Lan-Oak Park District	Household email:					
Camper Information Form	T-Shirt Size:					
Participant Name:	Camp enrolling: Returning Camper? ☐ Camp Wewannago ☐ Yes ☐ No					
Address:	Birthdate:	Age:	: Grade:		de: Male Female	
Parent/ Guardian Information						
Mother/Legal Guardian	Address: (if different)					
Home Phone	Cell Phone:					
Work Phone:	Work Address/City					
Father/Legal Guardian	Address: (if different)					
Home Phone	Cell Phone:					
Work Phone:	Work Address/City					
Parent are: ☐ living together ☐ separated ☐ divorced	other:					
Fears/Phobias? ☐ Yes ☐ No Explain:	Medical conditions/limitations? ☐ Yes ☐ No Explain:					
Does your child have allergies? ☐ Yes ☐ No Explain:	Is your child on medications?					
Dietary restrictions? ☐ Yes ☐ No Explain:	Is there medication required during the program? ☐ Yes ☐ No Explain:					
Does your child require any special accommodations while at camp? ☐ Yes ☐ No Explain:	Can your child swim? ☐ Yes ☐ No					

	Emergency Contact and Release					
Emergency Contacts	& Release					
Name:	Phone Number:	Relation:				
Name:	Phone Number:	Relation:				
People Authorized to	Pick-Up Your Child					
Name:	Phone Number:	Relation:				
Name:	Phone Number:	Relation:				
Name:	Phone Number:	Relation:				
Name:	Phone Number:	Relation:				
Name:	Phone Number:	Relation:				
**If you wish to list additional aut	horized persons to this list, please	attach additional paper to the back of this page.				
People NOT Authorize	ed to Pick-Up Your Chil					
	Name:					
Any other information that you	u would like the staff to know: _					
Parent's Signature:		Date:				
Parent's Signature:						
_	Parent Manual Acknow	wledgement				
I,received the Day Camp Parer	Parent Manual Acknown, parent of nt Manual and Behavior Manag	wledgement, acknowledge that I have ement Policy and understand that it is my				
I,received the Day Camp Parer	Parent Manual Acknown, parent of nt Manual and Behavior Manag	wledgement, acknowledge that I have				
I, received the Day Camp Parer responsibility to read it and be	Parent Manual Acknown, parent of nt Manual and Behavior Manag	, acknowledge that I have ement Policy and understand that it is my and procedures of the Day Camp program.				
I, received the Day Camp Parer responsibility to read it and be	Parent Manual Acknown, parent of nt Manual and Behavior Managecome familiar with the policies	, acknowledge that I have ement Policy and understand that it is my and procedures of the Day Camp program.				
I,	Parent Manual Acknown, parent of nt Manual and Behavior Managecome familiar with the policies	, acknowledge that I have ement Policy and understand that it is my and procedures of the Day Camp program.				
I,	Parent Manual Acknown, parent of nt Manual and Behavior Manage ecome familiar with the policies Date Photo Release and by a parent of guardian) voice, image to inspect or approve the finished particular to the eventual use to thotographed, audio, and/or video, for					



Swimming Pool Permission & Water Days

l,	
parent of	, give permission for my child to swim at the Lan-Oak Park
District Eisenhower Center Po	ool and to participate in water days at the Lan-Oak Park District.
understand that my child will l Center, as well as the safety will not be held responsible fo	rk District liable for any injury or accidents that may occur during this activity. I have to follow the State of Illinois Rules, which are posted at the Eisenhower rules established by the management of the facility. The Lan-Oak Park District r any items that are lost or stolen. Water activities include but are not limited to games, sprinklers, and splashing in small size wading pools.
X	Date
Signature	
If you do not wish to allow you	ur child to participate in swimming and water activities, please sign below.
My child, the Lan-Oak Park District Eis District	(child's name) does NOT have permission to swim at enhower Center Pool and/or to participate in water days at the Lan-Oak Park
X	Date
Signature	