



# SUMMER CAMP REGISTRATION

Registration Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## Camper Information

Participant Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Status – Please check one: Resident (R) \_\_\_\_\_ Non-Resident (NR) \_\_\_\_\_

Description of any physical limitations, allergies, treatment instructions or any other information we should know: \_\_\_\_\_

Emergency Contact Information: (Name, relationship to participant & daytime phone number.)

#1 \_\_\_\_\_ #2 \_\_\_\_\_

In case of an emergency, do you give permission to have participant taken to the nearest hospital by Rescue Squad?

Yes \_\_\_\_\_ No \_\_\_\_\_

Do you give permission for participant to walk to area parks and area locations? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you give permission for participant to walk or ride a bike home after camp? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you give permission for participant to receive a snack at camp? Yes \_\_\_\_\_ No \_\_\_\_\_

Optional Friend Request: \_\_\_\_\_

Littlewood Camp is for ages 3-5 years. Wildwood Camp is for ages 6-10 years. You may not sign up for AM & PM Littlewood on the same dates for the same child. All Littlewood campers must be toilet-trained by start of Summer Camp. 6 year-olds must be attending 1<sup>st</sup> Grade immediately in Fall 2010 to qualify for Camp Wildwood. Participants must bring snacks and water bottles (and lunch if Full Day participant). **WAIVER & RELEASE OF ALL CLAIMS:** As a participant I acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries including death, damages or loss which I may sustain as a result of participating in any and all activities connected to or associated with Wildwood Park District programs. I assume full responsibility to inform the instructor of any physical/medical condition that may affect participation. I agree to and relinquish all claims I may have against the Wildwood Park District and its officers, agents, servants and employees as a result of participating in the program. I do hereby fully release and discharge the park district and its officers, agents, servants and employees from any and all claims regarding injuries including death, damages or loss which I may sustain as a result of participating in any and all activities connected to or associated with Wildwood Park District programs.