

PICKUP/DROP OFF POLICY

All children may be dropped off up to 45 minutes prior to the start of camp and must be picked up no later than 30 minutes following the end of camp. Each camper must be signed in and out daily. If someone other than the parent or guardian will be picking up the child, a note must be provided to this affect. Children who are able to drive themselves may do so, but staff must receive a note from parents stating that this will occur.

RELEASE

I authorize Arts Connection of Central Illinois to contact the people named prior and authorize the named physician to render treatment to my child as deemed necessary in an emergency, if I am unable to be reached. In the event parents, physician or other emergency contacts cannot be reached, Arts Connection of Illinois staff are authorized to take whatever actions deemed necessary.

My child is medically cleared to participate in The EPC Summer Youth Theatre Camp and to participate in all the activities within the camp while he/she is enrolled in the camp.

Photographs, audio and video of my child may be used in promotional materials including in advertisements and on social media.

I agree to assume and accept all of the risks and responsibilities in any way associated with the activities engaged in by my child as part of The EPC Summer Youth Theatre Camp, and hereby release Arts Connection of Central Illinois from any and all liability, claims and actions that may arise from injury or harm to my child or from damage to property in connection with such activities.

I also understand that no refund will be issued, if my child fails to abide by The EPC discipline code:

- 1) Commitment to learning – Do one's best and not interfere with the learning of others.
- 2) Consideration – Always be polite and considerate of others.
- 3) Respect – Respect both campers and The EPC's property.
- 4) Honesty – Tell the truth always.

Parent Signature

Date

VOLUNTEER OPPORTUNITIES

We are always looking for volunteers to assist our camp teachers. If any parent or grandparent is willing to volunteer time, please provide contact information below and a camp teacher will be in touch.

PAYMENT

All payments must be received 14 days prior to the start of camp Amount Due \$ _____

Check enclosed, payable to ACCI

Credit Card

MC

Visa

Discover

Acct # _____ **Expiration Date** _____ **Sec Code** _____

Signature _____

Mail Form to: EPC 1325 Outer Belt West Effingham, IL. 62401 **Email to:** jbunton@theepc.org

FOR OFFICE USE ONLY

Date received: _____ Amount Paid: _____ Check # _____

Name on Check: _____ Account # _____