

# 2026 Parent Handbook

# Summer Day Camp



Village of  
Ashwaubenon

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900 Anderson Drive  
Ashwaubenon, WI 54304  
(920) 492-2331  
[ashwaubenon.gov](http://ashwaubenon.gov)

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# Summer Day Camp

June 8-August 14

Ages 7-12

Valley View Elementary  
School



## CAMP LOCATIONS:

**Summer Day Camp will be held:**

Valley View Elementary School:

2200 True Lane

**Summer Day Camp Registration**

Ashwaubenon Community Center

900 Anderson Drive

## WHAT OUR CAMP IS ALL ABOUT:

Having fun and making summer memories will be our main goal! Camp is the time for children to grow as individuals and discover who they are. Our fully supervised Summer Day Camp will focus on 10 different weekly themes. We will have field trips, games, open swim, crafts and educational activities relating to our theme of the week. Day Camp will keep children physically active and learning in fun ways throughout the summer. Our partnership with the Ashwaubenon School District will help provide the educational tools needed to grow.

All camp counselors will be at least 18 years of age or a high school graduate, background checked and thoroughly trained to provide the best care possible. Our constant supervision will allow peace of mind as your children spend the entire day enjoying camp.

Summer Day Camp is offered 10 fun-filled weeks, open to children ages 7-12! You may sign your child up for the entire summer or for any individual week. Camp begins June 8th and will run through August 14th. Daily camp hours will be Monday-Friday 7am-6pm.

**Tier 2/3 Lottery Registration opens February 13th**

**Tier 1: Returning Ashwaubenon residents signing up for 9 or 10 weeks.**

**Tier 2: New Ashwaubenon resident families signing up for 9 or 10 weeks**

**Tier 3: Open enrolled families and residents signing up for 8 or less weeks**

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# Registration



**All Camp Registration forms must be submitted with payment or payment plan agreement at the time of signup. All required forms are available online at [ashwaubenon.gov](http://ashwaubenon.gov) or at the Ashwaubenon Community Center.**

## Enrollment:

The Summer Day Camp Program is open to all children ages 7-12 years of age.

Campers will be enrolled when the Parks and Recreation office receives completed registration form with payment.

The following forms must be completed and turned into the office for registration to be complete:

- ◆ Medication Authorization Form (if applicable)
- ◆ Field Trip Permission Slip
- ◆ Photo Release Form
- ◆ Automatic Payment Plan Agreement Form (if applicable)
- ◆ Health History & Emergency Care Form
- ◆ Day Camp Enrollment Form
- ◆ Emergency Card Form

T-shirts will be given out to campers on Monday of the first week of camp they attend. Each participant is required to wear their camp t-shirt on all field trips. A limited number of additional t-shirts will be available for sale.

The Summer Day Camp has limited enrollment. A waiting list will be maintained for each week of the program, if it becomes full. If an opening does become available, the first person on the waiting list will be given the opportunity to register. This process will be used until all open spots are filled. A limited number of spots will be reserved for children enrolled in the Ashwaubenon Summer School Program. Summer school is the first 4 weeks of camp for 2026.



# Fees & Payment

## Policies:

### Weekly Camp Fees

- \$155 per resident child
- \$170 per non resident child
- \$130 per resident half day summer school student
- \$145 per open enrollee half day summer school student

All registration fees/payment plan agreements are due at the time of registration. Registration fees will include field trip, and camp t-shirt expenses. There will be no additional fees for care before and after the core camp hours of 9-4. Children may be dropped off any time between 7:00am-9:00am and picked up anytime between 4:00pm-6:00pm. A 3% service fee will be added to all credit/debit card transactions.

Cancellations may occur up to 2 weeks prior to the start of the selected camp week, refunds will be given minus a fee of \$35 per child. No refunds will be issued within 2 weeks of the selected camp week. **All cancellation requests must be made in writing.**

If your child has not been picked by 6:00 pm, late pick-up fees will be charged. Campers will not be allowed to attend camp until these fees are paid in full. If a child has been picked up late 3 times, that child will not be permitted to attend any camp sessions for the remainder of the summer. Refunds will not be given. If a child has not been picked up by 6:30 pm and staff has been unable to contact parents, Public Safety will be notified.

## Tax Info:

The Summer Day Camp Program is not a licensed childcare program. No tax information will be provided by the Village of Ashwaubenon regarding child care expenses.

### Late Pick Up Fees

- \$10 for 1-10 minutes late
- \$20 for 11-20 minutes late
- \$30 for 21-30 minutes late

# Typical Day Schedule



## Daily Schedule

**7am-9am: Drop-off Time/Free Play**

**9am-10am: Group Activity**

**10am-10:15am: Snack**

**10:15-11am: Art Project**

**11am-Noon: Outdoor Activity**

**Noon-12:45: Lunch**

**12:45-3pm: Swim/Field Trip**

**3pm-3:15pm: Snack**

**3:15pm-4pm: Choice of Art Project or Outdoor game**

**4pm-6pm: Pick-up Time/Free Play**

# Weekly Themes



**WEEK 1: June 8-12**

**Summer Kickoff**

Start off the summer with a week of movin' and groovin'! Join us for a week of fun summer games that will get everybody up and moving. After being stuck inside all winter its time to enjoy the summer sun. Our field trip will be to Ashwaubenon Bowl.

**Week 2 June 15-19**

**Sky High**

This week will be all about sky high adventures!! All of our week long activities and art projects will be centered around the things above us. We will enjoy a trip to Xtreme Air where it will feel like we are jumping on the moon.

**Week 3 June 22-26**

**Beach Life**

This week will be about fun and wild adventures. We will incorporate exciting new water games and crafts to our daily activities. This will be a great way to beat the summer heat. We will be heading to Ashwaubomay Lake to live that lake life!

**Week 4 June 29-July 2**

**Party in the USA**

This fun filled week will focus on celebration. We will be partying all week long. Activities will include all sorts of fun games and crafts to celebrate our nation's birthday. We will be taking a trip to De Pere Cinema for some movie fun.

**Week 5 July 6-10**

**Cool Breeze**

During this week we will have action packed week of fun games and projects aimed at staying cool. We will be taking advantage of the beach lifestyle as we spend a day out at Erb Swimming Pool.

**Week 6 July 13-17**

**Wacky & Wild**

This week will be filled with all sorts of messy and sticky activities. This is the week to get creative as we find messy ways to have all sorts of fun. Our trip to Urban Air will highlight our week!

**Week 7 July 20-24**

**Hollywood.. Lights, Camera, Action!**

A week filled with movie and super hero fun. We will have special movie showings and fun music & theatre activities to bring out our creativity. A fun and relaxing beach day at Kohler Andrea State Park is planned for this week!

**Week 8 July 27-31**

**Space Adventures**

We will incorporate outer space related games and crafts to our daily activities.. We are bringing back one of our favorite trips as we return to Strand Adventures in Manitowoc.

**Week 9 August 3-7**

**Camp Olympics**

Competition will be the name of the game this week. We will be competing in a variety of activities to determine our gold medal winners! We are excited to head back to Manitowoc Aquatic Park as even the best competitors need to relax sometimes.

**Week 10 August 10-14**

**Summer Sendoff**

Our summer of fun is winding down. We will pick and choose our favorite activities and games to enjoy one last time. It was a fun filled summer, but it unfortunately must come to an end. We will be headed to the always popular Fondy Aqua Park this week. What a great way to close out the summer fun!

# Camp Policies

## **Summer Camp Program Philosophy**

The Ashwaubenon Parks, Recreation and Forestry Department Summer Day Camp Program philosophy is to provide a positive, fun and safe environment. The Summer Day Camp Program will focus on the whole child and provide hands on experience that will help build each child's learning skills.

## **Summer Camp Program Goals**

1. Provide a safe, accepting, fun and positive environment for all children
2. Develop a healthy mind and body through vigorous, challenging and creative recreational activities
3. Develop and strengthen social relationships by fostering open communication amongst staff, participants and parents

## **Admission**

Children will be enrolled in the Village of Ashwaubenon Day Camp after meeting the following criteria:

1. They must **not** be older than 12 years of age; and no younger than 7 years of age. Children may sign up any weeks before their 13th birthday. Children may begin enrolling for any weeks of camp after their 7th birthday.
2. Registration must be completed. Attached to the registration form must be a copy of the child's immunization record and proof of residency.
3. All fees have been paid.

## **Camp Fees**

Per Week:

Resident:	\$155.00
Non- Resident:	\$170.00
Summer School:	\$130.00
Non- Resident Summer School	\$145.00

## **Hours of Operation and Locations**

The summer day camp programs will operate Monday – Friday throughout the summer. Camp programs will run from 7a.m.-6p.m. at the Valley View Elementary School. Drop off times are from 7-9 a.m. and pick up times are between 4:00-6:00 p.m. daily. Participants will not be accepted earlier than the start time and cannot be left unattended in any facility building prior to or after camp hours.

## **Automatic Payment Plan Agreement**

If registration fees are not paid in full at time of registration an Automatic Payment Plan Agreement must be completed. Agreement must include valid debit/credit card information. Payments will be charged the Wednesday before the registered week of camp. Payment plans may be used for anyone signing up for multiple weeks of camp. No refunds will be issued less than then 2 weeks prior to the registered camp week. A \$35 fee will be issued to all cancellations outside of 2 weeks. These fees will be debited from your account the Wednesday before the intended week of camp. All cancellations must be made in writing. The last week of registration dues is required at the time of registration. A 3% credit processing charge will be applied to each transaction.

## **Cancellation Procedure**

A two-week written notice is required to cancel your child's week of camp to receive any refund minus a \$35.00 cancellation fee. No refund will be given less then two weeks.

## **Children with Special Needs**

If your child needs an accommodation to participate or if you would like to discuss specific details regarding your child to ensure a successful camp experience, please contact the program director at 492-2331.

## **Reporting Absences**

There are **NO** refunds for missed days of camp. Please notify the Ashwaubenon Parks and Recreation Office before 8:30 a.m. At (492-2331) on that day if your child will not be attending camp. If no one is available, please leave a message with participants full name and that he/she will be absent from day camp.

## **Late Arrivals**

The day camp core hours are from 9:00 a.m. - 4:00 p.m. daily. Please carefully observe the scheduled camp times, extended care will not be accepted earlier than the 7am start time and children cannot be left unattended in any facility building prior to or after camp hours.

## **Before and After Camp Care**

To assist parents in managing their time, Ashwaubenon Summer Day Camp offers early drop off and late pickup. There is no additional fee for this service. This time will be free play time with no activities planned. Before camp care starts at 7:00 a.m. while the after camp care runs until 6:00 p.m.



## **Sign in and Sign Out Procedures**

All participants must be signed in and out each day by a parent or a responsible party listed on the participant information sheet. Your patience and cooperation with this procedure is greatly appreciated. Children will not be able to leave without a parent/guardian signature. We will not release a child(ren) to anyone who appears to be under the influence of a controlled substance. If this situation arises, an alternate authorized contact or the authorities will be contacted. Staff may ask for photo identification when picking up a child. Check parent pocket daily for newsletter, schedule, accident reports, etc.

## **Procedure for Individuals Not Authorized to Pick Up Participants**

In a case in which an **UNAUTHORIZED** individual arrives to pick up a participant, the child will not be released. Children will only be released to people who are designated on the permission slip.

## **Failure to Pick-up Child**

If the parent or authorized person(s) fails to pick-up the child at the time of the center's closing, the center will ensure that:

1. The child is supervised at all times
2. Staff members attempt to contact the parent or authorized person(s)
3. A  $\frac{1}{2}$  hour or more after closing time, and provided that other arrangements for releasing the child to the parent or authorized person(s) have failed, and the staff member(s) cannot continue to supervise the child at the center, the staff member will call the Department of Public Safety to seek assistance in caring for the child until an authorized person is able to pick-up the child.

## **Calendar**

The Village of Ashwaubenon Day Camp Program will operate for nine weeks during the summer months. The hours of operation are 9:00 a.m. to 4:00 p.m. with extended hours from 7:00 a.m. – 9:00 a.m. and 4:00 p.m. – 6:00 p.m.

The staff of the Village of Ashwaubenon Day Camp Program is not responsible for the children until 7:00 a.m. During the camp's operation, indoor and outdoor games, sports, arts and crafts and other activities will be offered. The children will walk up to three times a week to Ashwaubenon High School for recreational swimming. There will be a Field trip offered every week.

## **Clothing and Other Belongings**

Here are a few suggestions that may be helpful to you:

1. Children should wear sneakers in order to participate in both indoor and outdoor games.
2. It is recommended that children not bring any toys or any other personal items to camp.
3. Children should bring their swim suit and goggles on swimming days.
4. Children should bring their library card on library days.
5. Children should bring a water bottle labeled with their name every day.
6. Children should bring their non-perishable lunch daily.
7. Children should not bring electronics.

## **Rainy Days at Camp**

Camp is held rain or shine. Adequate sheltered areas are available for activities. Please dress your child accordingly for the weather.

## Field Trips/Special Activities

Parents will receive written information on all activities, programs and locations of all scheduled field trips. Activities which require learned skills will be supervised and monitored for safety by trained and qualified staff. Appropriate staff-to-child ratios will be maintained at all times. Prior to each trip, staff members will prepare the children by reviewing rules and making them aware of the trip details. Staff will take with them, the sign-in sheet listing all participants enrolled for that day, along with their registration and immunizations forms. Head counts will be taken before we depart, when we arrive at our destination and when we return. All camp staff will attend field trips. Each week we will walk to the Ashwaubenon High School swimming pool for open swim if possible. Open swim will be on Mondays, Wednesdays and Fridays of most weeks. We will leave camp at 12:45pm and return at 3:00pm. Children who do not wish to swim will read books or if space/staff is available participate in an alternate activity.

## Discipline

In order to make the day camp program a positive experience for all children, we ask that three basic principles be observed:

1. Be respectful to yourself
2. Be respectful to others
3. Be respectful to the materials and equipment

We want each child to enjoy the planned activities and benefit from his/her experience. Staff will review basic rules of safety and conduct at the program. Please emphasize to your child that failure to abide by these rules may limit his/her participation in activities. General discipline techniques involve positive reinforcement for good behavior and careful explanation of behavior that is unacceptable. Minor disciplinary problems will be dealt with on a one to one basis with the child and parents. It is the parent's responsibility to inform the camp director if their child has any behavioral, mental, or physical challenges which may affect his/her day-to-day activities in class (this includes hyperactive disorders). Such issues should be specifically noted on the child's registration form and emergency card.

## Disciplinary Steps

1. Verbal Warning

2. First Strike—The staff will fill out a Yellow Behavior Notice together with the child. The parents will sign the Behavior Notice. Once signed, the original will be kept by the Day Camp Coordinator and a photocopy will go to the parents.

3. Second Strike—The staff will fill out a Red Behavior Notice together with the child. The parents will sign the Behavior Notice. Once signed, the original will be kept by the Day Camp Coordinator and a photocopy will go to the parents.

4. Third Strike—Two Red Behavior Notices means the child will be suspended for an amount determined by the Day Camp Coordinator or Program Supervisor (normally two days). Four Red Behavior Notices means the child will no longer be allowed to attend the day camp for the rest of summer. Once a child is expelled from the Ashwaubenon Day Camp, they will not be allowed to return for one calendar year, from the date of expulsion (ie-expelled in Week 8, cannot return until Week 8 of the following summer). There will be no refund for the week of expulsion, as well as the following week.

**Minor behavior problems** can be described as, but are not limited to, acts which may cause disruption of the program but, do not cause direct harm to self, others or the environment and/or acts which if repeatedly continued may lead to harm. Examples of minor behavior issues could include not following directions, horseplay, talking when staff members are giving directions, etc.

**Major behavior problems** include those actions which cause harm to self, the environment or others. Examples of major behavior include, but are not limited to, fighting/physical violence, bullying, use of alcohol/drugs, leaving the program without permission from a staff member and carrying weapons.

If major behavior problems occur or if minor behavior issues are continuous, the camp director will immediately notify the program supervisor. At this point, the parent/guardians will be notified to schedule a parent/staff conference and a behavior action plan will be developed. In all discipline instances physical punishment is never used and children will not be subjected to physical or emotional harm or humiliation. These are guidelines for behavior management; each incident will be dealt with on a case-by case basis. The Village of Ashwaubenon Parks, Recreation and Forestry Department reserves the right to permanently dismiss a participant whose behavior endangers themselves or others. The registration fee will not be prorated or refunded for removal of participants, as well as there will be no refund for that week or the following week of registration.

## **Videos**

On occasion videos may be shown for entertainment. Staff members will actively supervise children while watching any videos. All videos shown will be rated "G" or "PG". If a special video is to be shown, parents will be notified in advance. Please feel free to comment to the Day Camp Coordinator on any video that you may feel is appropriate and/or inappropriate for your child to view.

## **Snacks and Lunches**

All children need to bring daily non-perishable lunches (please write your child's name on their lunch.) A morning and afternoon snack will be provided each day. Your child should bring a labeled water bottle to each day of camp. If a child forgets to bring a lunch the Village of Ashwaubenon will provide a lunch at a cost of \$10. The child may not attend camp again until that fee has been paid.

## **Transportation**

The children of the Village of Ashwaubenon Day Camp Program will be transported by bus for weekly field trips. Staff will not be able to provide participants personal transportation. Children will be escorted to the library when going to the library and to the high school for swim.

## **Summer School Pickup**

For campers enrolled in summer school we will provide 1-2 counselor(s) to meet students at Parkview Middle School and Ashwaubenon High School after classes finish at 11:45am. The counselor(s) will walk children to the Summer Day Camp daily, rain or shine. If you do not want your child to walk in the rain you will have to transport your child and notify staff on those days. We will use a village transport van on days with severe weather.

## **Storage**

One laundry bin will be provided for each child for storage of extra clothes, swimsuits, and shoes. These bins must be emptied after each day of camp. Sunscreen and water bottles will be held on shelving units for kids to have access to. All sunscreen and water bottles must be labeled with the campers name.

## **Transition Times**

Staff plan to run sign in and sign out times as efficient as possible. We understand parents may be pressed for time and every minute is valuable. For safety and logistical reasons, please be patient with us during this time. Please allow yourself a few extra minutes, especially on Monday's and field trip days.

## **Personal Information**

Please let a counselor or director know if there has been any major change in a child's life, such as the birth of a sibling, a death of someone close, a divorce or separation so that we will be able to help your child during a difficult time. This will give us a better understanding of any possible behavior changes. Please make sure we are kept informed of any telephone number changes (new or unlisted) emergency numbers or any other pertinent information needed to keep our files updated.

## **Lost and Found**

Although the staff at the Village of Ashwaubenon Day Camp Program cannot be responsible for lost items, there will be a lost and found box of items that are not claimed. If your child has lost an item, please check in the lost and found.

## **Health and Safety Policies**

In the best interest of your child, as well as the other children and the staff, please do not send your child to the program when he/she is ill. If your child should become ill while at the program, you will be notified to come and pick up your child. We do not have the facilities or the staff to supervise and care for sick children.

We ask the following:

1. Make arrangements for alternate care before your child becomes ill
2. Be sure that alternate and emergency numbers are up to date

Please keep the staff at the Ashwaubenon Summer Day Camp informed of any significant medical incidents that may be cause for concern such as:

- Exposure to communicable disease
- Updates on any allergies your child may have
- Any medication being given at home
- Reactions to bites/stings (bees, hornets, etc.)

If your child needs to take any medication while at the program, you MUST have a doctor's permission slip. This must state the type of medication, the dosage. The medication MUST be in its original container. If a child needs emergency attention, all efforts to notify the parent(s) about the circumstances will be made. In the event the parent(s) cannot be reached, the Day Camp Coordinator at the Village of Ashwaubenon Day Camp Program will notify the Emergency Medical Team and continue to phone the parent(s) until they can be reached. Please remember to sign the medical release form. Staff will follow up with any reported head injury a child may suffer while at camp. These injuries can be difficult to diagnose. If a camper does notify staff of a concussion or other head injury they will be examined by staff. If a concussion is evident parents will be notified immediately. Please note these injuries can be difficult to diagnose. Please talk to your child about concussions and the importance of letting counselors know when they have potentially hurt/injured their head.

## **Head Lice**

In the best interest of all day camp children and staff, if your child has any form of head lice (nits, living), please refrain from sending them to day camp until they are completely clear. The Day Camp Coordinator or Lead Counselor will check them upon return.

## **Sun and Hydration Safety**

Staff will encourage frequent water breaks. Staff will limit outdoor activity on days with high temperatures or heat index. Participants are encouraged to wear sunscreen during all outdoor activities. Staff will remind participants to apply sunscreen but participants are responsible for his/her own application. If younger children need assistance staff will assist if proper sunscreen permission slip has been completed.

## **Health and Communicable Diseases**

Hand washing, and the use of antibacterial gel will be encouraged at all programs. Please enforce hand washing procedures before/after eating and after toileting with your child.

Please do not send your child to the program if the child's temperature is over 100 degrees or a contagious illness. Parents will be called to pick up a child if the temperature is over 100 degrees, displays signs and symptoms of a contagious illness, displays uncontrollable behavior or as determined by staff that he/she should not be at camp .

## **Valuables & What Not to Bring**

Please do not send money to camp with your child unless indicated by staff. If your child has money for a field trip, please put in an envelope, put your child's name, and the amount. Staff is not responsible for money. We respectfully request all electronic devices (i.e cell phones, tablets, iPods, hand held games, cameras, etc.) be left at home. Children will not be given an opportunity to use these devices. If an emergency phone call must be made participants will be directed to a camp staff member. Parks and Recreation is not responsible for these items. Please do not allow children to bring in or wear expensive jewelry or clothing. No pocket knives, trading cards, skateboards, roller blades, heelies, sports equipment or toys. Toys may be permitted on show and tell days or other designated times.

**With the overwhelming demand we are still working to find the best registration system possible. We will be using a tiered priority system for registration in 2026.**

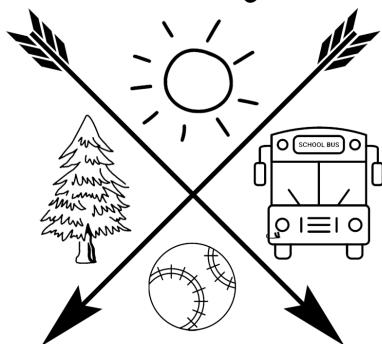
**Tier 1** will be for returning Ashwaubenon resident families who are registering for 9 or 10 weeks of camp in 2026. This tier is guaranteed a spot for all children registering for the required amount of weeks. Only children living at your residency that are immediate family qualify for this tier. We will be using the 2025 camp roster to verify enrollment. You must still bring proof of current Ashwaubenon residency. You do not need a number for this tier and may drop off your registration and make payment anytime during Ashwaubenon Community Center business hours starting 7:30am February 2nd until 4:30pm on February 10th. Starting February 11th your spot is no longer guaranteed and you would need to enter the February 13th lottery system.

**Tier 2** will be for new Ashwaubenon resident families who are registering for 9 or 10 weeks who did NOT participate in 2025. This tier is based on availability after the tier 1 registration. You will want to get your lottery ball before 8:00 am. Each family will receive 1 lottery ball no matter how many children are in the immediate family. We will start registration with ball 1, then ball 2, then ball 3 and so on, until all spots are filled or all numbers are called. Registration will begin at 8:00am. You must bring proof of current Ashwaubenon residency. You are required to be present when your number is called. There is no benefit to picking a lottery ball earlier. We will announce how many spots are available on February 11th for Tier 2/3.

**Tier 3** will be for all non-residents of Ashwaubenon (open enrolled) or anyone registering for 8 or less weeks of camp. This will be dependent on how many spots are available (if any) after Tier 1 and Tier 2 registration. You will want to get your lottery ball before 9:00 am. Each family will receive 1 lottery ball no matter how many children are in the family. We will start registration with ball 1, then ball 2, then ball 3 and so on, until all spots are filled or all numbers are called. Registration will begin at 9:00am or at the conclusion of tier 2 registration whichever is later. We expect availability to be very limited for this tier if any. There is no benefit to picking a lottery ball earlier. You must be present when your number is called.

A waitlist will be generated after all spots have been filled. We have enrolled a fair amount of campers off the waitlist in previous years. Summer vacation plans, changing family situations, or unexpected events can lead to spots opening. Spots will be filled off the waitlist in the order we receive the registrations based off of the lottery numbers from Tier 2, and then Tier 3.

## ASHWAUBENON Summer Day Camp



# 2026 Summer Camp Registration Form

Last Name \_\_\_\_\_ # of Children to Enroll \_\_\_\_\_

Address \_\_\_\_\_ City / Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ E-mail \_\_\_\_\_

Emergency Name & Phone (if no one answers to the above numbers) \_\_\_\_\_

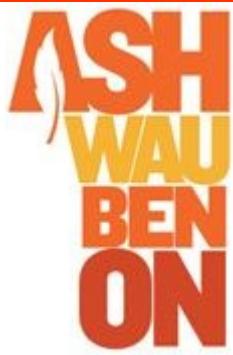
Relationship to registrant \_\_\_\_\_

Participant Names	M/F	Date of Birth	Shirt Size (indicate adult or child)	Grade (Fall 26)

Camp Week	Theme/Field Trip	Are you attending Summer School?	Total \$
<b>WEEK 1</b> <b>June 8-12</b>	Summer Kickoff Ashwaubenon Bowl	{ } YES { } NO	\$ _____
<b>WEEK 2</b> <b>June 15-19</b>	Sky High Xtreme Air	{ } YES { } NO	\$ _____
<b>WEEK 3</b> <b>June 22-26</b>	Beach Life Ashwaubomay Lake	{ } YES { } NO	\$ _____
<b>WEEK 4</b> <b>June 29-July 2</b>	Party in the USA De Pere Cinema	{ } YES { } NO	\$ _____
<b>WEEK 5</b> <b>July 6-10</b>	Cool Breeze Erb Swimming Pool		\$ _____
<b>WEEK 6</b> <b>July 13-17</b>	Wacky & Wild Urban Air		\$ _____
<b>WEEK 7</b> <b>July 20-24</b>	Hollywood...Lights, Camera, Action! Kohler Andrea State Park		\$ _____
<b>WEEK 8</b> <b>July 27-31</b>	Space Adventures Strand Adventures		\$ _____
<b>WEEK 9</b> <b>Aug 3-7</b>	Camp Olympics Manitowoc Aquatic Park		\$ _____
<b>WEEK 10</b> <b>Aug 10-14</b>	Summer Sendoff Fondy Aqua Park		\$ _____

**Terms and Conditions:** I, as the participant or parent/legal guardian of the above named child, hereby give permission for his/her/my participation in the above listed activity. I further authorize, without my prior approval, the rendering of any emergency medical treatment that may be necessary due to his/her/my participation in the activity. I hereby, for myself, my child, my heirs, executors and administrators, waive and release any and all rights and claims for damages I or my child may have against the representatives, successors, and assigns for any and all injuries suffered by myself or my child at any activity sponsored by these groups. In addition, by registering for the program I have granted the Village of Ashwaubenon permission to use my photograph for promotional purposes unless otherwise noted.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



# Medication Authorization Form

(If Applicable)

Medication Name \_\_\_\_\_ Controlled Drug? YES  NO

Dosage \_\_\_\_\_ Method \_\_\_\_\_ Time of Administration \_\_\_\_\_

Specific Instructions for Medication Administration \_\_\_\_\_

Medication Administration Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Stop Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Is this medication to be self-administered by the child?   Yes  No

Relevant Side Effects of Medication \_\_\_\_\_

Plan of Management for Side Effects \_\_\_\_\_

Known Food or Drug: Allergies? YES  NO  Reactions to? YES  NO  Interactions with? YES  NO

If "yes" to any of the above, please explain \_\_\_\_\_

Prescriber's Name \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_

Prescriber's Address \_\_\_\_\_ Town \_\_\_\_\_

Signature \_\_\_\_\_

**Parent/Guardian Authorization:**

I request that medication be administered to my child as described and directed above and attest that I have administered at least one dose of the medication to my child without adverse effects.

I request that medication be self-administered to my child as described and directed above.

Name of Day Camp \_\_\_\_ Ashwaubenon Day Camp \_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Parent/Guardian Authorizing Administration of Medication \_\_\_\_\_

Relationship to Child: Mother  Father  Guardian/Other  explain: \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_

Signature of Parent/Guardian Authorizing Administration of Medication \_\_\_\_\_

# **Field Trip Permission Slip**

I give permission for my child, \_\_\_\_\_, to attend all camp related field trips

---

Date

Telephone (day & evening)

---

Parent/Guardian signature

Print name

## **Waiver of Liability**

Waiver Agreement: In consideration of your accepting my child's or my entry. I hereby, for myself, my child, my heirs, executors and administrators, waive and release any and all rights and claims for damages I or my child may have against the representatives, successors, and assigns for any and all injuries suffered by myself or my child at any activity sponsored by these groups.

DATE \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_ Print name: \_\_\_\_\_

# **RELEASE FORM**

## **(photos/images)**

I hereby grant the Village of Ashwaubenon the right and permission to use and publish photographs/film/video tapes/electronic representations made of me/my minor child by the Village of Ashwaubenon, its employees or agents, while participating in any Village of Ashwaubenon sponsored or directed activity, and I hereby release the Village of Ashwaubenon, its officers, officials, employees from any and all liability from such use and/or publication.

### **PLEASE PRINT CLEARLY**

Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# Ashwaubenon Parks & Recreation Department

## AUTOMATIC PAYMENT PLAN AGREEMENT

A 3% service fee will be added to all credit/debit card transactions.

Complete and return this agreement

Form must be completed and turned in with registration unless paying in full

**(Please print name and address)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mailing address if different than above:

Street or P.O. Box address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone # \_\_\_\_\_ Best time to call: \_\_\_\_\_

**\*Payment will be deducted on the Wednesday before the registered camp week**

Based on the above, I hereby authorize the Ashwaubenon Parks & Recreation Department to initiate entries to my account using my designated credit/debit card on file. This authorization will remain in effect until the completion of registered camp weeks. I have the right to stop payment on an individual entry or to have entries corrected by timely notification to Ashwaubenon Parks & Recreation Department. A two week written notice must be given to the Ashwaubenon Parks & Recreation department for any cancellation. A non-refundable \$35 per week fee will be applied to all cancelled weeks. One week of registration fees is due at registration. This amount will be applied to the child's last week of camp.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Credit/Debit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_





## HEALTH HISTORY AND EMERGENCY CARE PLAN

<b>CHILD INFORMATION</b> <hr/> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Name (Last, First, MI)</td> <td style="width: 50%;">Address – Home (Street, City, State, Zip Code)</td> </tr> <tr> <td>Telephone Number</td> <td>Birthdate (mm/dd/yyyy)</td> </tr> </table> <hr/>		Name (Last, First, MI)	Address – Home (Street, City, State, Zip Code)	Telephone Number	Birthdate (mm/dd/yyyy)	<b>PARENT / GUARDIAN INFORMATION</b> Provide information where the parent(s) / guardian(s) may be reached while the child is in care. <hr/> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Name</td> <td style="width: 50%;">Telephone Number – Home</td> </tr> <tr> <td>Telephone Number – Home</td> <td>Telephone Number – Work</td> </tr> <tr> <td>Telephone Number – Work</td> <td>Telephone Number – Cellular</td> </tr> <tr> <td>Telephone Number – Cellular</td> <td>Telephone Number – Cellular</td> </tr> </table> <hr/>		Name	Telephone Number – Home	Telephone Number – Home	Telephone Number – Work	Telephone Number – Work	Telephone Number – Cellular	Telephone Number – Cellular	Telephone Number – Cellular		
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Name	Telephone Number – Home																
Telephone Number – Home	Telephone Number – Work																
Telephone Number – Work	Telephone Number – Cellular																
Telephone Number – Cellular	Telephone Number – Cellular																
<b>PHYSICIAN / MEDICAL FACILITY INFORMATION</b> <hr/> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Name – Physician</td> <td style="width: 50%;">Address – Medical Facility</td> </tr> <tr> <td></td> <td>Telephone Number</td> </tr> </table> <hr/>		Name – Physician	Address – Medical Facility		Telephone Number	<b>SUNSCREEN / INSECT REPELLENT AUTHORIZATION</b> If provided by the parent, the sunscreen or insect repellent shall be labeled with the child's name. Per DCF 251.07(6)(f)2., authorizations shall be reviewed every 6 months and updated as necessary. Per DCF 250.07(6)(f)2.a., Authorizations shall be reviewed periodically and updated as necessary. <hr/> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the camp to apply sunscreen to my child.           </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Diabetes           </td> </tr> <tr> <td><input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the camp to allow my child to self-apply sunscreen.</td> <td><input type="checkbox"/> Epilepsy / seizure disorder</td> </tr> <tr> <td><input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the camp to apply repellent to my child.</td> <td><input type="checkbox"/> Any disorder including Cognitively Disabled, LD, ADD, ADHD, or Autism</td> </tr> <tr> <td><input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the camp to allow my child to self-apply repellent.</td> <td>Brand Name</td> </tr> <tr> <td></td> <td>Ingredient Strength</td> </tr> </table> <hr/>		<input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the camp to apply sunscreen to my child.	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the camp to allow my child to self-apply sunscreen.	<input type="checkbox"/> Epilepsy / seizure disorder	<input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the camp to apply repellent to my child.	<input type="checkbox"/> Any disorder including Cognitively Disabled, LD, ADD, ADHD, or Autism	<input type="checkbox"/> Yes <input type="checkbox"/> No I authorize the camp to allow my child to self-apply repellent.	Brand Name		Ingredient Strength
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	Ingredient Strength																
<b>HEALTH HISTORY AND EMERGENCY CARE PLAN</b> If available, attach any health care plan information from the child's physician, therapist, etc.																	
<p>1. Check any special medical condition that your child may have.</p> <p><input type="checkbox"/> No specific medical condition</p> <p><input type="checkbox"/> Asthma <input type="checkbox"/> Diabetes</p> <p><input type="checkbox"/> Cerebral palsy / motor disorder <input type="checkbox"/> Epilepsy / seizure disorder</p> <p><input type="checkbox"/> Other condition(s) requiring special care – Specify.</p> <p><input type="checkbox"/> Milk allergy. If a child is allergic to milk, attach a statement from the medical professional indicating the acceptable alternative.</p> <p><input type="checkbox"/> Food allergies – Specify food(s).</p> <p><input type="checkbox"/> Non-food allergies – Specify.</p> <p>2. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I hereby give my consent for emergency care or treatment to be used if I cannot be reached immediately.</p>																	

2. Triggers that may cause problems – Specify.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Signs or symptoms to watch for – Specify.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Steps the camp staff should follow. If prescription or non-prescription medications are necessary, a copy of the form *Authorization to Administer Medication* should be attached to this form. Note: group child care centers and day camps may use their own form.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Identify any day camp staff to whom you have given specialized training / instructions to help treat symptoms.
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
6. When to call parents regarding symptoms or failure to respond to treatment.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. When to consider that the condition requires emergency medical care or reassessment.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Additional information that may be helpful to the child care provider.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE – Parent or Guardian \_\_\_\_\_

Date Signed (mm/dd/yyyy) \_\_\_\_\_

**Staff Purposes Only:**

Review dates: \_\_\_\_\_

## **AUTHORIZED PICK UP FORM**

**Instructions:** The parent / guardian shall fill out the form completely, sign it and submit it with camp registration. Information on this form shall be kept current.

**PARENT OR GUARDIAN** – All parents / guardians are permitted to visit during camp hours and are allowed to pick up the child unless access is prohibited or restricted by a court order. Attach court order, if any. If the child resides at multiple locations, the department recommends the provider obtain and attach a schedule.

a. Name and Relationship to Child

•Email Address Where Reachable While Child is in Care

Home Address (Street, City, State, Zip)

Home / Cell Phone No.

Does child reside at this location? Yes  No

Place of Employment and Work Phone No.

b. Name and Relationship to Child

Email Address Where Reachable While Child is in Care

Home Address (Street, City, State, Zip)

Home / Cell Phone No.

Does child reside at this location? Yes  No

Place of Employment and Work Phone No.

**AUTHORIZED PERSONS** – Persons other than parents / guardians who are authorized to pick up the child or accept the child if dropped off. If no one, write "None."

a. Name and Relationship to Child

Home/Cell No.

Email Address Where Reachable While Child is in Care

Place of Employment and Work Phone No.

b. Name and Relationship to Child

Home/Cell No.

Email Address Where Reachable While Child is in Care

Place of Employment and Work Phone No.

c. Name and Relationship to Child

Home/Cell No.

Email Address Where Reachable While Child is in Care

Place of Employment and Work Phone No.

*Continued on back*

**EMERGENCY CONTACT** – The person to be notified in an emergency when parents / guardians cannot be reached.

Yes  No This person is authorized to pick up the child.

Name and Relationship to Child

Place of Employment and Work Phone No.

Home / Cell Phone No.

Email Address Where Reachable While Child is in Care

SIGNATURE – Parent or Guardian

Date Signed

Ashwaubenon Day Camp Emergency Card

Full Name of Child \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ Phone \_\_\_\_\_

Physician Name \_\_\_\_\_ Phone \_\_\_\_\_

Hospital Preference \_\_\_\_\_

Emergency Contact (when parents can't be reached) Phone \_\_\_\_\_

Name/Relationship to Child \_\_\_\_\_

Please list any person(s) that are authorized to pick up your child: \_\_\_\_\_

Please list any medical conditions, allergies, or medications that your child may need/have: \_\_\_\_\_

I hereby give my consent for emergency care or treatment to be used if I cannot be reached immediately.

Signed \_\_\_\_\_

