



FREE!!
**Summer
 Drama Camp**

**Salute to
 Broadway**

Communities In Schools as Third Party Administrator for The City of Aurora will offer the Summer Drama Camp – ***Salute to Broadway*** for students currently completing this school year in 4th through 12th grade residing in Aurora.

June 3-28, 2019 Monday thru Thursday 12:30 p.m. – 4:00 p.m.

Drama Camp and three performances will be held at:

East Aurora High School
 500 Tomcat Lane, Aurora, IL 60505

Provided in partnership with the City of Aurora, Communities In Schools and East Aurora School District 131

- Open to current 4th – 12th graders in Aurora including School Districts 129, 131, 204, 308 and private schools in Aurora.
- **DO NOT RETURN FORMS TO THE SCHOOL!**
- Please mail or drop off enrollment forms by Friday, May 24, 2019 to:
Communities In Schools
444 W. Galena Blvd., Suite 202
Aurora IL, 60506
- Incomplete forms will not be accepted for enrollment.
- You will be notified by mail of your child's placement.

If you have any questions regarding the *Summer Drama Camp*, please contact Anna Toole with Communities In Schools of Aurora, at 630-640-8462 or email agtoole@cisaurora.org. Please visit our website www.cisaurora.org for more information.

STUDENT INFORMATION

Today's Date:		Student's Grade Level (currently):		Student's School ID #:		Student's State ID #:		
Student's Last Name		First		Middle	School Currently Attending:			
Street Address		City		Zip Code		Student's Birthdate		
				/ /		Age		
						Gender <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Other		
Language spoken in the home:				Free or reduced lunch: Yes No If yes, please circle which one.				
Ethnicity: Check all that apply			<input type="checkbox"/> African American		<input type="checkbox"/> Hispanic/Latino		<input type="checkbox"/> White	
			<input type="checkbox"/> Native American		<input type="checkbox"/> Asian/Pacific			
Mother's Name		Mother's Address if Different from Student's		Mother's Home Phone		Mother's Cell Phone Mother's Work Phone		
Mother's Email Address:								
Father's Name		Father's Address if Different from Student's		Father's Home Phone		Father's Cell Phone Father's Work Phone		
Father's Email Address:								

Other family members enrolling in program: ***Separate enrollment form must be completed for each child enrolling.***

First Name		Last Name		Student's Grade Level (currently):	
First Name		Last Name		Student's Grade Level (currently):	
First Name		Last Name		Student's Grade Level (currently):	

AUTHORIZED PERSONS FOR PICK UP AND EMERGENCIES

I authorize the following individuals to pick-up my child at any time including emergencies when a parent cannot be reached. I know these persons and agree to allow *the Summer Drama Camp* staff to release my child into their care upon providing valid identification for verification purposes. In doing so, I relieve Communities In Schools of Aurora and employees of all responsibilities for my child after he/she has been released from the program. Communities In Schools of Aurora does not have the authority to deny a non-custodial parent his/her rights but does have full authority to regulate how those rights might be exercised when disputes between parents over the physical custody of a child intrude into the summer camp scene. It shall be the policy of Communities In Schools of Aurora to elicit written agreement between separated parents for the purpose of clarifying who may or may not pick up a child from the after school program. If required, a court order will specify which parents may or may not have physical custody.

Name of person picking up	Home Phone Number	Cell Phone Number	Work Phone Number	Relation to Child

STUDENT MEDICAL HISTORY

Are there any special medical needs that your child has that we need to be aware of? YES NO If YES, please describe:

Any allergies? YES NO If YES, allergic to what? _____

Attendance Policy and Dismissal Policy

Only authorized individuals will be able to pick up your child, and they will be required to show identification. **Dismissal begins at 4:00 p.m. and children will not be dismissed from the program prior to 4:00 p.m. each day.** Students enrolled are encouraged to attend all four days of the program each week. We have committed staff assisting students and providing hands-on engaging activities during the camp up to dismissal time. It is important for each student to remain in the program for the full program hours to receive these benefits. Daily attendance is taken when your child comes to the *Drama Camp*. Regular attendance and punctuality are essential.

Please initial and each statement below

Initial	YES	NO	
			I give my permission for my student to be enrolled in the <i>Summer Drama Camp</i> , four days a week until dismissal each day.
			I do hereby give permission for CIS of Aurora staff to transfer my child off the property for the purposes of medical care as deemed appropriate and in the event that I cannot be reached in an EMERGENCY, I hereby give my permission to the physician selected by CIS of Aurora staff, to hospitalize or secure proper treatment.
			I give permission for Communities In Schools of Aurora and those community partners we may authorize to use any of my child's name, photographs, writings, artwork, and to film, and/or videotape and/or performance in any activity as part of the <i>Drama & Drums Summer Camp</i> program for the purpose of promotional, marketing, publicity, or other purpose whatsoever without additional notification or approval by me for program activities (including websites, YouTube, Twitter and Facebook).
			I understand the <i>Summer Drama Camp</i> program is not able to provide one-to-one attended care during the program hours. Participants must be able to operate in a group with at least 8-10 other children and one adult staff member. Please contact Anna Toole if you have questions or concerns.
			I understand the program dismisses starting at 4:00 p.m. each day. I also understand students must remain in the program until the 4:00 p.m. dismissal each day to receive the full benefits of the program from our committed staff and community partners.
			I give my student permission to participate in all activities at the <i>Summer Drama Camp</i> and I agree to further release and hold harmless, Communities In Schools of Aurora and the City of Aurora including and not limited to their directors, officers, employees, partnering agencies in the <i>Summer Drama Camp</i> for liability associated with my child's/ward's participation in the <i>Summer Drama Camp</i> and I agree not to make any claim, suit or demand against the above mentioned agencies/entities for any injury or damage incurred on account of my child's participation camp and related activities.
			I authorize the summer camp program staff (collaborating with CIS of Aurora and community partners) to include my child in the evaluation of the summer camp program. This evaluation includes getting information such as attendance and having my child complete surveys asking about his/her well-being, behavior, and feelings regarding the summer camp.
			<p><i>Summer Drama Camp</i> and Communities In Schools of Aurora will permit the self-administration of inhaler medication by a student with asthma or other illness, if the following documents are provided by the student's parent or guardian. No other medication will be administered during the <i>Summer Drama Camp</i> program.</p> <ol style="list-style-type: none"> 1. Written authorization, signed by the parent or guardian; and 2. A written statement from the student's physician, physician assistant or advanced practice registered nurse, containing the following information: <ol style="list-style-type: none"> A. The name and purpose of the medication; B. The prescribed dosage; and C. The time or times at which or the special circumstances under which the medication is to be administered.
			<p>I understand the program will follow Communities In Schools of Aurora Code of Conduct Policies.</p> <p>The following disciplinary actions will be taken if the participant does not follow the rules of the program:</p> <ul style="list-style-type: none"> ■ 1st Verbal Warning ■ 2nd Written warning/Phone call to parents ■ 3rd Suspension from the program 3 days/with phone call home ■ 4th Student will be out of the program/Parent and Student meeting <p>Note: Depending of the severity of the action (the Program Coordinator will decide the severity of that action), a student can be suspended or discharged from the program immediately. In addition, the Program Coordinator will keep an eye on every participant's behavior, and according to it, he/she will decide if the student will be allowed to participate in certain activities.</p>

SELECTION CRITERIA

- The target population for the program will be for students currently completing this school year in 4th through 12th grade residing in Aurora including Districts 129, 131, 204, 308 and private schools.

I agree to all the above policies, rules and procedures of the *Summer Drama Camp* program. I realize that the *Summer Drama Camp* is a voluntary program and not required.

It is the policy of the Board of Directors for CIS of Aurora to prohibit discrimination against any student or staff on account of race, color, religion, national origin, age, sex, gender, marital status, or physical or mental handicaps.

Printed Name of Parent/Guardian _____

Signature of Parent/Guardian _____

Date _____

This camp is a free camp, however, the total four week program cost for each child is \$278.00 and a monetary donation for each student is appreciated to help pay for camp expenses and field trips when enrollment form is submitted to your child's school office. Checks should be made out to: Communities In Schools of Aurora. Thank you in advance for your generous support!

Waiver and Release of Claims and Assumption of Risk

The undersigned, individually, and/or as parent or guardian of _____, a
(Child's Full Name)
minor, understands that Communities In Schools of Aurora will be conducting a program or
(Name of Organization)

activity on the grounds or in a facility owned by the East Aurora School District 131 (EASD 131) and that EASD 131 does not sponsor such program or activity and is not responsible for the content of the same.

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss against EASD 131 which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program, and I voluntarily agree to assume the full risk of any injuries, damages or loss, including eye glasses and contact lenses, regardless of severity that my minor child/ward or I may sustain as a result of participating in any and all activities connected with or associated with this program/activity and, to the extent permitted by law.

I waive and relinquish all claims, causes of action, expenses and compensation for all known and unknown personal injuries and property damage to me or my minor child/ward (or which may accrue to my child/ward or me) as a result of participating in this program/activity and against the EASD 131 including its officials, agents, volunteers and employees, and I further promise and bind myself, my heirs, administrators and executors, to repay to the EASD 131, its agents, employees, Board members, successors and assigns, any sum of money that it or they may hereafter be compelled to pay on behalf of me or said minor child arising out of or connected to above referenced program/activity.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims.

PLEASE PRINT

Participants

Date

Participants

Date

Parent/Guardian

Date

PARTICIPATION WILL BE DENIED - if the signature of the adult participant or parent/guardian and date are not on the waiver.