



Adventure Camp Registration Form Register Early!!

If a camp has not met the minimum number of enrollments five(5) days prior to the start, the camp may be cancelled.
Camps have a maximum enrollment and are open on a first come, first serve basis.
There will be no refund unless the camp does not fill.
Camps are NOT pro-rated.

Registration is required at least 1 week prior to camp. Early registration is encouraged to ensure placement.
Please contact 281-642-7701 or recreation@cityofmeadowsplace.org for more information.

Meadows Place Parks & Recreation Department reserves the right to cancel, combine, or change the time, date, or location of any program at any time.

REGISTERING AGES **Age 6 Through 5th Grade**

Half Day (8am-12:30pm) \$70 (March 18 – May 19)
\$75 (May 20 – July 29)

Full Day (8am-5pm) \$140 (March 18 – May 19)
\$150 (May 20 – July 29)

Multi Sibling Discount: \$10 off for each sibling after 1st initial registration for full day.
\$5 off for each sibling after 1st initial registration for half day.

- We do offer an Early Drop-off/ Late Pickup Program-\$10 per week, per child
 - Four-day weeks 1 & 6 are offered at \$112 / \$56 for full / half days

City of Meadows Place Adventure Camp is not a licensed childcare facility.

Please Print – Complete both front & back of this form for each child

*Name of Camper: _____ Age: _____ DOB: _____

Parent/Guardian's Name: _____

Home #: _____ Work #: _____ Cell# _____

Home Address: _____ Email: _____

Preferred method of contact: **HOME** **WORK** **CELL**

In case of medical emergency contact:

	Name	Phone #	Relationship to Child
Contact #1			
Contact #2			
Contact #3			

Please list any medical problems, including any requiring maintenance medication (i.e. Diabetic, Asthma, Seizures).

<u>Medical Problem</u>	<u>Required Treatment</u>	<u>Should paramedic be called?</u>
_____	_____	Yes/No
_____	_____	Yes/No

Please list any allergies your child may have:

Please list those people including in addition to parents/guardians who are permitted to pick up your child:

1: _____ 2: _____ 3: _____

Will your camper bike or walk home from camp? **YES** **NO**

***All campers who bring themselves to camp will remain in camp until 5pm, when camp ends, unless a written note is provided by a parent for that day.**

Will you be dropping off your camper(s) early? **YES** **NO**

Will you be picking up your camper(s) late? **YES** **NO**

Waiver, Release, and Hold Harmless Agreement

As a participant in this and any other program of the City of Meadows Place, I recognize and acknowledge that there are certain risks and I agree to assume all such risks including any damages resulting from physical injuries, death, loss of service or consortium, loss or damage to property, or any other loss which I may sustain as a result of participating in any and all activities connected with or associates with such programs.

In consideration of the City of Meadows Place accepting me or my child's registration, and with the intent to be legally bound, I hereby, for myself, my child, all heirs, executors, administrators, and assigns, do hereby forever release, waive and relinquish all claims I have as a result of participating in this and all other programs of the City of Meadows Place. Furthermore, I promise not to sue the City of Meadows Place and agree to indemnify and hold harmless and defend, the City of Meadows Place, and its officers, agents, servants, employees, and insurers, from any and all liabilities, claims, demands, actions or causes of action resulting from physical injuries, including death, loss of services or consortium, loss or damage to property, or any other loss which I may have or my child may have, or which may accrue to me on account of my participation in this and all other programs of the City of Meadows Place.

Read carefully - by signing this form, you may give up important legal rights.

Date

Parent or Guardian
If participant is under age 18, this registration form must also be signed by a parent or guardian.

Policy and Procedure Handbook

I hereby acknowledged that I have received the Meadows Place Adventure Camp Policies and Procedure Handbook.

Parent's/Guardian's Initials _____

Photo Release

I hereby give permission for my child to be photographed during the **Meadows Place Adventure Camp**. I understand the photos will be used to keep a journal of activities, to share during power point presentations including flyers, newsletters, and on the internet. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed, I do not expect compensation and that all photos are the property of Meadows Place.

Parent's/Guardian's Initials _____