



Vacation Camp Registration Form 2016-2017

Vacation camp is **\$39 per day**. All fees/copays are due upon registration. Camp runs from 7:30 a.m.-5:30 p.m. All changes and cancellations must occur prior to the registration deadline. Cancellations after the deadline will only be refunded at 50%. Once camp has started, no refunds or credits will be permitted. Please submit an application for each of your children.

Please circle the days you would like to enroll:

October	November	January	February	March	April
12	21,22,23	16	27-3/3	31	24-28
Registration/ Payment Deadline: October 5	Registration/ Payment Deadline: November 14	Registration/ Payment Deadline: January 9	Registration/ Payment Deadline: February 20	Registration/ Payment Deadline: March 24	Registration/ Payment Deadline: April 17

Registration Information:

Child's Name: _____ Birthdate: _____ Age: _____ Gender: _____
 School: _____ Grade: _____

Parent/Guardian Name(1): _____ Employer: _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____ E-Mail: _____

Parent/Guardian Name(2): _____ Employer: _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____ E-Mail: _____

The following people have permission to pick up my child from vacation camp:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Emergency Contacts (should we be unable to contact parent/guardian-contacts should be located within a 30 mile radius of the camp):

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Doctor: _____ Phone: _____ Insurance: _____

Parent/Guardian Authorization:

I, _____, parent/guardian of, _____, authorize my child to participate in all activities associated with camp including van and bus field trips and walking trips. In case of emergency, the Clubhouse staff have permission to seek medical attention, but I agree to accept any expense associated with such an emergency.

Parent Signature: _____ **Date:** _____