



PLEX Kids Summer Camp

General Info

Camper's Name: _____ Nickname: _____

Age: _____ Birthdate: _____ Sex: _____ Shoe Size: _____

Grade (As of Fall 2025): _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian: _____

Home: (____) _____-

Work: (____) _____-

Cell: (____) _____-

Email*: _____

Parent/Guardian: _____

Home: (____) _____-

Work: (____) _____-

Cell: (____) _____-

Email*: _____

***Required* Important camp information is sent via email**

Authorized Pick Up

Name: _____ Relationship to camper: _____ Phone: _____

Name: _____ Relationship to camper: _____ Phone: _____

Name: _____ Relationship to camper: _____ Phone: _____

Name: _____ Relationship to camper: _____ Phone: _____

Name: _____ Relationship to camper: _____ Phone: _____

Emergency Contacts

If an emergency occurs and neither parent or guardians can be reached, please contact:

1. Name: _____ Phone Number: _____

Relationship to Child: _____

2. Name: _____ Phone Number: _____

Relationship to Child: _____

How did you hear about P.L.E.X. Kids Camp? ☐ online search ☐ social media ☐ mailer ☐ friend
☐ flyer ☐ other _____

Health Report and History

List all known medical conditions including food allergies: _____

List any over the counter, or prescription drugs taken regularly: _____

Will any of the above listed medicines need to be administered during camp hours? ☐ YES* ☐ NO

**Any prescriptions that are required to be administered during camp hours will need to be listed on the medicine authorization form.*

Check any or all that may apply:

Does your child have an Individual Education Plan (IEP)? ☐ YES* ☐ NO

Does your child have a Behavior Management Plan? ☐ YES* ☐ NO

Does your child have a 504 Student Accommodation Form? ☐ YES* ☐ NO

**A copy of a current IEP/BMP/504 Student Accommodation Plan must be turned in with the registration packet.*

Although every effort is made to provide reasonable accommodations, there may be instances where a child's needs may exceed the parameters of the scope of our program.

Has your child been diagnosed with the following: ☐ ADD ☐ ADHD ☐ DD ☐ ID ☐ ED ☐ ODD
☐ OCD ☐ Autism ☐ Aspergers ☐ Cerebral Palsy ☐ Down Syndrome ☐

Chronic Health Condition ☐ Other ☐

Immunization Record

I/We certify that our child has received and is current on their immunization. ☐ YES ☐ NO

AUTHORIZATION My child has permission to engage in all prescribed camp activities except as noted. The information provided on this form is accurate to the best of my knowledge. I have indicated any special health conditions, including required medication and activity limitations which should be known to the camp staff and medical personnel. I am aware of and accept the risk inherent in the program activity. I give consent in advance for medical treatment at an appropriate facility in case of illness or injury. I certify that all the information provided is complete & correct to the best of my knowledge and recognize failure to disclose, falsification or deliberate omission of my information will result in termination of services.

Signature of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

Other Notes:

PLEX Kids Summer Camp

Camper's Name: _____

Birthdate: _____

Tuition Terms

- Deposits are NON-Refundable- 1 week notice required for camp cancellations- 50% credit issued for less than 1 week notice
- Remaining camp balance must be paid the Monday prior to the first day of the camp start date. Payment plans must be set up for an automatic withdrawal. NSF charges will result in a \$25 service fee. Any registrations with remaining balances on Wednesday prior to the first day of the camp start date will result in forfeiting the spot to the waiting list.
- Late pick up & late registration fees (\$10 extra after Tuesday for the following week) are outlined in the family handbook
- I understand I am financially responsible for PLEX Kids Summer Camp services.
- I understand all camp fees will be paid in full by close of business day Monday, prior to attending camp. I understand if the balance is not paid in full by the Wednesday prior to the start of camp, the Metro Rec Plex reserves the right to discontinue service and place another camper off the waiting list in my child's spot.

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____

Please read the following information and sign:

- I understand when my child is ill he/she will not be accepted into camp.
- If my child is experiencing problems or illness in the program, I may be required to retrieve my child early from camp. Pick up must be within one hour of call.
- I understand my child will not be released to any person(s) not listed on the camp enrollment form.
- I understand my child will not be released to any person(s) who seem to be under the influence of drugs or alcohol.
- Should my child be suspended or dismissed from camp due to behavioral issues, I understand the Metro Rec Plex will not prorate the weekly camp balance and I will be responsible for the full amount due.
- I understand the Metro Rec Plex Behavior Management Guidelines will be followed and enforced.
- The Metro Rec Plex reserves the right to terminate services if it is determined that the placement is unsatisfactory.
- I have read, understand and agree to abide by all the policies, procedures, fee requirements as outlined in the family handbook.
- I/We have been notified and agree that we are notified that:
 - All employees and volunteers must have background checks before being left alone and unsupervised with children. The background check consists of three (3) elements: A CANTS (Child Abuse and Neglect Tracking System) check, A check of the Illinois and/or National Sex Offender Registries (SOR), and A criminal background check (done through fingerprinting).
 - Firearms are not permitted in the PLEX Kids program
 - PLEX Kids is not licensed by the State of Illinois and meets the criteria for the exemption that it claims. We certify that our facility or program is exempt from licensure & has attained exemption verification from the Illinois Department of Children and Family Services. Our exemption status is renewed every two years. Our program receives an annual monitoring visit by a Children's Home & Aid – Health and Safety Coach.

Parent/Guardian Signature: _____

Printed Name: _____

Waiver and Release of All Claims

As a participant in the above noted activity; you acknowledge the use of the Metro Rec Plex facilities, equipment, merchandise, services, and programs (including personal training) involves the inherent risk of personal injury to yourself, guests and invitees. You voluntarily agree to assume all risks of personal injury to yourself, spouse, partner, children, unborn children, other family members, guests and invitees while using the Metro Rec Plex, its equipment, supplies, supervised or unsupervised programs in exercise rooms, on running track, in swimming pools, gymnasium, ice rinks, locker rooms, showers, dressing rooms, grounds and parking lots and waive any and all claims or actions that you may have against the Metro Rec Plex, any of our officers, directors, employees, agents or successors. The provisions of this section shall survive the expiration of the program. I hereby certify that the named participant is in good physical condition and able to safely participate in a program of this type.

Release: I grant permission to the McKendree Metro Rec Plex and its representatives to take photography and video and publish my likeness or my child's likeness with or without my name in print and electronic media outlets without limitation and without any form of compensation for the lawful purposes of publicity, advertising and website content. I release the McKendree Metro Rec Plex and its representatives from all claims and demands arising out of or in connection with the use of my likeness or my child's likeness.

Signature of Parent/Guardian: _____ **Date:** _____

Printed Name: _____ **Relationship:** _____

2025 Traditional Themes

Field Trips & Special Guests Finalized by 5/20

Aloha Summer - May 28 (No Camp Monday/Tuesday) - Campers will dive into tropical fun!

Art Camp: June 2 - Discover clay, collage, drawing, painting, and dramatic arts! Bring a white article of clothing to tie dye!

Secret Spy Camp: June 9 - Somewhere deep inside an empty ice arena, an elite group of spy camp recruits prepares to take on top secret missions! Special guest escape room set ups for every age group!

S.T.E.A.M. Camp: June 16 - This S.T.E.A.M. camp will focus on building simple machines and use the scientific method as they explore classic experiments with a messy twist!

All About Animals: June 23 - Calling all creature lovers! Explore fan favorite animals, add science exploration & hands on fun!

My Town: June 30 - 3 (No Camp - Friday) - We will learn about our neighborhood, fire safety from a fire fighter, and play yard games!

Air & Space Camp: July 7 - Campers will learn about outer space, rockets and air travel!

Circus O Plex: July 15 - Lions, Tigers, & Bears OH MY! Magic & more for this NEW theme!

Shark Week!: July 21 - Come for a JAW-some time and dive deep with us as we explore shark facts, marine life and ocean antics!

Shipwrecked: July 28 - Get ready to get messy, do obstacle courses, and be challenged!

Best of the PLEX: August 4 - Campers choose what weeks/activities & themes were the best!

Premium Themes

Swim Camp

Swimmers will swim with university level athletes, experience an abbreviated version of PLEX Swim and play cool water games EVERYDAY!

Skate Camp

Skaters will ice skate with university level athletes, learn to skate an abbreviated version of PLEX Skate & play games EVERYDAY!

STEM Partner: Sylvan Learning Center

Sylvan is the largest provider of STEM programs in North America. We're on a mission to engage kids in fun STEM programs today, so they become our leaders of tomorrow.

STEM Partner: Metro East Bricks

Campers utilize Robotics using WeDo LEGO® Education, additional LEGO® Education resources, Stop Motion Animation using LEGO® Bricks, Digital Comic Book Creations, and additional STEM based resources.

Premium Skate Camp

Premium Skate Camp: Camps will have 2 hours on the ice in the morning from 9AM-11AM and there is a TBD schedule for afternoon skating time. There is a plethora of other activities and crafts throughout the day!

PLEX Kids Summer Camp

Camper's Name: _____

Age: _____ Birthdate: _____ Sex: _____

Person Responsible for Billing: _____ Member: Yes No

Today's Date: _____

Early Registration Discounts

Discounts do not apply to Plex Plus Time or deposits

☐ Members only through 2/01 ☐ \$5/week- before 3/01

Please note that only one camp can be chosen per week per camper.

MEMBER PRICING LISTED BELOW: NON MEMBER PRICE +\$50/WEEK

Part Time Camp is a member only program

Please take a picture or make a copy of this page for your records

~\$10 late registration fees will apply the Tuesday before~

Dates	Traditional Camp- Full Time NON MEMBER PRICE +\$50/WEEK 9 am – 4 pm School Age for ages 5-14 Pre K for ages 3 – 5 NO CAMP 5/26, 5/27 & 7/4			Traditional Camp- Part Time Members Only 9 am – 4 pm School Age for ages 5-14 Pre K for ages 3 – 5			Premium Camp NON MEMBER +\$50/WEEK Full Time Only Ages 8 – 14 9 am – 4 pm	Premium Hockey Camp 9AM-4PM 2hrs. Ice Time from 9AM-11AM
	PLEX Traditional Themes	School Age	Pre K	School Age	Pre K	What days? Monday + 2 days Preferred	PLEX Premium Themes	Prices for Members & Non members
May 28- May 30	W1: Aloha (T-F)	<input type="checkbox"/> \$180	<input type="checkbox"/> \$185	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	T W Th F	N/A	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
June 2- 6	W2: Art Camp	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	<input type="checkbox"/> W2:	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
June 9-13	W3: Secret Spy	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	<input type="checkbox"/> W3: TBD	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
June 16- 20	W4: S.T.E.A.M.	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	<input type="checkbox"/> W4: TBD	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
June 23 – 27	W5: Animal Camp	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	<input type="checkbox"/> W5: Adventure	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
June 30 - July 3	W6: My Town (M-TH)	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th	N/A	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
July 7 – 11	W7: Air & Space	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	<input type="checkbox"/> W7:	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
July 14 – 18	W8: Circus Camp	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	<input type="checkbox"/> W8: TBD	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
July 21 – 25	W9: Shark Week	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	<input type="checkbox"/> W9: TBD	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
July 28 – Aug 1	WX: Shipwrecked	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	<input type="checkbox"/> WX: Survivor: Rink of Challenge	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365
Aug 4 – Aug 8	WXI: PLEX Best	<input type="checkbox"/> \$215	<input type="checkbox"/> \$220	<input type="checkbox"/> \$165	<input type="checkbox"/> \$170	M T W Th F	N/A	<input type="checkbox"/> \$315 <input type="checkbox"/> \$365

PLEX Plus Time 7AM-9AM & 4PM-6PM - Please Highlight or circle which week you need PLEX Plus Time

Weekly Themes	W2: Art	W3: Spy	W4: S.T.E.A.M.	W5: Animal	W7: Air/Space	W8: Circus	W9: Shark	WX: Shipwrecked	WXI: PLEX
\$50 (4-5 days)	\$50.00	\$50.00	\$50.00	\$50.00	\$50.00	\$50.00	\$50.00	\$50.00	\$50.00
\$40 (1-3 days)	\$40.00	\$40.00	\$40.00	\$40.00	\$40.00	\$40.00	\$40.00	\$40.00	\$40.00

Payment Plan Options

☐ pay in full ☐ weekly auto draft (total - \$25 deposit drafted Monday BEFORE - ex. Wk 1 tuition is drafted 5/20)

_____ weeks of camp x \$25 = _____ minimum payment due today



PLEX Kids Summer Camp

Payment Schedule Information

Camper's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Do you have an active online account with MetroRecPlex through Club Automation? _____

What email address is listed on your account? _____

Deposits must be paid upon registration in order to set up a payment plan for multiple weeks of camps. Please see complete cancelation/transfer policy. Deposits are NON-Refundable
Remaining camp tuition must be paid the Monday prior to the first day of the camp start date. Payment plans must be set up for an automatic withdrawal. NSF charges will result in a \$25 service fee. Any registrations with remaining balances on Wednesday prior to the first day of the camp start date will result in forfeiting the spot to the waiting list.

I _____ authorize McKendree Metro Rec Plex to charge my credit card

(full name)

account indicated above for _____ on or after _____. This payment is for
(total due today) (today's date)

PLEX Kids Summer Camp . I understand the remaining balance is due by the Monday prior to the first day of camp
(description of goods/services)

and will be set up for automatic withdrawal.

Account Type: Visa MasterCard Discover ACH (attach voided check)

Card on file last four # _ _ _ _

Cardholder Name _____

Account Number _____

Expiration Date _____

Security Code _____

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

After account is set up, MMRP Staff destroy the payment information listed above.

SIGNATURE _____

DATE _____

I authorize McKendree Metro Rec Plex to charge the credit card/ACH indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

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CHANGE/ADD FORM

Deposits are **NON-REFUNDABLE**

Please note that changes/transfers cannot be made after Sunday the week before.
Withdrawal must be received 1 week prior to camp starting to receive a refund/credit minus the deposit
50% *credit* will be issued for less than one week notice.

Child's Name: _____ Today's Date _____

ADD:

Name of camp to add: _____ Date of camp to be added _____ Plex Plus Time: AM PM

_____ I understand that there is a **\$25.00** deposit due **today** for the camp added.
(Parent/Guardian Initials)

CHANGE/TRANSFER:

Name of camp to transfer from: _____ Date of Camp _____ Plex Plus Time: AM PM

Name of camp to transfer to: _____ Date of Camp _____ Plex Plus Time: AM PM

_____ I understand that the **\$25.00** deposit is non-refundable.
(Parent/Guardian Initials)

CANCEL/DROP:

Name of camp to cancel: _____ Date of Camp _____ Plex Plus Time: AM PM

_____ I understand that the **\$25.00** deposit is non-refundable.
(Parent/Guardian Initials)

The reason for the cancellation:

- ☐ Vacation/Off Work
- ☐ Relatives are in town to watch my child
- ☐ Illness/medical reasons
- ☐ Other: please explain below _____

PAYMENT PLANS:

I am requesting that Metro Rec Plex:

- ☐ Cancel the registration and the automatic payment draft for the date listed above.
- ☐ Change the registration and the automatic payment draft to the request change date of camp
- ☐ Request a refund
For: _____

Parent Name: _____ Signature: _____

PLEX Kids Summer Camp

Child Care Medication Authorization Form

Name of Child: _____ D.O.B.: _____ Today's Date: _____

Name of Medication: _____

Reason for Medication: _____

Dose: _____ Time/Frequency: _____

Route: Oral Topical Inhaled Injection Other

Date to Start: _____ Date to stop: _____ Expiration: _____

Additional Instructions/Comments: _____

Known side effects: _____

FOR PRESCRIPTION MEDICATION

Prescribing Health Care Provider: _____

Phone Number: _____

FOR CONTROLLED SUBSTANCES

Amount of Medication Received: _____

Staff Member Signature: _____

Staff Member Signature: _____

I authorize (*child care center*) _____ personnel to administer the medication named above to my child in the manner as stated. I release any liability in relation to the administration of this medication. I also acknowledge that I, the parent/guardian, have given the first dose of this medication without any allergic or unexpected reactions.

Parent/guardian printed name: _____ Date Signed: _____

Parent/guardian signature: _____

RETURN OR DISPOSAL OF MEDICATION

Return Date: _____ Parent Signature: _____

Disposal Date: _____ Staff Signature: _____

Witness to Disposal: _____



7 Rights MUST be performed with EVERY dose! Right **child**, Right **medication**, Right **dose**, Right **route**, Right **time**, Right **reason**, Right **documentation**

[illegible]

When medication has been discontinued, it should be returned to the parents or disposed of properly.



PLEX Kids Summer Camp

Hello PLEX Kids Families!

We're thrilled to introduce Brightwheel as your all-in-one camp communication platform.

To stay connected with your camper, we highly recommend adding your phone number to your Profile for text alerts. It is highly reviewed, secure, and commended for its ease-of-use. We're excited for you to see what it's all about! Please add any medical information, allergies or important needs in your camper's profile!

We also have a helpful course available to guide you in using brightwheel. Simply follow this link:
<https://academy.mybrightwheel.com/training/848381f8-15b9-11ee-8c95-0269bab6fdb9/overview>

Click "Get Started" and complete the registration details to create your PLEX Kids account. If you log in to brightwheel with an email, please use the same email to access the PLEX Kids Brightwheel platform. If you already have a brightwheel account, it will automatically link to our program when you click the invite link.

Brightwheel users will have different permissions levels within their accounts based on their relationship with students. The four different contact types that can be set by a program administrator for a student are **Parent, Family, Approved Pickup, and Emergency Contact**.

Your unique 4 digit PIN will need to be known for drop off & pick up from the PLEX Kids Camp. Here's an article on how to locate & change your PIN: <https://help.mybrightwheel.com/en/articles/942420-locate-and-edit-check-in-code>

The [signup process](#) is the same for all contact types. It is often easier to wait to be invited to join brightwheel by a school or parent contact. Student contacts can be invited and sign up with their email address or phone number!

The individuals designated as Parents on the student contacts are granted the most access to the student's account and can get started on brightwheel by [signing up here](#) or by following the instructions outlined in their [invitation email](#). If a parent account was created prior to being invited by the school, the school can provide a [10-digit code](#) that is unique to each student. Parent permissions include the ability to send and receive messages, check their children in and out for the day, see their child's profile and daily feed, [add family & pickups](#), and message Team Leads directly. McKendree Metro Rec Plex does not use Brightwheel for tuition billing.

Full Help Article Here: <https://help.mybrightwheel.com/en/articles/2165917-overview-using-brightwheel-as-a-parent-family-or-approved-pickup>

You can sign in to brightwheel on both a web browser and via their mobile app.

You can download their mobile app in the [Apple](#) and [Google Play](#) app stores.