



# Town of Aberdeen Parks and Recreation Department 2025 Spring Break Day Camp Registration

**Eligibility:** Boys and Girls ages 5-12 (as of 4/1/2025)

**Dates:** April 14-17

**Registration Deadline:** April 4 or until full

**Time:** 7:45am-5:30pm

**Registration Fee:** Residents \$85 per week / Non-residents \$130 per week; No Camp on Friday, April 18

**Participant Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Age:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Parents/Guardians:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Add'l Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Alt. Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_ **Ext:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Allergies:** \_\_\_\_\_ **Epi Pen:** Yes No

**Medications:** \_\_\_\_\_ **Seizures:** Yes No

**Special Dietary Needs:** \_\_\_\_\_

Please list the people that are permitted to pick up your child:

\*\*If you need to add a person after turning in this form it must be done **in person** by the parent/guardian to verify identity\*\*

**Name/Relationship:** \_\_\_\_\_

**Name/Relationship:** \_\_\_\_\_

**Name/Relationship:** \_\_\_\_\_

**Name/Relationship:** \_\_\_\_\_

### WAIVER

I hereby agree to allow my child to participate in the activity sponsored by Aberdeen Parks and Recreation Department. I understand that my child shall abide by all rules as a condition of participation or risk expulsion from the program. I understand that my child may suffer accident or injury as a direct or indirect result of participation and agree to assume all risk involved in my child's participation. In the event of an injury, I will not hold the Town of Aberdeen, agents, volunteers, or employees responsible or liable. I also give permission to Aberdeen Parks and Recreation Department to give medical attention to my child as deemed necessary. I also release any pictures taken during this program to be used as promotional purpose.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

#### \*For Department Use Only\*

**R: \$85 NR: \$130 CHECK#** \_\_\_\_\_ **CASH CC ONLINE CC Date** \_\_\_\_\_ **Staff** \_\_\_\_\_