

WILLOUGHBY SUMMER CAMP

Camp will be offered May 28 - August 9, 2024 | Camp Hours: 9:00am - 3:00pm

Willoughby Summer Camp is intended for children ages 6 to 12

Registration begins March 11 for Willoughby residents and March 25 for non-residents

Weekly Camp Cost:

WILLOUGHBY RESIDENT Camp Weekly Fee **\$130** (\$112 early bird- register by April 28th, 2024)

NON WILLOUGHBY RESIDENT Camp Weekly Fee **\$165** (\$148 early bird - register by April 28th, 2024)

Additional Services:

Bus Transportation **\$15** per week

Before Care (7:00am - 9:00am times as needed) **\$12** per week

After Care (3:00pm – 5:30pm times as needed) **\$20** per week

Before AND After Care **\$30** per week

Before Care & After Care will be held at each camp location.

Camp Weekly Fee includes (1) camp t-shirts, (1) swim shirt, all supplies and activities.

Before and After Care fee includes supervision from our camp staff as well as snacks / drinks.

Those registering online will need to complete additional forms prior to the start of camp.

You must submit the following: Registration Form, Transportation Form, & Payment Agreement Form.

*****Payment for the first week of camp is due when registering*****

*****To receive the resident rate, you must supply us with your proof of residency (Ex. copy of a utility bill)*****

Completed registration forms should be dropped off to the **Willoughby Parks and Recreation Office** open Monday - Friday 7:30am - 4:30pm located in City Hall at 1 Public Square, Willoughby, OH 44094.

There is an after-hours drop box located on the outside of City Hall near the south door.

Forms can also be completed and emailed to dsarosy@willoughbyohio.com

We are now holding Summer Day Camp at five camp locations.

Daniels East (ages 6-7 | grades 1-2)

Daniels West (ages 8-9 | grades 3-4)

Daniels Rotary (ages 10-12 | grades 5+)

Grades listed are for the 2024-25 school year

Daniels Park East Pavilion: 38401 Johnnycake Ridge Rd., Willoughby, OH 44094

Osborne Park Pool Pavilion (ages 6-12)

At this camp location we will have 1 pavilion for campers ages 6 - 12 yrs old.

Campers will be split into age groups for daily activities.

38575 Lakeshore Blvd. Willoughby, OH 44094

Our camper to counselor ratio will not exceed 12:1.

If camps fill, children will be placed on a waiting list.

Registration is taken by the week; we do not offer single day registration.

	Monday	Tuesday	Wednesday	Thursday	Friday
2024 Week 1: Kick off Summer 5/28 - 5/31	NO CAMP	Get to know your camp! Beach Ball Icebreaker	Camp Activities	Cookout	Pool
Week 2: Great Outdoors Week 6/3 - 6/7	treasure map / scavenger hunt	Pool	<i>Inflatables @ Daniels</i>	Camp Activities	Pool
Week 3: Animal Week 6/10 - 6/14	Animal Masks	Pool Design Draw String Bags	Field Trip: Cleveland Zoo	Cookout	Pool
Week 4: Pirate Week 6/17 - 6/21	Camp Activities	Pool	NO CAMP (6/19)	Field Trip: Clay's Park (late return -4:45pm)	= Pool
Week 5: Mad Science Week 6/24 - 6/28	Camp Activities Science Experiments	Pool	Field Trip: Fun N Stuff	Science Experiments Tye-Dye	Pool
Week 6: Red, White and Blue 7/1 - 7/5	Camp Activities Red White and Blue Bracelets	Pool	Field Trip: Skating / Bowling / Cle Science Center	NO CAMP (7/4)	Pool
Week 7: Beach Week 7/8- 7/12	Camp Activities	Pool / Tye Dye	Field Trip: Pioneer Waterland	Hawaiian Dress / Make Leis	Pool
Week 8: <u>Super Hero</u> 7/15 - 7/19	Make Superhero Capes	Pool	Field Trip: Sky Zone	Cookout Dress like your favorite Superhero	Pool
Week 9: Christmas in July 7/22 - 7/26	Camp Activities	Pool	Field Trip: Clay's Park (late return -4:45pm)	= Christmas in July	Pool
Week 10: Camp's Got Talent 7/29 - 8/2	Pictionary / Talent Show Sign- ups and practice	Pool	Cookout / Talent Show	Waldameer (late return- 6pm)	= Pool
Week 11: <u>Water Week</u> 8/5 - 8/9	Camp Activities	Pool	<i>Inflatables @ Daniels Dunk Tank</i>	Cookout	Pool

Willoughby Parks and Recreation Summer Day Camp - 2024

Child's Name: _____ Gender: _____ DOB(mm/dd/yr) _____ Age: _____

Print Name

Address: _____ City/Zip: _____

*Primary Contact (name | first and last): _____ Relationship _____

Email address: _____

Phone: (____) _____ ☐ House ☐ Cell ☐ Work Phone: (____) _____ ☐ House ☐ Cell ☐ Work

*Secondary Contact: _____ Relationship _____

Phone: (____) _____ ☐ House ☐ Cell ☐ Work Phone: (____) _____ ☐ House ☐ Cell ☐ Work

*Additional Contact (If applicable): _____ Relationship _____

Phone: (____) _____ ☐ House ☐ Cell ☐ Work Phone: (____) _____ ☐ House ☐ Cell ☐ Work

Which camp site (Place an X) :

☐ Daniels East | Ages 6 – 7 ☐ Daniels West | Ages 8 – 9 ☐ Daniels Rotary | Ages 10+

☐ Osborne Park Pool | Ages 6 – 12

We encourage you to register for the correct camp based on age. We will still bring the camps together for activities, field trips etc.

Which weeks of camp? (Please Check):

Date of Camp	5/28	6/3	6/10	6/17	6/24	7/1	7/8	7/15	7/22	7/29	8/5
Week Number	1	2	3	4	5	6	7	8	9	10	11

Camp T-shirts/ Swim Shirt: children are required to wear t-shirts/swim shirts on specified field trips.

1 t-shirt and 1 swim shirt are included with your camp fee. Please choose the appropriate size:

_____ YOUTH SMALL _____ 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, I would like to order an ADDITIONAL T-SHIRT for \$6**

Medical: (Circle)

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, _____

[] I Grant Consent in the event of a medical emergency for my child to receive medical care from a licensed physician or dentist and the transfer to the hospital best accessible. This authorization doesn't cover major surgery unless the medical opinions of two

(2) other licensed physicians/dentists, concurring in the necessity for surgery, are obtained prior to the performance of such surgery.

[] I Refuse Consent in the event of a medical emergency for my child to receive medical treatment. In the event of illness or injury requiring emergency treatment, I wish the Parks & Recreation Department to take the following action:

I, the undersigned, am hereby advised & fully understand that the City of Willoughby does not provide any insurance for injuries sustained by any member of my family while enrolled in any program or trip.

Signature of Parent/ Guardian

Print Name

Date

Willoughby Parks and Recreation Summer Day Camp Transportation Form - 2024

Child's Name: _____

Camp Site: ☐ Daniels East ☐ Daniels West ☐ Daniels Rotary ☐ Osborne Park Pool

How your child will be transported to and from camp:

AM Morning: **Drop Off** (at 9:00am) **Before Care** **Bussing**

PM Afternoon: **Pick Up** (at 3:00 pm) **After Care** **Bussing**

Before and After Care will be held outdoors at the camp location your child is attending!

***If using Before Care**, what time will you drop off your child at their camp location? _____

***If using After Care**, what time will you pick up your child from their camp location? _____

PLEASE FILL OUT REGARDLESS OF TRANSPORTATION: The following people are permitted to pick up my child:

Legal Guardian: _____ Relationship: _____ Phone (_____) _____

Parent: _____ Relationship: _____ Phone (_____) _____

Name: _____ Relationship: _____ Phone (_____) _____

Name: _____ Relationship: _____ Phone (_____) _____

Name: _____ Relationship: _____ Phone (_____) _____

All authorized persons who are picking up campers MUST show State ID, no exceptions.

WILLOUGHBY PARKS AND RECREATION SUMMER DAY CAMP PAYMENT AGREEMENT 2024

Childs Name _____

Camp Site: [] Daniels East [] Daniels West [] Daniels Rotary [] Osborne Park Pool

___ **WILLOUGHBY RESIDENT** Camp Weekly Fee.....\$130 (\$112) Early Bird

___ **NON WILLOUGHBY RESIDENT** Camp Weekly Fee..... \$165 (\$148 Early Bird)

Additional Services (please mark each that applies)

___ Bus Transportation Weekly \$15 ___ Only Before Care Weekly \$12

___ Only After Care Weekly \$20 ___ Before and After Care Weekly \$30

WEEKLY TOTAL (Camp Fee & Additional Services): _____

[] I will be paying in full for all of the weeks I am signing up for today

[] I will be making payments because I am signing up for 3 or more weeks of camp and agree to the payment terms

Camp Week	Dates	Payment Due	<p>Payments MUST be received on or BEFORE the payment due date. Payments received after the due date will incur a \$25 late fee!</p> <p>We accept Visa, Master Card or Discover. Make Checks payable to: City of Willoughby You can pay online! Go to: willoughbyohio.activityreg.com Select: Account Enter your email address and password Select the Family Member that you are making a payment for. Select the week you are paying for. View Account Balances & Make a payment.</p> <p>Pay by phone or have a question Call us at 440-953-4200</p>
1	May 28 – May 31 (no 5/27)	At time of Registration	
2	June 3 – June 7	Thursday - May 30	
3	June 10 – Jun 14	Thursday - Jun 6	
4	Jun 17 – Jun 21 (no 19)	Thursday - Jun 6	
5	Jun 24 – Jun 28	Thursday - Jun 20	
6	Jul 1 – Jul 5 (no 4)	Thursday - Jun 20	
7	Jul 08 – Jul 12	Thursday - Jul 4	
8	Jul 15 – Jul 19	Thursday - Jul 4	
9	Jul 22 – Jul 26	Thursday - Jul 18	
10	Jul 29 – Aug 2	Thursday - Jul 18	
11	Aug 5 – Aug 09	Thursday - Jul 25	

I understand that the City of Willoughby will hold my child's spot in camp at the price at the time of my registration. I, the undersigned, am hereby & fully understand that the City of Willoughby will penalize late payments with a \$25 late fee. _____ *initials*

I understand that cancellation of any week must be done in writing prior to noon on the Friday before the camp week begins and will incur a \$20 cancellation fee. _____ *initials*

I would like to utilize automatic payments on due dates and I have saved my credit card to my Sportsman account.

YES NO _____ *initials*

Cancellations after noon on the Friday before the camp week begins forfeits the registration of someone on the wait which forfeits a refund. I understand there is no refund after the camp week begins. _____ *initials*

Signature of Parent / Guardian(or initial electronically)

Print Name

Date