Willington Summer Camp July 8-August 16, 2019

REGISTRATION FORM

PARTICIPANT INFORMATION Please type or print legibly.					
Week 1: Monday July 8- Friday Full Day Half Day Week 3: Monday July 22- Frida Full Day Half Day Week 5: Monday Aug 5- Friday Full Day Half Day	y July 26 Week	2: Monday July 15- Friday July 19 Full Day Half Day 4: Monday July 29- Friday Aug 2 Full Day Half Day 6: Monday Aug 12- Friday Aug 16 Full Day Half Day			
Last Name: First Name:					
Gender: Female 🛛 Male 🗖	Age:				
Grade attended year 2018-2019:					
Home address:					
City:Sta	te:	Postal/Zip Code:			
Telephone:Cell:					
(Include area code with tel Parent email:					
Mother's name:	1other's name: Father's name:				
fother's day phone: Father's day phone:					
Mother's cell:	other's cell:Father's cell:				
Person's Authorized to pick up child:					
Other Dismissal Arrangements:					
Emergency contact:	Relationship:	Phone:			
Specify any of your child's health problems:					
Is your child on any medication? No Yes If so, please specify:					
Does your child require: One-on-One supervision? Yes No Additional Support? Yes No					
If you answered yes to any of the above, yo	u must contact the camp d	directors to discuss your child's special needs. If			

If you answered yes to any of the above, you must contact the camp directors to discuss your child's special needs. If your child has social or behavior issues, it is vital for you to let us know so that we can work together for a safe and successful summer. Please provide us with any additional information you feel is relevant to your child's safe and comfortable experience at camp e.g. eagerness to attend camp, special considerations etc. **Lunch/Snack:** You must send your child/ren with lunch and snack each day. Please make sure your child's lunch does not need refrigeration or has an ice-pack as we cannot guarantee refrigeration each day. Your child will also need a morning snack. An afternoon treat/snack will be provided.

Payments: Tuition may be paid by cash or by check. Please make checks payable to: **WPRD**

Camp Fees:

- \$200/ per week Full day of camp
- Additional siblings \$150/per week
- Half day of camp \$100/per week

Registration fee: Registration and half the total fee is due by 5/31/19, if we do not have 20 children registered by 5/31/19, camp will not run and registration fees will be returned. The remaining balance is due by 6/28/19 if camp runs.

Contact Information

For more information contact:

Willington Parks and Recreation 860-487-3108 <u>mparsell@willingtonct.org</u> Willington Human Services 860-487-3118 humanservices@willingtonct.org

I understand that the registration fee is due by May 31st. We do not provide make-ups or refunds for any days missed for any reason. Please do your best to come to Summer Camp every day.

SIGNATURE OF PARENT/GUARDIAN DATE	
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DROP OFF AND PICK UP TIMES

Drop off time:

• 8:30 a.m. for full day campers

Pick up time:

- 4:30 p.m. for full day campers
- 12:00 p.m. for half day campers
- A \$1.00/minute late fee will be charged to parents who pick up late after a 10 minute courtesy wait.

REQUIRES PARENT'S SIGNATURE:

You have our permission, in the event of an emergency and in case we are unavailable, to authorize any physician, nurse practitioner or medical personnel to examine, interview, test and if necessary, treat my child______ as they may deem advisable.

Parent/Legal Guardian Name		_Date
Allergies		
Medical Problems		
Doctor	_Phone number	
Insurance carrier	Policy number	

PARENT STATEMENT

Participation at Summer Camp will include activities that may be inherently dangerous, including, but not limited to, physical exertion, injury, strains, sprains, falls, tick exposure, and contact with other participants. In consideration of my child being allowed to participate in this program, I knowingly and voluntarily assume all risks, including serious personal injury that arise from or may arise from my child's participation in this camp program.

To the fullest extent permitted by law, for myself, my family, my heirs, executors and administrators and on behalf of my minor child, I covenant not to sue and knowingly and voluntarily release and hold harmless the Town of Willington, Willington Human Services, Willington Parks and Recreation and each of their employees, officers, directors, volunteers, and affiliates from and against all past, present, and future claims, liability, demands, judgments and causes of action, however caused, arising out of my child's participation in this camp program, whether it results from any of the above named persons or entities or from any other cause.

Furthermore, I authorize use of my child's image and voice as may be captured by photograph or recording during his or her participation in this camp program.

I understand and acknowledge Willington does not and will not provide medical insurance or any other insurance to or for my child. My child has medical insurance coverage and I will provide proof of this medical insurance coverage to appropriate camp personnel. I authorize my child to receive medical care in the event of an emergency.

The foregoing release and indemnification agreement shall be as broad and inclusive as is permitted by State law. If any portion of it is held invalid, the balance shall continue in full force and effect. I have read, understand and agree to the terms of this Agreement.

Parent Signature	Date
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Items to bring to camp

Lunch Snack Water bottle Sneakers Swim suit Towel Flip Flops or water shoes (for swimming days only) Change of clothes (just in case) Sunscreen (please put on before coming to camp as well) Hat/sunglasses Bug spray

Please be sure to label all personal belongings

Things to leave at home

Electronics Phones Toys that can be break or you would be sad if lost/damaged