



## Discovery Summer Day Camp Registration Form

**Register Early!** If a camp has not met the minimum number of enrollments five (5) days prior to the start date, 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 for residents of Meadows Place will begin the 1<sup>st</sup> Monday in March (proof of residency will be required). Non-residents will be added to a waitlist and will be contacted one week prior to camp in the event a spot is available.

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

### PRE-REGISTRATION\*

**Half Day (8am - 12:30pm) \$70 Resident / \$95 Non-Resident; Entering Grades 1<sup>st</sup>-5<sup>th</sup>**

**Full Day (8am - 5pm) \$130 Resident / \$155 Non-Resident; Entering Grades 1<sup>st</sup> – 5<sup>th</sup>**

### DAY OF REGISTRATION\*

**Half Day (8am-12:30pm) \$95 Resident / \$120 Non-Resident**

**Full Day (8am-5pm) \$155 Residents / \$180 Non-Resident**

*\*Early Drop-off or Late Pickup Program-\$15 per session, per child*

*Multi Sibling Discount: \$5 off for 2nd sibling, \$10 off for more than 3 siblings.*

*City of Meadows Place Summer Day Camps 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: \_\_\_\_\_ EmailAddress: \_\_\_\_\_

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**

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.

### **Photo Release**

I hereby give permission for my child to be photographed during the **Meadows Place Discovery 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** \_\_\_\_\_

### **Transportation Release**

I hereby give permission for the transportation of my child for official **Meadows Place Discovery Camp** activities by modes of transportation agreed to by the camp organizers.

**Parent's/Guardian's Initials** \_\_\_\_\_

## Policy and Procedure Handbook

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

Parent's/Guardian's Initials \_\_\_\_\_

Camp Week	Amount Paid	Check Number	Date Paid
<b>Week 1</b> June 1 <sup>st</sup> – June 5 <sup>th</sup>			
<b>Week 2</b> June 8 <sup>th</sup> – June 12 <sup>th</sup>			
<b>Week 3</b> June 15 <sup>th</sup> – June 19 <sup>th</sup>			
<b>Week 4</b> June 22 <sup>nd</sup> – June 26 <sup>th</sup>			
<b>Week 5</b> June 29 <sup>th</sup> – July 3 <sup>rd</sup>			
<b>Week 6</b> July 6 <sup>th</sup> – July 10 <sup>th</sup>			
<b>Week 7</b> July 13 <sup>th</sup> – July 17 <sup>th</sup>			
<b>Week 8</b> July 20 <sup>rd</sup> – July 24 <sup>th</sup>			
<b>Week 9</b> July 27 <sup>th</sup> – July 31 <sup>st</sup>			
<b>Week 10</b> August 3 <sup>rd</sup> – August 7 <sup>th</sup>			