

# Young Explorers Camp Registration Form 2019

## CAMP LATE FEES (Please initial)

**Late Pick Up:** Campers who are not picked up by 12:15 p.m. will be charged \$10 and an additional \$1 fee per camper per minute.

Guardian Initials: \_\_\_\_\_

Camper's Name \_\_\_\_\_ Nickname \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age in June \_\_\_\_\_ Gender \_\_\_\_\_

Does your camper require inclusion assistance at camp? **Y N**

If yes, Please explain: \_\_\_\_\_

Are there any behavioral concerns that we should be aware of? **Y N**

If yes, please explain: \_\_\_\_\_

Does your camper have any allergies? **Y N**

If yes, please explain: \_\_\_\_\_

Camper's Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### Guardian 1

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

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

### Guardian 2

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

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

**\*Weekly newsletters are sent to parents to keep them informed. Please make sure to include email address.**

### Emergency Contact– Please Do Not list Yourself

Name: \_\_\_\_\_ Relation to Camper: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relation to Camper: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_



## Persons Authorized to Pick-Up Camper

The following people are authorized to Pick Up my camper from Young Explorers.

Campers **will not** be released to any person not on the following pick-up list. If you need a special arrangement for one day please send a note with your camper that day or email staff at [imaginationstationdirectors@gmail.com](mailto:imaginationstationdirectors@gmail.com)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Each person must present a valid drivers license for pick-up. NO EXCEPTIONS!**

**Camp Shirt Size (circle one) :**  
**YS YM YL**

### Authorization For Emergency Medical Care

In case of an accident or illness, if I (we) cannot be reached to make necessary arrangements, I (we) hereby authorize PARC Staff to contact the local Paramedics for transportation to the nearest hospital.

### Release For Participant By Parent

In consideration of your accepting either my child's entry, I hereby, for myself, for my child, my heirs, executors and administrators, waive and release any and all rights and claims for damages my child may have against the City and its representatives, successors and assigns for any and all injuries suffered by my child at any activity sponsored by these groups.

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