



## Sports and More Summer Camps



Welcome to camp! We wanted to cover a few important things before camp begins.

**Forms:** *The following forms are required for all campers attending camp this summer.*

Contact Information/Waiver Form  
Participant Liability and Hold Harmless Agreement Form  
Allergies/health issues form (if applicable)

Please print out these forms, fill them out, and send them with your child(ren) on their first day of camp or fax them to 847-362-0815. We will also have forms available at camp if you are unable to print them.

**Attire:** The campers need to wear “play” clothes; t-shirts, shorts, socks and tennis shoes. Please no skirts, sandals, crocs or flip-flops. Dressing appropriately for the camp activities will make your child more comfortable and able to maximize their fun.

**Lunch:** If your child will be attending camp all day, they need to bring a sack lunch or money for the concession stand. Please be aware that we do not have refrigeration available, so pack accordingly. Campers will be able to purchase a meal of pizza or a hot dog with chips and a juice box for \$6.00. (Gatorade can be substituted for an additional \$1.00.) We collect the orders and money at the beginning of each day and keep it in a safe place at the front desk for your camper.

**Phones/Toys:** Please do not bring any cell phones, toys or handheld games to camp. It is very difficult to keep track of these items and we would hate for them to be lost or stolen. If your camper needs to use the phone, they can use the phone at the front desk. If you need to reach your child during camp, you can call the front desk (847-367-1502) and your child can be brought to the phone.

**Water bottles:** We recommend that your child brings a water bottle from home that is clearly labeled with their name.

**Allergies/health issues:** Please let our staff know of any allergies or health problems that may affect your child at camp. Attached is a separate form for you to fill out and bring to the first day of camp if your child has any health issues that we need to be aware of during camp.

During the course of each week at camp, we will be playing many sports and games that reinforce and develop skills that will help your child learn the sport. In addition, we will be using team building activities to help your child work together with others.

If you have any questions or concerns, please do not hesitate to talk to our camp staff or contact me at 847-367-1502 or [bbronstein@libertyville.com](mailto:bbronstein@libertyville.com).

Sincerely,

Beth Bronstein  
Sports and More Supervisor

**Recreation & Sports Complex Department**  
1950 N. Highway 45 Libertyville, IL 60048 (847)367-1502



# Sports and More Camp Contact Information/Waiver



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

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

**Child 1:** Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_\_\_ M/F: \_\_\_\_\_

**Child 2:** Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_\_\_ M/F: \_\_\_\_\_

**Child 3:** Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_\_\_ M/F: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Primary Phone #: \_\_\_\_\_

Secondary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

In an emergency notify: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email address: \_\_\_\_\_

- I hereby certify that the above child(ren) is/are in normal health and capable of participating safely in the Sports and More Camp, has Health Insurance, and the Village of Libertyville and all other participating agencies are not liable for any accidents while participating in the Sports and More Camp.

**Parent initials:** \_\_\_\_\_

- If any participant has any allergies or takes any medications, please fill out a **Medical Information Form** for each participant. **Parent initials:** \_\_\_\_\_

- I give permission for my child(ren) to climb the climbing wall at the Libertyville Sports Complex under the supervision of certified wall staff. **Parent initials:** \_\_\_\_\_

- Each participant is required to fill out the **Participant Liability and Hold Harmless Agreement Form**.

**Additional authorized pick-up names:**

\_\_\_\_\_ Phone #: \_\_\_\_\_

\_\_\_\_\_ Phone #: \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Participant Liability & Hold Harmless Agreement Form**

In consideration of The Village of Libertyville ("the Village") granting the Participant the right and opportunity to participate in the program(s) identified in this Registration Form ("Programs"), and other good and valuable consideration, the sufficiency of which is hereby acknowledged, the Participant, hereby agree as follows:

**Acknowledgement and Assumption of Risk of Injury:** The Participant acknowledges that there is an inherent risk of injury in the Participant's participation in the Programs, and that, specifically and without limitation of the foregoing, the Programs may involve strenuous exertion or bodily contact that are hazardous recreational activities. The Participant acknowledges and agrees that they have sole responsibility, and the Village has no responsibility whatever, to determine whether the Participant is physically fit and otherwise able to participate in the Programs. The Participant agrees to assume the full risk of any injuries, including death, and at all costs, damages, and losses, including medical bills, that the Participant may sustain as a result of participating in the Programs, or as a result of the condition, maintenance, and use of any public property involved in the Programs.

**Waiver and Release of Claims for Injury:** The Participant shall, and does hereby, waive, release, and relinquish all claims of every kind, including claims for personal injuries, known and unknown, present and future that the Participant may have against the Village and its officers, agents, servants, and employees, arising out of, connected with or in any way related to the Programs or the Participant's participation therein, or as a result of the condition, maintenance, and use of any public property involved in the Programs.

**Indemnity:** The Participant shall, and does hereby, indemnify and hold harmless the Village and its officers, agents, servants, attorneys, and employees from and against any and all claims of every kind, including claims for personal injuries, known and unknown, present and future, that the Participant may have arising out of, connected with, or in any way related to the Programs or the Participant's participation therein, or as a result of the condition, maintenance, and use of any public property involved in the Programs.

**Interest:** The Participant acknowledges and agrees that they have no fundamental property or liberty interest in participating in the Programs, and that their participation in the Programs is conditioned upon the Participant's compliance with all Village regulations and instructions concerning the Program. The Participants have read and fully understands this document and executes it of their own free will and without any reservation whatsoever.

Print Name of Participant

Date

Signature of Legal Guardian

Date

Libertyville Recreation & Sports Complex  
1950 N. Highway 45  
Libertyville, IL 60048



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Date

Signature of Legal Guardian

Date

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1950 N. Highway 45  
Libertyville, IL 60048



**Medical Information Form**

**Child # 1**

**Name of Child:** \_\_\_\_\_

**Condition or allergy:** \_\_\_\_\_

**Medical attention required:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Child # 2**

**Name of Child:** \_\_\_\_\_

**Condition or allergy:** \_\_\_\_\_

**Medical attention required:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Child # 3**

**Name of Child:** \_\_\_\_\_

**Condition or allergy:** \_\_\_\_\_

**Medical attention required:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_