



Be inspired at our . . .

Forest Preserve Day Camps

Welcome to Day Camp!

Get ready for summer adventure like no other! Nowhere else can a girl experience as much fun, challenge, and excitement than at Forest Preserve Day Camp. Forest Preserve Day Camp is open to registered Girl Scouts and girls wishing to become Girl Scouts. Our goal is to provide an atmosphere to create girls of courage, confidence and character who make the world a better place.

Day Camp Dates & Locations

Each week is an adventure of self-discovery, learning new things and making life-long friends. You are invited to participate in the following Forest Preserve Day Camps, planned and staffed by dedicated local Girl Scout volunteers.

Day camp runs Monday through Friday 9:00 A.M. to 3:00 P.M.

June 21—25, 2010

Phillips Park

1000 Ray Moses Dr.
Aurora, IL
\$50/girl or AIT
\$10/AIDE

July 19—23, 2010

Bliss Woods

5S660 Bliss Rd.
Sugar Grove, IL
\$50/girl or AIT
\$10/AIDE

July 5—9, 2010

LeRoy Oakes

37W370 Dean St.
St. Charles, IL
\$50/girl or AIT
\$10/AIDE

July 19—23, 2010

Jon Duerr

35W003 IL Rt. 31
South Elgin, IL
\$50/girl or AIT
\$10/AIDE

Camp fee includes: T-shirt and patch.

Make check payable to Girl Scouts of Northern Illinois—NO REFUNDS

Please note: Due to volunteer resources needed to run each day camp, campers are limited to one Forest Preserve Day Camp per summer.

Financial Assistance: *Financial assistance is available for a portion of the girls' fees.*

To apply for financial assistance call 847-741-5521. A simple form will be mailed to you and must be completed and returned to the Elgin Service Center **no later than May 15 for camps in June or June 1 for camps in July or August.**

Anyone applying for financial assistance must fill out and return the registration form, along with "Cookie Dough" or "IRG Credits" and the amount you will be able to pay to the appropriate camp by June 1, 2010.

Inspire others . . .

Become an adult volunteer!

Adult volunteers are the key to success for each Forest Preserve Day Camp! These Day Camps are directed and led entirely by volunteers. Safety guidelines require a 1:6 ratio of adults to children for the operation of our day camps. Do you enjoy working with children? Are you an organized person? A creative person? A nature lover? If you answered "YES!" to just one of those questions, we have a special place for you at our Forest Preserve Day Camps! Volunteers can volunteer for 1, 2, 3, 4, or all 5 days! Our adult volunteers are the reason we are able to run affordable, fun day camps in the forest preserves.

This is a wonderful opportunity for adults and girls to learn and grow in the outdoors. We invite you to take part in an exciting week of day camp that your entire family will enjoy. All Moms, Dads, Grandparents, Aunts, Uncles and Friends are encouraged to volunteer. All adult volunteers must be 18 years of age and complete a council-approved volunteer application (includes background check and references).

Forest Preserve Day Camp offers Small Fry units (ages 2 - 5) and Big Boy units (ages 6 - 11) to accommodate children of adult volunteers! These are special units that are available for our adult volunteers.

Volunteers who volunteer for 4 - 5 days will have priority registration for their Girl Scout and a buddy and receive a free T-shirt. Please note: Only those who register to volunteer 4 -5 days will have priority for their Girl Scout and a buddy.

Volunteers who register, then withdraw may impact their child's registration as well as the total camp enrollment.

The following positions are available to volunteer (not all positions at all camps)

Unit Leader*—Responsible for planning and leading activities for one group of campers of the same age.

Assistant Unit Leader—Responsible for assisting the unit leader with all unit activities.

AIT (Aide in Training) Unit Leader*—Responsible for preparing campers to become AIDES.

AIT Assistant Unit Leader—Responsible for assisting AIT leaders with all activities.

Small Fry Leaders—Responsible for supervising Small Fry campers, ages 2 - 5.

Big Boy Leaders—Responsible for leading brothers ages 6 - 11 in camp related activities

First-Aider—Requires current First-Aid/CPR certification; responsible for first-aid needs at day/twilight camp.

Equipment Manager—Responsible for maintenance and distribution of day/twilight camp equipment.

Shopper—Responsible for daily shopping for units' needs during week of day/twilight camp.

Floater—Wherever you are needed to help.

**Five day volunteer positions.*

Basic Outdoor Skills

This course will prepare you to teach your girls fire building, outdoor cooking and other outdoor skills, including knots, knife safety, and respecting the environment. You will learn the necessary skills to volunteer at the Forest Preserve Day Camp.

Fee: \$5 for optional cookbook

Date	Time	Location
May 15, 2010	9 A.M.—1 P.M.	Mary Ann Beebe Center Harvard, IL
May 22, 2010	10 A.M.—2 P.M.	Camp Dean Big Rock, IL

Register online at www.girlscoutsni.org under Adult Training for this adult training opportunity.



Registration Closes: June 1, 2010

GIRL and AIT REGISTRATION FORM
(entering grades 1-6)
Please Print

Girl Scouts of Northern Illinois Office Use – Fees	
Cash _____	
Check _____	
"Cookie Dough"/"IRG Credits" _____	
GSUSA Reg. _____	
FA _____	

Please complete and mail to the camp you want to attend

Phillips Park
Attn: Robin Z. Witt
P.O. Box 353
Montgomery, IL
60538-0353

LeRoy Oakes
GS LeRoy Day Camp
P.O. Box 392
LaFox, IL 60147

Jon Duerr
GSNI
Sugar Grove Serv Ctr
200 New Bond St.
Sugar Grove, IL
60554

Bliss Woods
GSNI
Sugar Grove Serv Ctr
200 New Bond St.
Sugar Grove, IL
60554

Girl's Name _____ Grade Fall 2010 _____

Address _____ City, Zip _____

Parent/Guardian Name _____ Home Phone _____

Parent/Guardian E-mail _____ Alternate Phone _____

Number of summers my daughter has attended day camp 0 1 2 3 4 5 6

Registered Girl Scout? Yes, Troop # _____ No (Add \$12 GSUSA registration fee)

Buddy Preference _____ Grade Fall 2010 _____
(List only ONE buddy and mail forms in same envelope; buddies must be entering the same grade level.)

Girl's T-shirt size: **Youth:** [] S [] M [] L **Adult:** [] S [] M [] L [] XL [] XXL

Please check which camp you wish to attend
[] Phillips Park [] LeRoy Oakes [] Jon Duerr [] Bliss Woods

Please make checks payable to:

Girl Scouts of Northern Illinois— NO REFUNDS

Camp Fee	_____
New Girl Scout GSUSA Fee	_____
Total from side two	_____
Total Enclosed	_____

Girl's Medical Information:

_____ is in good physical condition and can take part in usual outdoor activities. Special health considerations (allergies, food allergies, diabetes, physical limitations, dietary restrictions, etc.), include instructions for medication sent to camp with camper:

Print name of parent/guardian _____
I can be reached during camp at: (____) _____ cell or pager (____) _____

Please list two (2) emergency contacts in case you cannot be reached.

Emergency contact #1 name _____ relationship _____ phone (____) _____
Emergency contact #2 name _____ relationship _____ phone (____) _____
Child's physician _____ phone (____) _____

The bearer of this letter has my permission as a parent or legal guardian to act on my behalf in any emergency dealing with the health and welfare of my daughter and to obtain emergency treatment for her by a licensed physician.

[] This girl is not currently registered with Girl Scouts of the USA, and I am willing to have her become a Girl Scout.

(signature of parent/guardian)

(date)



Aide Day Camp Registration Form (Girls entering grades 7-12. Must have attended at least one year of Forest Preserve Camp)

Aide's Name _____ Camp Nickname: _____

Aide's E-mail: _____ Grade Entering 2010: _____

Address: _____ City/Zip: _____

Parent/Guardian Name(s): _____ E-mail: _____

Day Phone: _____ Evening Phone: _____ Cell Phone: _____

Number of years as a Day Camper: _____

Number of years as an Aide: _____ Please list sites and years: _____

Completed AIT (Aide in Training) - **Optional:** If Yes, when & where _____

Completed PACT (Program Aide Core Training) - Date & location of class: _____

Completed Power Aide/PA Outdoor Skills—**Required:** Date & location of class: _____

Yes, I will be taking the class (when & where) _____

I am most comfortable working with:

Small Fry Big Boys GS Daisies GS Brownies GS Juniors Wherever Needed

I am most skilled at: (please check all that apply)

Songs Games Nature Cooking Ceremonies Camp Skills (knives/knots, etc.)

I would like to help at the following day camp: [] Phillips Park [] LeRoy Oakes [] Jon Duerr [] Bliss Woods

A day camp T-shirt will be provided at no charge. Please indicated your size:

Youth: [] S [] M [] L **Adult:** [] S [] M [] L [] XL [] XXL [] XXXL

THERE IS A \$10 FEE FOR AIDES TO ATTEND DAY CAMP. ALL AIDES MUST BE REGISTERED GIRL SCOUTS. IF YOU ARE NOT CURRENTLY REGISTERED, PLEASE INCLUDE AN ADDITIONAL \$12 GSUSA MEMBERSHIP FEE WITH YOUR REGISTRATION.

AIDE FEE = \$10 _____
GSUSA MEMBERSHIP FEE \$12 = _____
TOTAL ENCLOSED = _____

Girl's Medical Information:

_____ is in good physical condition and can take part in usual outdoor activities. Special health considerations (allergies, food allergies, diabetes, physical limitation, dietary restrictions, etc.), include instructions for medication sent to camp with camper: _____

Please list two (2) emergency contacts in case you cannot be reached.

Emergency contact #1 name _____ relationship _____ phone (____) _____

Emergency contact #2 name _____ relationship _____ phone (____) _____

Child's physician _____ phone (____) _____

The bearer of this letter has my permission as a parent or legal guardian to act on my behalf in any emergency dealing with the health and welfare of my daughter and to obtain emergency treatment for her by a licensed physician.

[] This girl is not currently registered with Girl Scouts of the USA, and I am willing to have her become a Girl Scout.

(signature of parent/guardian)

(date)



Adult Volunteer Registration Form

(please complete page 6 and return to camp address on page 3)

Please Print

Name _____ E-mail _____

Address _____ City, Zip _____

Daytime Phone _____ Cell Phone _____ Evening Phone _____

Emergency Contact _____ Phone _____

Daughter's Full Name(s) & Grade Entering 2010 _____

I am a registered leader _____ Yes _____ No Troop _____

If not, please complete the Application for Volunteer Position and CBC Authorization forms located on the Forms page at www.girlscoutsni.org under Volunteer Forms.

I would like to volunteer as:

- Unit Leader—Grade _____* Unit Assistant—Grade _____ Equipment Manager
- AIT (Aide in Training) Unit Leader* AIT Assistant First Aider
- Shopper Big Boy Leader Small Fry Leader
- Floater—Wherever needed *Five day volunteer position

I would like to work with my daughter's unit. Yes No

I can work the following days: Monday Tuesday Wednesday Thursday Friday

I will be at the following Day Camp:

- Phillips Park, June 21-25 Jon Duerr, July 19-23
- Bliss Woods, July 19-23 LeRoy Oakes, July 5-9

I will be bringing the following Small Fry/Big Boy campers (Small Fry/Big Boy campers MUST be pre-registered)

Name _____ Age _____ M / F Optional T-shirt \$5 Youth size S M L

Name _____ Age _____ M / F Optional T-shirt \$5 Youth size S M L

Name _____ Age _____ M / F Optional T-shirt \$5 Youth size S M L

Please indicate the size of your FREE T-shirt if you are volunteering 4 or more days:

Adult: [] S [] M [] L [] XL [] XXL [] XXXL

Size	Cost	Add \$1 for XXL Add \$2 for XXXL	Quantity	Subtotal
	\$5	\$		\$
	\$5	\$		\$
			Total Enclosed	\$



Girl Scouts®

Adult Day Camp Medical Information

Please print

Name: _____ Phone: _____

Address: _____ City, Zip: _____

Emergency Contact: _____ Phone: _____

Physician: _____ Phone: _____

Special health considerations (allergies, diabetes, dietary restrictions, physical limitations, etc.): _____

Please list any medications we should be aware of: _____

_____ (signature) _____ (date)



Small Fry/Big Boy Medical Information

(One form per child, please make additional copies if needed)

Child's Name: _____ Small Fry Big Boy Age _____

Emergency Contact: _____ Phone: _____

Physician: _____ Phone: _____

Special health considerations (allergies, food allergies, diabetes, physical limitations, etc.): _____

Please list any medications we should be aware of: _____

If medications are to be taken at camp, they must be in the original container with child's name and dosage instructions. _____

Special dietary needs (list all that may affect day camp food planning and preparation, i.e. kosher, vegetarian): _____

For Small Fry only—is your child potty-trained? Yes No

Please share any information that will help ensure a safe and comfortable day camp experience: _____

The bearer of this letter has my permission as a parent or legal guardian to act on my behalf in any emergency dealing with the health and welfare of my child and to obtain emergency treatment for my child by a licensed physician.

_____ (signature of parent/guardian) _____ (date)