

T: (847) 676-0078 • F: (847) 676-0574

www.responsecenter.org

Dear North Shore Operation Snowball Participant:

We are excited to hear that you will be with us at Camp Chi's Perlstein Resort and Conference Center in Lake Delton, Wisconsin on March 23rdth-25th, 2018! Snowball is a 3-day trip that is planned and led by teens that will give you the chance to connect with students from all over the Chicagoland area. With support from Response staff, our Teen Leaders facilitate a weekend full of fun activities and interactive workshops on topics that are important to you, including diversity, leadership, healthy relationships and social justice. To register, please complete all of the included forms and mail, fax, or drop them off at Response (address listed above) once **completed and signed by you and a parent or legal guardian**.

Please take some time to look these over and fill them out completely. All forms and the registration fee of \$200 (some complete and partial scholarships are available—see payment page for info) must be submitted by **Friday, March 2nd**. However, registration will continue past that date until all spots are filled. If all spots are filled, there will be a waiting list. **No one may attend the Operation Snowball weekend without returning these forms.** If you have any further questions, please contact Snowball Adult Directors: Kelly Grover at 773-516-5510, or Ellie Molise at 773-516-5517 regarding scholarships/financial questions.

Participants will choose one of the following locations for pickup/drop-off by charter buses:

- 1. Response:3033 W Touhy, Chicago IL (Pickup 7:30am Friday March 23rd; Drop-off 4:30pm Sunday March 25th)
- 2. Highland Park High School: 433 Vine Avenue, Highland Park, IL (Pickup 8:00am Friday March 23rd; Drop-off 4:00pm March 25th)

In addition, make sure to have a parent/guardian notify your school of your absence on Friday 3/23 so you are excused.

The following checklist will help you prepare for the weekend:

You will need to bring:
Clothing and shoes that are appropriate for the weather (boots, coats, layers—it may be cold!)
Soap/shampoo, etc.
Toiletries
Ear Plugs (for sleeping)
Any prescribed medication (must be in original container and turned in to medical staff upon arrival)
You may also bring:
Poetry/special readings
Musical instruments

*Pillows, sheets, blankets, and towels are provided by Perlstein Resort and Conference Center for all participants.

Snowball is not responsible for items lost during the weekend! Please do not bring valuable belongings. Snowball is a gadget free weekend. The use of cell phones and other electronic devices is limited to designated times.

PLEASE DETACH THIS PAGE AND KEEP FOR YOUR REFERENCE



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NORTH SHORE OPERATION SNOWBALL: PARENTAL PERMISSION AND WAIVER FORM

has my permission to take part in North Shore Operation Snowball
at Camp Chi's Perlstein Resort and Conference Center in Lake Delton, Wisconsin on March 23 rd -25 th , 2018. The participant will be traveling by bus to Perlstein on Friday, March 23rd and will be returning Sunday, March 25 th .
PLEASE CHECK THE BOX NEXT TO ONE OF THE FOLLOWING PICKUP/DROPOFF OPTIONS:
Response Center: 3033 W Touhy, Chicago IL 60645 Arrive at Response by 7:30 am on Friday March 23 rd Return to Response at 4:30 pm on Sunday March 25 th
OR
Highland Park High School: 433 Vine Avenue, Highland Park, IL 60035 Arrive at HPHS by 8:00 am on Friday March 23 rd Return to HPHS at 4:00 pm on Sunday March 25 th
North Shore Operation Snowball cannot assume responsibility for the safety and welfare of participants beyond reasonable provisions for their supervision by members of our staff.
Your signature below constitutes and is evidence of your agreement: (1) To assume general liability for the participation of your child in this program, and (2) to indemnify, hold harmless, and release North Shore Operation Snowball staff from any and all claims, suits, causes of action (including any made or brought by your child) or liability arising directly or indirectly from your child's participation in the activity named above, including reimbursement of reasonable attorney's fees incurred with the same.
Parent's/Guardian's Signature Date



CONSENT TO PHOTOGRAPH, AUDIOTAPE, AND VIDEOTAPE

I/we,		authorize personnel of Response to photograph,
	Guardian name)	
and the second of the second o		pall Participant name)
		eotapes are the property of Response and that Response tapes, and videotapes solely for the purpose of marketing
I/we understand that I/we hav taken in reliance on it) at any It has been explained to me/us	e the right to revoke the time by giving written is that a refusal to conse of photographs, videota	aphs, audiotapes, or videotapes upon request. is consent (except to the extent that action has already been notice to Response. ent will not affect my/our teen participating in Snowball. pes, and audiotapes are subject to Federal and State
(Signature of Parent/Guardian	(Date)	
(Signature of Snowball Partic	ipant) (Date)	
By checking this box I a	am refusing to consent only to pictures taken b	nd videotape please check the below box and sign above. to photograph, audiotape, and videotape. by Response staff; we cannot guarantee that participants one another.



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DEMOGRAPHICS QUESTIONNAIRE

(Please provide information for your primary household if you have more than one)

1.	PARTICIPANT NAME:
2.	CELL PHONE NUMBER:
3.	NAME OF SCHOOL PARTICIPANT CURRENTLY ATTENDS:
4.	PRIMARY LANGUAGE:
5.	Sexual Orientation:
6.	ETHINIC ORIGIN:
7.	FAMILY RELIGION:
8.	PARENT(S)/GUARDIAN(S) NAME:
	
9.	PARENT(S)/GUARDIAN(S) PHONE:
10.	# OF MEMBERS IN HOUSEHOLD:
11.	ANNUAL HOUSEHOLD INCOME:





NORTH SHORE OPERATION SNOWBALL MEDICAL INFORMATION FORM (CONFIDENTIAL)

Participant Name		Age	Gender
Address	City		Zip
Phone	Birth Date _		
Participant Email			
Height	Weight		
Parent/Guardian(s) Name(s)			
Address (if different)	City		Zip
Home phone	Work phone		
Other than parent/guardian, indic	eate an individual to conta	ct in case of en	nergency:
Name/Relationship to Teen	1	Phone	
Family Physician	P	hone	
Address	City		
Is the participant a ward of DCFS?	No Yes		
Has your child had a physical exam	in the last year?		
If so, by whom?			
Is there anything in your child's med alcohol/drug addiction, diabetes):	lical history that we should	be aware of (in	cluding asthma, epilepsy,
Are your child's immunizations up t	o date?		

Does your child have	e any physical limitations?	If so, please explain:	
Does your child have	e any special dietary needs	s (i.e., vegetarian, food allergi	ies)? If so, please describe:
(Please note: All food	d provided by Perlstein R	esort & Conference Center is	kosher under the supervision of the
	health issues that your chepression, self-harm, eatin		present, that our staff should be
Does your child have	e any allergies? If yes, ple	ase list and indicate reaction:	:
Is your child allergic	to any medications? If ye	es, indicate which medication	n(s):
	y taking any prescribed m	nedications? If so, please indi	icate type of medication, reason for
Medication:	Reason:	Dosage:	When taken:
TURNED IN TO A R	ESPONSE EMPLOYEE A	AT REGISTRATION ON FRI	PRIGINAL CONTAINERS AND IDAY MORNING, MARCH 23rd. EEKEND AND PASS IT TO YOUR
If there are any non-pyour child, please lis	t them here:	e.g., Advil, cold medicines, e	etc.) that we MAY NOT dispense to
			to the best of my knowledge.
		D ur community, supported by Je	Date: wish United Fund/Jewish Federation.



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MEDICAL RELEASE

Please provide the following information or attach a copy of your medical insurance card.
Insurance carrier:
ID/Policy #:
Plan/Group # (if applicable):
Effective Date of Policy:
Subscriber Name:
In the event of an emergency I will release any information requested of me regarding to the Adult Directors of North Shore Operation (Print participant's name) Snowball, and in so doing, I also give my permission to seek medical aid. I will cover any financial responsibilities incurred. I will not hold the staff of Camp Chi's Perlstein Resort and Conference Center or the staff of the 2018 North Shore Operation Snowball liable for any injury or damage except in case of proven negligence.
Signed Date (Signature of parent/guardian)
(Signature of parcin/guartian)



Paying for Snowball

Each Snowball 2018 participant is expected to make a **payment of \$200**, which covers the following weekend expenses:

- o 3 meals per day + snacks
- o Lodging
- o Transportation to and from Snowball on charter buses
- o Camp activity materials
- o Snowball T-Shirt
- o Professional support staff (medical staff, social worker, adult leaders)

Please fill out this form and attach payment of \$200 by cash or check, or provide credit card information

(See below for scholarship information)

Name of Participant:			
Parent/Guardian Name:			
Parent/Guardian Phone Number:			
I am paying with (please indicate one): Cash Credit Card (MasterCard or Visa only)	Check (made out to Response)		
Credit Card Information (if selected):	Name on card		
	Card Number		
	Expiration Date:		
·	nation to the Snowball scholarship fund to help ensure every teen can a separate check with the donation amount made out to Response.		

If you are unable to afford the full \$200 fee:

Instead of filling out this page, please download and fill out the scholarship application located on the Snowball homepage, and submit that application along with your registration packet: visit www.responsecenter.org and click "Snowball." You will be notified about the status of your request within one week of returning your forms.

Questions or concerns? Please call Kelly Grover (773-516-5510)



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NORTH SHORE OPERATION SNOWBALL RULES AND GUIDELINES FOR THE 2018 WEEKEND RETREAT

- 1. Smoking and the use of alcohol or any other drugs, including e-cigarettes, are PROHIBITED at Snowball.
- 2. All prescription and non-prescription medications must be turned in to the Snowball Medical Provider at registration. They will be administered as indicated. <u>ALL MEDICATIONS MUST BE BROUGHT IN THEIR</u> ORIGINAL CONTAINERS!
- 3. Fireworks and weapons are not allowed at Snowball.
- 4. No pets are allowed at Snowball.
- 5. No televisions, laptops, gaming devices, etc. are permitted at the Snowball weekend. Cell phones/other electronic devices are allowed only during permitted times.
- 6. Sexual activity is not allowed at Snowball.
- 7. Participants will not be permitted to leave Camp Chi's Perlstein Resort and Conference Center or have guests up to camp to visit. In case of an emergency, any visitors to the Snowball site must register with one of the Snowball Adult Directors.
- 8. Housing is split into male identified housing, female identified housing, and gender neutral housing. Participants are not permitted in sleeping quarters besides their own room, and must always have an adult present. Please contact Ellie at 773-516-5517 for information on gender neutral housing options.
- 9. Snowball will not be responsible for personal items lost or stolen. For this reason, it is strongly advised that you do not bring money and leave your valuables at home.
- 10. Participants will be expected to respectfully participate in ALL scheduled Snowball activities. Each participant's respective small group ADULT leaders must authorize non-participation in these activities. Small group Adult leaders also have the authority to remove non-respectful participants from activities.
- 11. Participants should notify their group leader, the medical staff, or the Adult Directors immediately in the event of any serious illness or injury. The participant's parent(s)/guardian(s) will be notified at once by the Snowball medical staff in the event of serious illness or injury.
- 12. Participants will be expected to adhere to ALL Camp Chi's Perlstein Resort and Conference Center and Snowball safety regulations.

Any infraction of these guidelines could result in a participant's parent(s)/guardian(s) being called or the participant being sent home, in which case <u>I understand I am responsible for picking up my participant from Camp Chi's Perlstein</u>

Percent and Conference Center in Lake Polton Wisconsin

Resort and Comerence Center in Lake	Deiton, wisco	<u>onsin.</u>		
Please list the name and primary phone	number of tl	he individual who will pick up the partici	pant in the event that	
they must be sent home:			_	
Pick Up Person's Name:		Phone number:	Phone number:	
I have read and agree to all of the above S	nowball 2018	rules:		
(Signature of Snowball Participant)	(Date)	(Signature of Parent/Guardian)	(Date)	



SNOWBALL

TALENT SHOW



Saturday Night March 24th



Showcase your talents at Snowball!

No worries if you don't feel like performing, but here's your chance to take to the stage!

- Bring your guitar
- Do a skit with your friends
- Sing a song
- Perform standup comedy
- Juggle or make balloon animals
- Perform your poetry
- Show us what you got!



Response Center North Shore Operation Snowball 2018 The Tracy Hirshman Memorial Fund

Tracy Hirshman graduated from Niles North High School in 1990 and was an active member of Operation Snowball throughout her high school career. She continued her education at Ohio State University, but was unable to graduate because of a fatal car accident her senior year.

The Tracy Hirshman Memorial Fund grants an award and stipend every year to a Snowball Teen Leader who emulates some of the enthusiasm and friendship that Tracy embodied. The recipient is nominated by peers and is presented the award and stipend at the Snowball retreat. The Tracy Hirshman Award has become an important symbol of leadership in the Snowball community.

Although the award recipient need not have the exact characteristics that so many loved and respected in Tracy, the following provides a bit of insight into who she was as a person:

- Tracy had the ability to open herself to all types of people and welcome them into her life equally.
- Tracy had an immense energy and enthusiasm for the organizations she participated in, and she left her mark on each one.
- Tracy's laugh was contagious, and was often the source of other's joy.
- Tracy was a great friend who was very supportive and served as an inspiration to others.

This award will be presented on Sunday, March 25th, 2017