.L.D.K.A.T.S. Camp** you can ensure that he/she will enjoy Christian-based, safe, positive, and exciting activities all summer long!

Our camp is designed for students to nurture faith and friendships through the motto “Let us go forward and walk the walk and talk the talk in Jesus Christ”. It is important that a child’s faith is continually developed through positive interactions with peers and mentors throughout his/her life. Each week of our camp is filled with carefully designed activities to put our motto into practice.

Our ‘home base’ is St. Paul Lutheran Church located on Canfield between Bryn Mawr and Higgins. Our location is conveniently situated near a major highway (I-90) and public transportation (CTA Blue Line Cumberland & Harlem stops).

Campers will enjoy a variety of things to do such as arts & crafts, water games, outdoor games & sports, trips to Oriole Park, as well as other on- and off-campus field trips to help the “dog days of summer” pass by.

Students who have completed 8th and 9th grades are eligible to volunteer as Jr. Counselors at **W.I.L.D.K.A.T.S. Camp**. Junior Counselors are selected on a first-come first-serve and interview basis. Space is limited. Junior Counselors are welcome to donate their time and service Monday through Thursday.

W.I.L.D.K.A.T.S. Camp will be in full swing starting **June 17, 2019**. Included in this packet are all the forms you need to prepare for that day! Please sign and initial where indicated and return (either by mail, or drop off in the office) by **May 17, 2019** to qualify for the **Early Bird Special**. Space fills up quickly.

Please contact **Alvesa Thomas** via e-mail alvesathomas@stpaullecc.com or call **708-867-5044**, if you have any questions about our **W.I.L.D.K.A.T.S. Camp**.

GENERAL CAMP INFORMATION

RATES

- **Camp Hours:** 9 AM – 3 PM
- **Camp Daily Rate:** \$34.00 - (6-hour day)
- **Extended Care:** 7AM – 9 AM and from 3 PM – 6 PM at a rate of \$7.50/hour.

2ND AND 3RD CHILD RATES

- **2nd Child:** \$32.00 (6-hour day) **3rd Child:** \$30.00 (6-hour day)
- **Extended Care:** \$14.00 (\$7.00/hour) **Extended Care:** \$12.00 (\$6.00/hour)

ENROLLMENT FEE: (non-refundable)

- \$50 per child. (\$30/child if turned in before May 17)
- **Make check payable to: ST. PAUL LUTHERAN CHURCH**

WALKING FIELD TRIPS:

Field trip costs will be given to the families at least ONE WEEK prior to the trip. This price may vary due to price of gas, cost of a bus, and the cost of the trip/presentation. As explained below, field trip plans will be released when enrollment is finalized.

BILLING

Unless otherwise noted, all statements will be sent home to parents on **FRIDAYS**. The statement will reflect your balance, the hours your child attended camp for the week, and any other fees (i.e. BASC, etc.) Payments are expected to be made by the following FRIDAY. Make check payable to: ST. PAUL LUTHERAN CHURCH.

POLICIES & PROCEDURES

CLOTHING & TOWELS

Each child must bring a swimwear and towel to camp during the week. It is also suggested that an extra change of clothes be kept at camp as well. All personal belongings must be clearly labeled with your child's name (**first initial and complete LAST name are recommended**). The staff reserves the right to label any articles brought by your child. Swimwear, towels, and used changes of clothes will be sent home EVERYDAY and should be returned the following day. Children may wear tank tops, shorts, and comfortable loose-fitting clothing. Please make sure your child is dressed appropriately. Keeping a pair of gym shoes at camp is also suggested as we do a lot of walking.

OTHER PERSONAL BELONGINGS

Electronic toys (iPods, video games, etc.) are allowed at camp, however, only to be used during assigned camp hours. They should be labeled and kept in a case inside your child's cubby when not in use. The camp is not liable if these toys get broken, lost or stolen. *The staff at **W.I.L.D.K.A.T.S.** has the right to monitor, control and limit the use of electronic toys and their accompanying applications (Facebook, Instagram, games, etc.)

FOOD

Children are expected to bring their own lunch each day. Please provide your child with a healthy lunch as we will be active throughout the day. Include a non-carbonated drink with your child's lunch. Soda pop is **not** allowed. It is also suggested that your child bring a water bottle (labeled with their name), that is versatile enough to bring on a walking trip. Also provide your child with a healthy morning and afternoon snack. **Microwavable meals are allowed, lunchtime may often times be picnic-style.**

DROP OFF & PICK UP PROCEDURES

Parents/Legal Guardians will be required to sign their child in and out of camp and record the times of drop off and pick up. **Please walk your child in to camp**, ensuring that all of his/her belongings are placed in the proper places, and sign your child out and help them take their belongings home. Please explain this procedure to any other adults you allow to pick up your child.

WHERE ARE WE?

A sign declaring our location will be posted on the door where you enter to drop off/pick up your child.

If we are at Oriole Park & Library, you may come to the park to sign your child out, or you may wait until we return. If we are on a field trip, you may return at the posted time to pick up your child. If there is an emergency please contact **Alvesa Thomas 708-867-5044.**

FIELDTRIPS

W.I.L.D.K.A.T.S. Camp will schedule field trips once enrollment is finalized. Field trips may exceed the regular camp tuition. On **off-campus field trip days** (MONDAYS), as well as **Oriole Park days** (THURSDAYS) we request that **campers wear their camp t-shirts, comfortable walking shoes, and pack a brown-bag lunch. Campers will need extra money on field trip days.** Field trips include Oriole Park and Dairy Queen walks with other trips/presentations to be announced as enrollment is finalized. All prescribed medications and correct emergency contact information will be carried on ALL off-campus field trips.

ORIOLE PARK

Each week we will walk to Oriole Park. **W.I.L.D.K.A.T.S.** has been attending their summer literacy program since we started in 2009, and will continue to do so on THURSDAYS this summer. More information about this program will be available to you during the first week of camp. After we attend the hour-long session, campers will picnic in the park, play on the playground, and in the big sprinkler. To minimize the amount of time needed to get ready for our trip, we ask that campers come to camp with their bathing suits on under their clothes, wear walking shoes and have a brown bag lunch (no refrigeration or microwave is available).

WATER PLAY

Campers are allowed to bring *squirt bottles*. **No “water guns” are allowed.** Each day, weather permitting, we will do a variety of water activities. We have blow-up pools, countless buckets, and sponges, but would still like to request that if your child has a favorite water toy (i.e. cool sprinkler), they are more than welcome to donate it to our camp.

PACKET INCLUDES THE FOLLOWING FORMS:

- Medical & Allergy Information Form**
- Field Trip & Neighborhood Outings Form**
- Computer & Technology Form**
- Photography Form**
- Sunscreen Form**
- Child Release Form**



EARLY BIRD SPECIAL! \$30 per Child!

Complete and sign each form
Return **ALL** forms and enrollment fee by **MAY 17, 2019** to:

**St. Paul Lutheran Church
W.I.L.D.K.A.T.S. Camp
5650 N. Canfield
Chicago, IL 60631**

Forms and enrollment fees received *after May 17, 2019* increase to **\$50 per child.**
(Enrollment fees go towards a t-shirt & bag and the general camp expense fund.)

Make check payable to: ST. PAUL LUTHERAN CHURCH

All **W.I.L.D.K.A.T.S. Camp** forms & enrollment fees are due by **June 3, 2019.**

REGISTRATION FORMS

Child's Name: _____ Birth Date: _____
 Age: _____ Grade attending in the fall: _____ T-Shirt Size: **Youth / Adult S M L XL**
 Home Address (of Child): _____
 Father's Name: _____ Mother's Name: _____
 Home Phone: _____ Home Phone: _____
 Work Phone: _____ Work Phone: _____
 Cell Phone: _____ Cell Phone: _____
 E-mail: _____ E-mail: _____

EMERGENCY STATEMENT: I/we, the parent(s)/legal guardian(s) hereby authorize the W.I.L.D.K.A.T.S. Camp/St. Paul Staff to act on our behalf if treatment and/or transportation is required in case of an emergency:

_____ (Signature)

Please select the days your child(ren) will attend camp along with the hours each day. If you don't know your exact schedule for the whole summer, only fill out what you can, and let us know a week in advance what your anticipated camp days will be for the following week. **Minimum of 10 days is required to be reserved at the time of enrollment. You may add more days as needed.**

Week	Monday	Tuesday	Wednesday	Thursday	Friday
EXAMPLE	8am – 4pm		8am – 4pm		8am-4pm
June 17- 21					
June 24-28					
July 1-5					
July 8-12					
July 15-19					
July 22-26					
July 29-Aug 2					

ATTENDANCE POLICY (please sign & return with Registration Forms)

* I have read the above information.

* I understand that I will be billed each day that I have **scheduled** my child(ren) to attend camp.

* If I need to exchange days, I am aware that I need to notify Alvesa Thomas **one week prior** to the exchange.

* I understand that I can add days if needed, and am aware that I will need to notify Alvesa Thomas one week prior to the additions to allow for the appropriate staffing to ensure child safety.

* If my child does not attend a scheduled day of camp, and no exchanges were arranged, I understand that **I will be billed** for a camp day (9am – 3pm) at the current rate.

* Field trip days are “no excuse days”. I understand that if I signed up for a field trip and my child does not attend, **I will be charged for a camp day as well as the field trip expense.**

* **RETURNED CHECKS: If your check is returned, you will be charged a \$35 NSF fee.** After a returned check only **cash** will be accepted for W.I.L.D.K.A.T.S. payments.

Parent/Legal Guardian Signature: _____ **Date:** _____

MEDICAL FORM 
&
ALLERGY INFORMATION

Child's Name: _____ Date of Birth: _____

Pediatrician's Name: _____ Phone #: _____

Describe any special medical/health conditions and current treatments:

Prescribed Medications:

Dosage: _____ Duration/Time Given: _____

Possible Side Effects: _____

Describe any ALLERGIES & REACTIONS (please clearly indicate if allergy/reaction is *life threatening*):

Allergy Medications: _____

Dosage: _____ Duration/Time Given: _____

Epi-Pen: YES _____ NO _____

What accommodations can we make at **W.I.L.D.K.A.T.S. Camp** to help with **allergy prevention** and/or any **health conditions**?

***PLEASE inform Alvesa Thomas of any changes to medications or updated health information.**


**FIELD TRIPS
&
NEIGHBORHOOD OUTINGS
FORM**

CHILD'S NAME: _____

I/we, the parent(s)/legal guardian(s) give permission for our child to participate in field trips and neighborhood outings with the **W.I.L.D.K.A.T.S. Camp**. **I/we understand** the field trips planned will include transporting my child, and **I/we, the parent(s)/legal guardian(s) have signed** the legal release. **I/we, the parent(s)/legal guardian(s) also understand** that if we choose not to allow our child participate that our child will not be permitted to attend **W.I.L.D.K.A.T.S. Camp** on the scheduled field trip day.

Any field trip that is scheduled is subject to a separate fee. A copy of your child's emergency information will be taken on each field trip/neighborhood outing.

LEGAL STATEMENT

In consideration of the arrangements made for my child

to participate in field trips or neighborhood outings (Oriole Park, Dairy Queen, Library and community walks) sponsored by the **W.I.L.D.K.A.T.S.**, **I/we, the parent(s)/legal guardian(s)** of the above named child hereby agree to hold blameless the St. Paul Lutheran Church and school, including its employees and agents against any and all losses, claims and damages asserted because of injury to persons or property arising out of the participation of my/our child named above, during field trips or neighborhood outings.

Regular Staff-to-Child Ratios: *1:5* or better will prevail for **ALL** Field Trips or Neighborhood Outings.

Signature of Parent/Legal Guardian: _____

Date: _____

COMPUTER & TECHNOLOGY FORM



CHILD'S NAME: _____

As a parent(s) or legal guardian(s) of the student named above, **I/we, the parent(s)/legal guardian(s) grant** permission for my child to access computer services such as the Internet and e-mail. **W.I.L.D.K.A.T.S.** staff will do their best to monitor or restrict access to all controversial materials. (These materials would not likely be found accidentally while doing normal research or communication. A user would have to intentionally look for them.) Should I/we later become concerned about what my/our child is reading or viewing on the Internet, I/we understand that I/we can terminate this approval by contacting the director of **W.I.L.D.K.A.T.S.**

Parent/Legal Guardian Signature: _____

Date: _____

PHOTOGRAPHY RELEASE FORM



CHILD'S NAME: _____

I/we, the parent(s)/legal guardian(s) give permission for the above named child's photograph to be used for publicity purposes. **I/we, the parent(s)/legal guardian(s)** understand these photos may be used for print public relations and on the St. Paul Lutheran Church's/ School's website.

Parent/ Legal Guardian Signature: _____

Date: _____

SUNSCREEN & BUG SPRAY AUTHORIZATION FORM



CHILD'S NAME: _____

In order to expedite and simplify the process of applying sunscreen prior to outdoor activities, field trips, and water play, **W.I.L.D.K.A.T.S. Camp** requests that all of the participants use the sunscreen donated/ provided. This will allow for only one bottle of sunscreen to be carried to the pool and on field trips rather than a separate bottle for each child. If you would prefer your child to have his/her own specific sunscreen, we will also accommodate your request. Please provide a bottle of the specific sunscreen or bug repellent clearly labeled with your child's name.

I/we, the parent(s)/legal guardian(s) understand that the **W.I.L.D.K.A.T.S. Camp** will use one bottle of sunscreen while attending camp and **I authorize** the application of these sunscreen products to my child by the staff of **W.I.L.D.K.A.T.S. Camp**.

***I/we, the parent(s)/legal guardian(s) also agree** to apply sunscreen to my child before dropping my child off at **W.I.L.D.K.A.T.S. Camp** due to the lag time in sunscreen effectiveness after application.

Parent/Legal Guardian Signature: _____

Date: _____



EMERGENCY CONTACT & CHILD RELEASE FORM

CHILD'S NAME: _____

EMERGENCY CONTACT INFORMATION

If a parent or guardian cannot be reached in the case of an emergency, **please list 2 people** who you authorize **W.I.L.D.K.A.T.S. Camp** to contact.

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Parents and legal guardians are permitted to visit during **W.I.L.D.K.A.T.S. Camp** hours and are allowed to pick up the child unless access is prohibited or restricted by a court order.

(Court documents must be on file with the W.I.L.D.K.A.T.S. Camp.)

Please list all adults who are allowed to pick up your child from **W.I.L.D.K.A.T.S. Camp**. Please explain to these individuals that an **ID may be requested** before the child is released.

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

I/we, the parent(s)/legal guardian(s) understand that no one may pick up my child unless they are listed on this form or I send a note, e-mail, or call ahead of time. Otherwise my child will remain at **W.I.L.D.K.A.T.S. Camp** until a parent is notified. **All** adults authorized to pick up my child **must show a valid photo ID when requested**, before my child is released to them.

Parent/Legal Guardian Signature: _____

Date: _____