



March 2019

To: the Parents or Guardian

Student

Address

School

Grade

Your child is invited to attend *CAMP No Other Person like you!!*

Students will receive additional instruction in Math and Reading due to their performance on standardized tests. Rockford Public Schools and the Rockford Park District are collaborating to offer a fun-filled summer program that gives eligible students an opportunity to improve their Math and Reading skills. Instructors will challenge children with specialized curriculum, students will engage in hands-on, multisensory activities as they explore a variety of digital creations through media arts.

The program will be Monday through Friday starting on June 19, 2019 and ending July 18, 2019. Hours will be from 8:00 a.m. to 1:00 p.m. **CAMP No Other** is closed on July 4<sup>th</sup> & 5<sup>th</sup>. Breakfast and lunch will be provided for students. Bussing will be available to those who qualify. Please fill out the Registration/Transportation form.

Return the forms to your child's school by March 22, 2019. If you do not reply by this date, your child's seat for **CAMP No Other** will be offered to another qualifying student. Please read the enclosed brochure for more details and register your child for CAMP today. If you have any questions, please call your child's school. Confirmation letters will be sent to each parent after registration materials are submitted.

*Dr. Travis Woulfe,*  
Executive Director of Improvement and Innovation

Camp No Other 2019  
June 19, 2019 – July 18, 2019  
**REGISTRATION/TRANSPORTATION FORM**

**Rockford Public Schools will provide Transportation for students who live more than ½ mile from their participating Summer Camp location. PLEASE PRINT LEGIBLY.**

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_ Grade: \_\_\_\_\_  
Current School: \_\_\_\_\_ Zone School: \_\_\_\_\_ Gender: \_\_\_\_\_

**Students (Kindergarten to 7<sup>th</sup> Grade 2017-18):**

Student will  walk home from school  
Student will  be picked up from school by an authorized person.  
Person(s) authorized to pick up student: \_\_\_\_\_

Student will  ride regular bus  AM & PM  AM ONLY  PM ONLY  NOT NEED TRANSPORTATION  
Does the student ride a **SUNRISE bus** during the regular school year?  No  Yes

**IF YOUR HOME ADDRESS IS DIFFERENT FROM THE HOME ADDRESS PREPRINTED BELOW YOU WILL NEED TO COMPLETE A CHANGE OF ADDRESS FORM.**

Pick up Address:

Home:  «Street Addr Line Apt Mailing», «CityStateZip Mailing» \_\_\_\_\_  
Address Phone

Other:  \_\_\_\_\_  
Address Phone

Drop off Address: Home:  «Street Addr Line Apt Mailing», «CityStateZip Mailing» \_\_\_\_\_  
Address Phone

Other:  \_\_\_\_\_  
Address Phone

Please list student's allergies, if any: \_\_\_\_\_

In case of emergency, please contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship with student: \_\_\_\_\_

**Please complete the following information for CAMP No Other  
USE OF STUDENT'S WORK AND IMAGE WAIVER**

My signature below indicates consent for my child's image to be included in web sites, pictures, or videotapes made for or used by Rockford School District #205. These pictures/videotapes may be used in the production of live television shows, films, videotape recordings, still pictures, slide presentations, or other media productions for District #205 broadcast, cablecast, or webcast for promotional purposes, excluding advertising. I acknowledge that I understand that Rockford School District #205 may assign the right of use of these media productions to other not-for-profit entities for such purposes. As parent/guardian, I expressly waive claims for damages, costs, fees or remuneration in any form for such use. I also hold harmless District #205, its employees, agents, or board members for any harm caused by the use of my child's work or image in broadcasts, cablecasts, or webcasts.

\_\_\_\_\_  
**Student's Name**

\_\_\_\_\_  
**Student's Signature**

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

\_\_\_\_\_  
**Name of parent/Guardian (Please Print)**

\_\_\_\_\_  
**Signature of Parent/Guardian**

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

CAMP No Other 2019  
June 19, 2019 – July 18, 2019  
**WAIVER/RELEASE FORMS**

Rockford School District 205 and Rockford Park District

**IMPORTANT INFORMATION**

The Park District and the Rockford Public Schools are committed to conducting its recreation programs and activities in a safe manner and hold the safety of participants in high regard. The Rockford Park District and the Rockford School District continually strive to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs. You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

**2017/2018 RPS205 Student Code of Conduct will be followed during CAMP No Other.**

**WARNING OF RISK**

Recreational activities/programs are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity/program. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slipping, falling, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities/programs exist. In this regard, it must be recognized that it is impossible for the Rockford Park District to guarantee absolute safety.

**WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK**

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 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/vehicle operation, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Rockford Park District and the Rockford School District including its officials, agents, volunteers and employees.

I do hereby fully release and forever discharge the Rockford Park District, Rockford School District, Discovery Center, Burpee Museum of Natural History and Rockford Area Arts Council from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program/activity.

I hereby authorize the Summer CAMP Program to obtain medical treatment for my child in the event that parent(s) and or emergency contact cannot be reached.

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

**Student Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Parent/Guardian Signature**

**Date**