

# 2015 SUMMER CAMP REGISTRATION FORM

# GEORGETOWN PARKS AND RECREATION

CAMPER INFORMATION					<b>Kid City Only</b> Do you qualify for Free or Reduced Lunch? Yes      No <hr/> <b>Current GISD CAMPUS</b>
Last Name	First Name	Age	Date Of Birth (mm/dd/yyyy)	Gender (Circle) <i>Male or Female</i>	
Address	City	State	Zip	Entering Grade (2015-2016)	

Parent / Guardian #1- Primary Contact			
Last Name	First Name	Relationship To Child	
Address	City	State	Zip
Employer	Cell Phone		Home Phone
Work Phone	Email		

Parent / Guardian #2			
Last Name	First Name	Relationship To Child	
Address	City	State	Zip
Employer	Cell Phone		Home Phone
Work Phone	Email		

Emergency Contacts/Release of Child Authorization: Parent / Guardian hereby authorizes Georgetown Parks and Recreation Staff to contact the following persons in case of emergency in the event that I or the other parent/guardian cannot be reached, and allow my child to leave the Program with the following persons.				<b>Extended Hours:</b> <i>Circle all that will apply</i>  <b>Camp Goodwater:</b> \$5 early drop off 7:00–7:45am \$5 late pick up 5:15–6:00pm  <b>Tennis Camp:</b> \$5 early drop off 7:00–7:45am \$5 late pick up 4:30–5:15pm \$10 late pick up 4:30–6:00pm
Last Name	First Name	Phone #1	Phone #2	
Last Name	First Name	Phone #1	Phone #2	
Last Name	First Name	Phone #1	Phone #2	
Last Name	First Name	Phone #1	Phone #2	

**Children Ages 12 & older with a Valid Membership:** I authorize my child to sign himself / herself out of camp at the end of the session to attend the facility as a member. I understand that Georgetown Parks and Recreation Camp Staff are no longer responsible for my child once he/she signs out of camp.

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Camper Name: \_\_\_\_\_

<b>HEALTH SUMMARY</b>		
Does Your Child Have Any Of The Following: Please Circle All That Apply		Please list any additional medical issues or medical diagnosis.
Asthma	Diabetes	
Hay Fever	ADD/ADHD	
Back Problems	Heart Condition	
	Dizziness	
	Joint Problems	
	High Blood Pressure	
List Medications	Dose And Frequency	For What Reason
List Allergies	Reaction	
Please list any special accommodations.		

Preferred Physician:	Phone:
Preferred Clinic / Hospital:	Phone:
Insurance Provider:	Phone:

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

\_\_\_\_\_  
Date

Camper Name: \_\_\_\_\_

**RELEASE, MEDICAL RELEASE/PERMISSION, PHOTO RELEASE, ACKNOWLEDGEMENT AND ACCEPTANCE OF RISKS INDEMNIFICATION AGREEMENT**

I, the legal parent and/or guardian of and on behalf "PARTICIPANT", for and in consideration of the privilege of participating in the City of Georgetown Parks and Recreation Camp Program ("PROGRAM") and recognizing that these activities involve certain inherent dangers, do hereby agree to assume all risks attendant to such activity, including, but not limited to, motor vehicle accidents and/or pedestrian accidents on either public or private property, and do for myself, for and with my heirs, hereby agree to waive all claims against and release, indemnify, defend and hold harmless the CITY OF GEORGETOWN, all of its officers, employees, agents and representatives, ("CITY") in both their public and private capacities, from and against any and all liability, claims, suits, losses, damages and causes of action, including all expenses of litigation and/or settlement for death, injury to, or death of any person, or for loss of, damage to, or loss of use of any property arising out of or in connection with participation in the PROGRAM.

Such indemnity shall apply regardless of cause or of any fault or negligence of the CITY. It is the express intention of the parties hereto, both participant and the CITY, that the indemnity provided for in this paragraph is indemnity by the participant to indemnify and protect the CITY, from the consequences of the CITY's own negligence or participant's own negligence, whether that negligence is the sole or concurring cause of any injury, death, or damage.

I certify that PARTICIPANT has not been advised by a health care professional that PARTICIPANT should not participate in the PROGRAM or other similar physical activities. In the event PARTICIPANT is injured as a result of his/her participation in the PROGRAM, and it becomes necessary that he/she receive medical treatment, I expressly release the CITY and waive any and all claims against the CITY for any and all liability incurred as a result of the medical treatment received. This release and waiver expressly includes all costs of emergency care and/or transportation. I grant permission for any emergency medical treatment, operation, or anesthesia that might become necessary.

I authorize the CITY to transport PARTICIPANT during the course of the PROGRAM.

I authorize the CITY to use PARTICIPANT's photograph for promotional and/or commercial purposes, including, but not limited to, brochures, newsletters, websites, and television media. I release the CITY, from any liability for use of PARTICIPANT's picture.

I expressly agree that this waiver of liability, release, indemnification and hold harmless agreement is intended to be as broad and as inclusive as is permitted by the laws of the State of Texas, and that if any portion, word, term, phrase, clause or paragraph of this agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

It is further agreed that the execution of this waiver of liability, release indemnification and hold harmless agreement will not constitute a waiver by the CITY of the defense of governmental immunity where applicable, or any other defense recognized by federal or state courts.

I have read this waiver of liability, release, indemnification and hold harmless agreement and understand all of its terms. I am aware of the risks associated with participation in the PROGRAM and execute this document voluntarily and with full knowledge of its significance.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REGISTRATION FEES AND AGREEMENT**

A **\$30 nonrefundable** deposit is due at time of registration. The remaining balance for camp must be paid in full by the Monday two weeks prior to the start of camp (14 days in advance of attendance). If the balance is not paid in full by the Monday two weeks prior to camp, your child's spot will be forfeited to the next child on the waitlist. You will lose your reservation and your \$30.00 deposit.

Refunds, minus the \$30 nonrefundable deposit, will only be given if notice is received **14 or more days prior** to the start of camp. No refund will be given with less than 14 days' notice. Complete refunds (including deposits) will only be given for departmental cancellations. Because of staffing requirements, fees will not be prorated for partial attendance. Tuition is based on a full week.

I have read the Registration Agreement and I understand these policies.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CAMP BEHAVIOR POLICY**

Campers must abide by all camp rules while at camp. Failure to follow camp rules will result in disciplinary action as camp staff deems necessary, up to and including expulsion from camp for the remainder of the summer without refund. I understand and agree to the camp behavior policy.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please circle which camps you would like to register for.

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

Age: \_\_\_\_\_

	Week 1 June 1-5	Week 2 June 8-12	Week 3 June 15-19	Week 4 June 22-26	Week 5 Jun 29- Jul 3	Week 6 July 6-10	Week 7 July 13-17	Week 8 July 20-24	Week 9 July 27-31	Week 10 August 3-7	Week 11 August 10-14	Week 12 August 17-21
<i>Adaptive</i> <b>Let's Make Friends</b>			# 57921 M-Th	# 57922 M-Th	# 57923 M-Th	# 57924 M-Th	# 57925 M-Th	<i>Adaptive Camps do not register with this form, because more information is needed. Please ask for or download a 2015 Adaptive Camps Registration Form.</i>				
<i>Adaptive</i> <b>Circle of Friends</b>			# 57911 M-Th	# 57912 M-Th	# 57913 M-Th	# 57914 M-Th	# 57915 M-Th	<i>Adaptive Camps do not register with this form, because more information is needed. Please ask for or download a 2015 Adaptive Camps Registration Form.</i>				
<b>Teen Adventure</b>	#58510 Welcome to Adventure Ages 11-12	#58511 Welcome to Adventure Ages 11-13	#58513 Arkansas (June 18-25) Ages 12-17			#58514 Colorado (July 6-14) Ages 14-17			#58515 Extreme Water Sports (July 27-Aug 5) Ages 12-17			
<b>ARC Jr Guard Safety</b>		# 58181 Ages 11-14	# 58182 Ages 11-15	# 58183 Ages 11-16	# 58184 Ages 11-17							
<b>Art Camps</b>						#58354 Ages 8-12		#58355 Ages 8-12	#58356 Ages 8-12	#58357 Ages 8-12		# 58363 Ages 8-12
<b>Camp Goodwater</b>	# 58158 1st-3rd Grade	# 58160 1st-3rd Grade	# 58162 1st-3rd Grade	# 58164 1st-3rd Grade	# 58166 1st-3rd Grade	# 58168 1st-3rd Grade	# 58170 1st-3rd Grade	# 58172 1st-3rd Grade	# 58174 1st-3rd Grade	# 58176 1st-3rd Grade		
	# 58159 4th-7th grade	# 58161 4th-7th grade	# 58163 4th-7th grade	# 58165 4th-7th grade	# 58167 4th-7th grade	# 58169 4th-7th grade	# 58171 4th-7th grade	# 58173 4th-7th grade	# 58175 4th-7th grade	# 58177 4th-7th grade		
<b>Kid City</b>					# 58021 Ages 5-11	# 58022 Ages 5-11	# 58023 Ages 5-11	# 58024 Ages 5-11				
<b>Hula Hoop Camp</b>	# 58364 Ages 6-15				# 58365 Ages 6-15							
<b>Video Game Creation</b>	# 58374 Ages 10-14				# 58379 Ages 10-14							
<b>Web Design</b>		# 58375 Ages 10-14					# 58380 Ages 10-14					
<b>Scratch</b>			# 58376 Ages 8-12					# 58381 Ages 8-12				
<b>Video Production</b>				# 58377 Ages 10-14								
<b>Crafting for Cash</b>				# 58378 Ages 12-16					# 58382 Ages 12-16			
<b>LEGO Camp</b>											# 58366 Ages 5-14	# 58373 Ages 5-14
<b>Teen Self Defense Camp</b>						# 58295 Ages 12-16					# 58296 Ages 12-16	
<b>Sports Mania Camp</b>		# 58383 Ages 5-9										
<b>Tennis Camp</b>	# 57901 Ages 7-12	# 57902 Ages 7-12	# 57903 Ages 7-12	# 57904 Ages 7-12	# 57905 Ages 7-12	# 57906 Ages 7-12	# 57907 Ages 7-12	# 57908 Ages 7-12	# 57909 Ages 7-12	# 57910 Ages 7-12		
<b>Tennis: Junior Tennis Academy</b>	# 58071 Ages 11-18	# 58072 Ages 11-18	# 58073 Ages 11-18	# 58074 Ages 11-18	# 58075 Ages 11-18	# 58076 Ages 11-18	# 58077 Ages 11-18	# 58078 Ages 11-18	# 58079 Ages 11-18	# 58080 Ages 11-18		
<b>Munchkin Tennis</b>	# 58061 Ages 5-7	# 58062 Ages 5-7	# 58063 Ages 5-7	# 58064 Ages 5-7	# 58065 Ages 5-7	# 58066 Ages 5-7	# 58067 Ages 5-7	# 58068 Ages 5-7	# 58069 Ages 5-7	# 58070 Ages 5-7		
<b>Volleyball Skills Camp</b>			# 58386 Ages 9-14					# 58390 Ages 9-14				