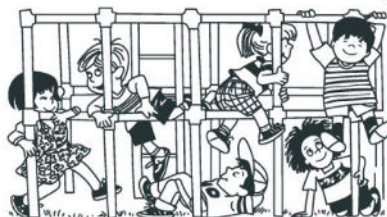


CAMP GORTON



2019

Themes per week:

0-24 months

June 10-14- Three Little Pigs

June 17-21- Goodnight Moon

June 24-28- Itsy Bitsy Spider

OFF July 1-5

July 8-12- Goodnight Gorilla

July 15-19- The Little Blue Truck

July 22-26- The Little Engine That could

July 29-Aug. 2- The Very Hungry Caterpillar

August 5-9 -The Little Fire Truck

2yrs-Young 3s and 3.5yrs-5yrs

June 10-14- Corduroy

June 17-21- Harold and the Purple Crayon

June 24-28- Where the Wild Things Are

OFF July 1-5

July 8-12- Goodnight Moon

July 15-19- Sylvester and the Magic Pebble

July 22-26- The Story of Ferdinand

July 29-Aug. 2- Pete's a Pizza

August 5-9 –Safety Town Jr. Deputies

Options available: MWF, T, Th or M-F

Time: 8:30-12:30 (includes lunch) Cost is \$56 per day, each additional child is \$48 per day if enrolled the same days. Lunch is included.

What to bring each day:

0-24 months

Please bring a sippy cup and/or bottles, extra change of clothes, diapers, wipes, food with child's name if child is under 15 months. We will be engaging in water play if the feels like temperature is 75 degrees or warmer and there is no sign of rain. Please bring your child in a bathing suit if it is 75 degrees or warmer that morning.

2yrs-5yrs

Please bring a bag or backpack containing a change of clothes, diapers and wipes (if applicable), and water bottle with child's name. Please do not bring in any outside food. We will be engaging in water play if the feels like temperature is 75 degrees or warmer. Please bring your child in a bathing suit if it is 75 degrees or warmer and there is no sign of rain.

***Registration forms must be turned into the Gorton Drop-In Center no later than 1 week prior to the start of your child's camp start date.**

State law requires actual signatures and paper copies of these forms and birth certificate copies to remain on file at the Center.

1. REGISTRATION FORMS:

Please complete pages 3-7 of this Registration Packet and return. ____

2. MEDICAL: Please take your DHS medical form and lead questionnaire to your child's doctor to complete and return. ____

Childhood Lead Risk Assessment Questionnaire signed and dated by child's physician. **LEAD SCREENING IS REQUIRED FOR ALL CHILDREN SIX MONTHS AND OLDER WITH A PHSYCIAN'S SIGNATURE. A TB TEST IS ALSO REQUIRED FOR ALL CHILDREN ONE YEAR OLD AND OVER. IF YOUR CHILD'S PHYSICIAN ELECTS NOT TO ADMINISTER A LEAD TEST OR A TB TEST, WE MUST HAVE A NOTE ON FILE.**

3. Photocopy of child's birth certificate – as required by DCFS.

Please make a copy of your child's birth certificate and return. ____

***If your child was enrolled in the 2018-2019 school year at the DILC and your child's information is still valid (medical, birth certificate, contact info) please indicate all information is the same as the 2018-2019 school year on page 3. If your information has changed or you are new, please fill out page 3-**

I, _____ confirm all below information is the same as 2018-2019 school year registration forms____ (check if applicable).

Last Name _____ Mother _____ Father _____

Address: _____ ZIP _____

Home Phone: _____ Mother Cell: _____ Father Cell: _____

Mother's or Father's Employer: _____ Work Phone: _____

Children: Name: _____ DOB _____

Gender: Male Female

Name: _____ DOB _____

Gender: Male Female

Name: _____ DOB _____

Gender: Male Female

EMERGENCY CONTACTS:

Name: _____

Address: _____

Phone #: _____

Relationship: _____

Name: _____

Address: _____

Phone #: _____

Relationship: _____

Name: _____

Address: _____

Phone #: _____

Relationship: _____

MEDICAL INFORMATION:

Physician:

Address: _____

Phone#: _____

Dentist:

Address: _____

Phone#: _____

Please provide any additional information that you believe your child's caregivers should be aware of regarding your child (i.e. allergies, extreme anxiety, health issues, custody arrangements, etc).

EMERGENCY AND MEDICAL PROCEDURES:

I have been informed of and agree to the following emergency and medical procedures:

1. In cases of illness, I will be called and required to pick up my child as soon as possible. If I cannot be reached, the Center will contact the emergency contacts I provided. I agree to provide at least **2 contacts**. (initial____)
2. In cases of simple injury (such as abrasion, skinned knee, splinters etc.), I understand the Center staff will perform routine hygienic procedures, such as washing wounds and applying bandages. I understand further, the Center staff will perform basic first aid procedures if the situation warrants such action. (initial____)
3. In cases requiring the attention of a physician (such as need for stitches or x-rays), I understand I will be called. If I or the emergency contacts cannot be reached, I request and give my permission for my child's doctor to be called and for that doctor to render any necessary treatment. I agree to assume financial responsibility for the doctor's care. (initial____)
4. In cases of medical emergency, I will be called immediately. If circumstances require, the paramedics will be called. The Center's staff will respond as necessary until the paramedics arrive. In the event that hospitalization is required, I give my consent for my child to be taken to Northwestern Lake Forest Hospital. I give my consent for treatment by a qualified physician at Northwestern Lake Forest Hospital. I agree to assume all financial responsibility for such treatment. (initial____)
5. I agree to leave a telephone number where I or an emergency contact can be reached upon each visit to the Center. (initial____)
6. To the best of my knowledge, my child has no condition, which restricts his/her full participation in the Center program. If, in the future, such restrictions should become necessary, I will inform the Center staff in writing of those restrictions. (initial____)
7. I understand that if the Center deems it appropriate for my child to have an aide, I the parent will provide the aide. I agree to assume all financial responsibility for said aide. (initial____)

PHOTO/VIDEO PERMISSION:

 Yes, I give my permission for my child(ren) to be photo/video graphed for the Center’s secret facebook page for the purpose of display at the Center or on the Gorton Community Center website. I understand that I would be contacted for my permission before a photograph would be released for the purpose of publicity outside the Center or Gorton Community Center website.

 No, I do not give my permission for my child(ren) to be photo/video graphed at the Center.

EMAIL CONSENT:

Please confirm that you consent to receive communications from the Center’s director.

I understand that by providing the email address below.

Email address: _____

Email address: _____

Gorton Children's Drop-In Learning Center and Camp Gorton Drop-Off and Pick-Up Policy

I agree to drop-off my child no earlier than 8:25 a.m and pick by 12:30 p.m.

If I pick up my child late, I agree to pay \$4.00 for every 5 minutes I am late.

If I have not contacted the Gorton Children's Drop-In Learning Center (DILC) to notify them I am late within 15 minutes of the time I have reserved, the DILC will call the emergency number I provided on the sign-in sheet. If I cannot be reached immediately, the DILC will call the Emergency Contacts listed in my child's file.

If my child's emergency contacts cannot be reached or are unavailable to pick up my child, the DILC is required by DCFS regulations to notify the local law enforcement officials and DCFS.

Signed: _____

Date: _____

Gorton Children's Drop-In Center Hearing and Vision

I, _____ Parent of _____

understand that I am responsible for having my child's hearing and vision tested at age 3, as

indicated by DCFS regulations.

_____ Date: _____

VERIFICATION OF RECEIPT:

CFS 581

Rev. 12/2000

State of Illinois

Illinois Department of Children and Family Services

VERIFICATION OF RECEIPT

I/WE,

Please Print Name(s)

parent(s) of _____, hereby certify that
I/we have

Name(s) of Child(ren)

received a copy of a summary of licensing standards printed by the Illinois Department of Children and Family Services.

Signature of Parent

Date

Note: the summary of licensing standards printed by the Illinois Department of Children and Family Services is found at the reception desk and on the Drop-In Center website.

I AGREE TO COOPERATE WITH THE RULES AND REGULATIONS OF THE GORTON CHILDREN'S DROP-IN CENTER REGARDING FEES, CANCELLATION POLICY, ILLNESS, IMMUNIZATION UPDATES, CLOTHING AND OTHER ITEMS SPECIFIED IN THE PARENT HANDBOOK. I UNDERSTAND THAT I WILL BE CHARGED \$25 PLUS BANK FEES FOR ANY CHECKS THAT ARE RETURNED.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

Parent Handbook

I have read and received a copy of the Parent Handbook:

Signed: _____ Date _____

SUMMER CAMP PARENT HANDBOOK

1. PURPOSE - The Gorton Children's Drop-In Learning Center (DILC) where Camp Gorton is located is a non-profit child care program serving children from six weeks through five years of age. The purpose of the Drop-In Center is to provide quality care for young children.

2. GOALS

The DILC is proud to have goals that provide your child with:

An atmosphere that promotes physical, emotional, intellectual, creative, and social growth.

An environment that is safe and nurturing.

A program that recognizes each child as a unique individual.

Positive encouragement for the child's continued growth.

Opportunities for the child to learn by doing.

An environment that encourages children's creativity.

Encouragement for social development, sharing, taking turns, problem solving, making friends, respecting others.

All children have the right to be treated with dignity and respect, and the DILC will maintain an environment free of racial or gender bias, stereotype, or prejudice. The DILC provides its staff with the opportunities to increase and further their knowledge of early childhood development through the enrollment in workshops and conferences offered throughout the year.

The DILC, established in 1986, is licensed by the Illinois Department of Children and Family Services, and complies with or exceeds all of its standards.

3. LOCATION - The Gorton Children's Drop-In Center is located in Gorton Community Center, 400 East Illinois Road, Lake Forest, Illinois, 60045. The phone number for Gorton Community Center is 847-234-6060.

4. SUMMER CAMP HOURS – JUNE 10-AUGUST 9TH, 2019 (CLOSED WEEK OF JULY 4th).

DILC summer camp hours are 8:30-12:30 Monday through Friday.

If camp at the DILC is closed due to extreme weather, You can hear the school closings on WMAQ or WBBM 780 AM radio or see

<http://www.lakeforestschools.org/about-us/district-67/index.aspx>

5. PAYMENT - The DILC summer camp requires that payment be made during the time of registration.

Payments can be made by check, cash or a credit card paid online.

Please note that a \$25 charge plus bank fees will be charged for all returned checks. The DILC summer camp reserves the right to suspend usage if payment conditions are not met.

If your child is presently being cared for at the DILC and you have an emergency message, please call Gorton's Main office at 847-234-6060.

6. CANCELLATIONS – Refunds will only be issued up to one week prior to your child’s camp start date.

7. ARRIVAL AND PICK-UP – Upon arrival please sign your child in at their classroom and leave any information about where you can be reached in case of emergency. When picking up, please allow enough time to sign out and get belongings before collecting your child. This way we can ensure proper supervision of your child while you are occupied. **PLEASE CALL THE CENTER IF YOU WILL BE LATE PICKING UP YOUR CHILD.**
We reserve the right to suspend use to anyone who is chronically tardy.

8. NON-PARENT PICK-UP - If another adult will be picking up your child, please make certain you have filled out the necessary release forms. ***Under no circumstances will a child be released to anyone without authorization from the child’s parents. DO NOT BE ALARMED WHEN WE ASK FOR PROOF OF IDENTIFICATION.*** Your child’s safety is our utmost concern. Adults picking up must be at least 18 years of age.

9. SNACK and Lunch

***** We are a NUT-FREE environment *****

The Gorton Children’s Drop-In Center serves lunch to children over 15 months. All children in the Center during lunchtime, 12:00-12:30, will be served a lunch from a DCFS approved caterer or food handler.

Children will not be able to bring in their own food unless they have a medical condition or allergy and written authorization from their pediatrician.

Snack times are scheduled for mid-morning. We provide water and a snack. Children under 15 months must bring food, snacks, bottles labeled with their name.

10. Teacher/Child Ratios

6 weeks-15 months- 1:4

15 months-24 months-1:5

2 years-3 years-1:8

3 years-5years-1:10

11. HEALTH INFORMATION - The Center will accept only those children whose updated medical forms are on file. Medical forms that we have on file are valid for two years and must be completed by a physician. **Please** remember to bring in verification every time your child receives immunizations. State law requires that all medical forms must be up-to-date. ***Lead screening and TB test results must be provided for all children. DCFS now requires a copy of a birth certificate for each child.***

12. IMMUNIZATIONS -

Age Immunization

Birth Hepatitis B *Dose 1 of 3*

2 months Hepatitis B *Dose 2 of 3*

DTaP *Dose 1 of 5*
Hib *Dose 1 of 4*
IPV *Dose 1 of 4*
PCV *Dose 1 of 4*
4 months DTaP *Dose 2 of 5*
Hib *Dose 2 of 4*
IPV *Dose 2 of 4*
PCV *Dose 2 of 4*
6 months DTaP *Dose 3 of 5*
Hib *Dose 3 of 4*
PCV *Dose 3 of 4*
6-18 months Hepatitis B *Dose 3 of 3*
IPV *Dose 3 of 4*
12 months TB test
12-15 months Hib *Dose 4 of 4*
MMR *Dose 1 of 2*
PCV *Dose 4 of 4*
12-18 months Varicella *Dose 1 of 1*
15-18 months DTaP *Dose 4 of 5*
4-6 years DTaP *Dose 5 of 5*
IPV *Dose 4 of 4*
MMR *Dose 2 of 2*
(NEW) 2, 4, & 6 months ROTA *Series of 3 doses*

13. ILLNESS - As required by state law, each child will be given a visual health check upon arrival. All children must have their hands washed upon entering the Center. A child who exhibits any signs of illness will not be able to stay at the Center. If a child becomes ill during his/her stay, a parent or emergency contact will be required to pick him/her up immediately. The child will be isolated and given proper care until an authorized adult arrives. It is essential to your child's safety to leave a telephone number of where you can be reached.

Please keep your child home if he/she:

Is unable to participate comfortably in program activities, this includes outside activities.
Needs greater care than the staff can provide without compromising the health and safety of other children
Has any of the following conditions: fever, sore throat, lethargy, irritability, persistent crying, or other signs of possible severe illness
Has diarrhea (defined as an increased number of stools compared with the child's normal pattern, with increased water and/or decreased form)
Has vomited in the previous 24 hours
Has a fever or has had one during the previous 24 hours (temperature should be normal for 24 hours)
Has had a cold for less than 4 days
Has been taking antibiotics for less than 24 hours

14. FIRST AID/MEDICAL PROCEDURES - In the event of an injury, the staff will administer first aid to the child. If the injury requires medical attention, we will attempt to contact a parent immediately. If a parent cannot be reached, we will contact the emergency numbers. In the case of an emergency, the staff will call an ambulance to transport the child to Lake Forest Northwestern Hospital.

Every effort will be made to contact the child's own physician. It is important that you keep the Center up-to-date on phone numbers, emergency numbers, and other pertinent information.

15. DAILY PROGRAM - The Drop-In Learning Center provides a daily curriculum including:
Indoor free play with developmentally appropriate toys

Small group and large group activities

Creative art projects

Outdoor play, weather permitting

Snack

Language activities

Gross motor activities

16. PROGRAM PARTICIPATION/BEHAVIOR MANAGEMENT

We encourage children to:

Help pick up after themselves

Respect property of the Center

Respect others

Share (when appropriate)

Wash hands upon entering the Center, again before eating, and after using the bathroom

Problem-solve

Be tolerant and accepting of others

Acceptable behavior is encouraged and nurtured through positive reinforcement and modeling by the staff. Should a child show inappropriate behavior, that child will be redirected and the matter discussed.

If these techniques have been exhausted, and the child is in danger of hurting himself or others, removal from the group may be necessary. After the child has had time to regain self control, he or she may once again participate in the activities. Removal from the group shall not be used for children less than 24 months of age.

If a child inflicts injury on another child resulting in medical treatment, the child will need to be picked up by the parent or approved caretaker and the matter discussed with the child's teacher or director.

State licensing requires the following policy:

“Any child who, after attempts have been made to meet the child’s individual needs, demonstrates inability to benefit from the type of care offered by the facility, or whose presence is detrimental to the group, shall be discharged from the facility.”

17. ITEMS TO BRING TO THE CENTER

Please put child in bathing suit if it is warmer than 74 degrees

Well-labeled bag with towel

Complete set of extra clothing

Sunscreen must be applied prior to drop-off

Diapers and wipes if needed

Please be sure to label all items. Children have difficulty identifying their own belongings if there are several from which to choose.

18. APPROPRIATE DRESS – Dress for MESS!

The Center encourages parents to send their child dressed for active play. *We suggest comfortable clothes, free of complicated fastenings.* Our daily schedule does include potentially messy art projects and outdoor play.

Please send your child with shoes that are appropriate for indoor and outdoor play. The children will be climbing, running, and riding toys. The Drop-In Center does not allow children to walk around in stocking feet.

19. TOYS FROM HOME – are not permitted. Toys may get lost, mixed in with Drop-In toys, or create problems for other children. A soft toy or blanket that is necessary for the children’s comfort is permitted.