

**Waynesboro Department of Parks and Recreation**

**Camp Summer Fun Registration Form**

**CHILD'S INFORMATION**

Site \_\_\_\_\_

Name \_\_\_\_\_ Nickname \_\_\_\_\_ Birthdate \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

School last attended \_\_\_\_\_ Grade during 2011-12 school year \_\_\_\_\_

**MEDICAL INFORMATION**

Allergies \_\_\_\_\_

Medications \_\_\_\_\_ Needed at site? \_\_\_\_ (If yes, MD med auth required)

Possible Side Effects: \_\_\_\_\_

Chronic Medical Conditions/ Pertinent Developmental Information/ Special Accommodations needed:

\_\_\_\_\_

Physician's Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

**PARENT INFORMATION: Email Address:** \_\_\_\_\_

Mother's Name \_\_\_\_\_ Address \_\_\_\_\_

Phone (cell) \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_

Place of employment \_\_\_\_\_

Father's Name \_\_\_\_\_ Address \_\_\_\_\_

Phone (cell) \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_

Place of employment \_\_\_\_\_

**EMERGENCY CONTACTS (Must be local and someone other than parent listed above)**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone (cell) \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone (cell) \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_

**AUTHORIZATION FOR PICKUP**

Persons authorized to pick up your child, in addition to parents and emergency contacts \_\_\_\_\_

\_\_\_\_\_

Name below if a parent is NOT authorized to pick up or visit child (appropriate legal paperwork must be attached in order to enforce this) \_\_\_\_\_

**PREVIOUS CHILD DAY CARE PROGRAMS ATTENDED** \_\_\_\_\_

**SWIMMING**

My child has my permission to swim in the deep end of the pool, providing he/she passes the swim test administered by a lifeguard at the pool, during Camp Summer Fun. YES\_\_\_\_ NO\_\_\_\_

**PARENT /AGENCY AGREEMENT** (Read and initial each below)

\_\_\_\_\_ Parent has received a copy of the Camp Summer Fun Handbook and agrees to read and abide by the policies outlined in the handbook.

\_\_\_\_\_ Parent/Guardian gives authorization for emergency medical care to be given when the parent/guardian cannot be located.

\_\_\_\_\_ Parent/Guardian understands that payment must be received prior to attendance and that children marked "unpaid" will not be allowed to attend until payment is received.

\_\_\_\_\_ Parent/Guardian releases the City of Waynesboro, Department of Parks and Recreation, instructors, administrators, volunteers, and assistants from all liabilities and claims for damages or injuries while participating in Camp Summer Fun.

\_\_\_\_\_ Parent/Guardian gives permission:

For staff to apply sun screen (if sent by parent) to child.

For the child to participate in all camp activities, including field trips.

For child's photo to be used in future publicity for Parks and Recreation activities.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of Recreation Department Staff \_\_\_\_\_ Date \_\_\_\_\_

Date of Enrollment \_\_\_\_\_ Date of Termination of Enrollment \_\_\_\_\_

**ADMISSION REQUIREMENTS:**

Registration will be taken at the Recreation Office during office hours. **Payment and completed forms must be received at the time of registration.** Forms necessary for registration include:

- **Registration/Agreement Form**
- **Child's current immunization record;**
- **Child's most recent physical;**
- **Copy of birth certificate;**
- **Legal custodial paperwork (if applicable)**
- **First week's payment (which is non-refundable)**
- **\$20 registration fee (if child did not attend LATCH or CSF in 2011)**
- **Camp Summer Fun Calendar**

If your child has recently attended Camp Summer Fun, these forms may already be on file at the Recreation Office.

Please feel free to call 942-6735 if you have any questions.