



## Adventure Camp Registration Form

Camps have a maximum enrollment of 25 campers and are on a first come first serve basis. Registration is required at least 1 week prior to camp. Early registration is encouraged to ensure placement.

A 10% administration fee will be applied to all refunds. If the request is made 11 days or more before the start of the camp, you will be eligible for a refund of 90%.

Refunds will not be issued if the request is made within 10 days of the week registered.

Camp weeks can NOT be pro-rated.

Please contact 281-642-7701 or [recreation@cityofmeadowsplace.org](mailto: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.

*We have a strict three-strike policy towards campers who disrupt the program, create unsafe conditions, show violence towards staff and/or peers, or disrespect to staff and/or peers. **Ensure you read through the full discipline procedure in our policy and procedure packet provided.***

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

### **REGISTERING AGES**

**Age 6 Through 5<sup>th</sup> Grade**

**Half Day (8am-12:30pm): \$75 (June 2<sup>nd</sup> – August 1<sup>st</sup>)**

**Full Day (8am-5pm): \$150 (June 2<sup>nd</sup> – August 1<sup>st</sup>)**

**Multi Sibling Discount: \$10 off for each sibling after 1<sup>st</sup> initial registration for full day.**

**\$5 off for each sibling after 1<sup>st</sup> initial registration for half day.**

- We do offer an Early Drop-off/ Late Pickup Program**

**\$30 for Early Drop-off and Late Pickup individually**

**\$50 for BOTH Early Drop-off and Late Pickup**

- Four-day week is June 30<sup>th</sup>-July 3<sup>rd</sup>**

**Cost: \$120**

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

\*Name of Camper: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

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

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**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** \_\_\_\_\_