



Welcomes you to join us for...

The ABC's of Babysitting

An informative, hands-on class designed to prepare you for the fun and safety of your babysitting future.

Date: Saturday, May 30th, 2009

Time: 8:30 a.m. – 12:00 p.m.

Ages: 10 to 15

Location: York High School – Common Area

Cost: \$25 – Portion of the proceeds will benefit the EJWC Scholarship Fund

Registration and Info:

Please visit our website www.elmhurstjuniors.org for registration information or call 630-359.5079. Completed registration forms due by Friday, May 22nd.

This is not a District 205 sponsored activity.



*Elmhurst Junior Women's Club
ABC's of Babysitting
May 30, 2009*

Dear Parents:

Thank you for showing interest in the *ABC's of Babysitting* presented by The Elmhurst Junior Women's Club. The class is designed to help develop the skills needed by young people to be successful and reliable childcare givers. We hope that upon completion of this class your child will

- * Learn safety and first aid basics - from Elmhurst Fire Department personnel as well as club members
- * Learn tips and hints on the business side to babysitting
- * Get ideas and instructions on how to care and play with children of different ages

The most unique part of this day of learning is that your child will have hands on activities with our children during class exercises. This interaction allows your child to test drive the idea of being a baby sitter as well as getting the opportunity to interact with Moms that hire baby sitters.

The Elmhurst Junior Women's Club is composed of both working women and stay at home mothers from Elmhurst. The club's charter is to perform philanthropic activities for local organizations such as the Elmhurst Park District, Elmhurst Walk-In Ministry, United Community Concerns, and the adoption of an Elmhurst family in need during the Christmas season, as well as to organize social events for members and their families.

There is a \$25 fee to attend the *ABC's of Babysitting* class, due by Friday, May 22nd. Please mail the fee to Stephanie Mixon at 282 E. Forest Ave., Elmhurst, IL 60126. Checks should be made payable to the "Elmhurst Junior Women's Club". A portion of the fees collected from this class will benefit the EJWC scholarship fund.

When mailing the fee also include the following items:

- * Signed permission slip
- * Completed registration form

Our goal is to both help develop your child by giving them useful money making skills, as well as to improve the teen resources available for babysitting positions in Elmhurst. **If you grant your permission, your child's name will be added to a list of babysitters to be given only to current EJWC members.**

The class will be held at the York High School in the common area from 8:30am to 12:00^{PM} on May 30th. Check-in starts at 8:30^{AM}. The program will begin at 8:50^{AM}. A continental breakfast will be provided.

Please arrange for your child to car pool or be picked-up promptly at 12:00^{PM} at the end of class.

If there are questions regarding this program, please contact, Stephanie Mixon (630) 359-5079

Parents' permission for all students under the age of 18 will be required to attend.

Thank you,

The members of the Elmhurst Junior Women's Club

ELMHURST JUNIOR WOMEN'S CLUB
ABC'S of Babysitting

Registration Form

Name: _____ Age: _____

Address: _____ Birthday: _____

Phone: _____

Parent's Name: _____

School: _____

Babysitting Experience:

Yes _____ No _____ (previous experience not required)

If yes, tell us about it. What ages?

How did you hear about this class?

- Flyer in store
- Newspaper
- School flyer
- From a Friend

ELMHURST JUNIOR WOMEN'S CLUB
ABC'S of Babysitting

Permission Slip

My daughter/son, _____, has permission to attend the ABC's of Babysitting class presented by the Elmhurst Junior Women's Club on Saturday, May 30th 2009.

I shall make sure she/he does not attend if she/he is not feeling well and will so inform you. In case of emergency (and I cannot be reached) permission is hereby given to the attending physician to hospitalize, secure proper treatment or surgery for my daughter/son.

Yes No

My daughter/son's name, address and phone number may be released to members of the EJWC for use on a list of babysitters. This list will only be distributed to members of the club.

Yes No

Use of ideas and suggestions presented in this class is at the user's discretion and sole risk. Mention of products, books and games are presented as instructional examples only for the convenience of the users and are not intended to be endorsed or recommended by our club. The suggestions of club members regarding emergency first aid, CPR or skills required for dealing with common household accidents and life-threatening crisis are not intended to replace the services or information of an available trained health care professional.

Signature of Parent/Guardian _____

Date: _____

Phone to be reached day of class: _____

Emergency contact: _____

Relationship: _____

Emergency phone: _____