



Town of Aberdeen Parks and Recreation Department

2022 Summer Day Camp Registration

Eligibility: Boys and Girls ages 5-12 (as of 8/31/2021)

Dates: Week of June 20th – Week of Aug 8th

Registration: February 14th – May 27th or until full

Time: 7:45am-5:30pm

Registration Fee: Aberdeen Residents \$85 per week / Non-residents \$130 per week

Participant's Name: _____ **Date of Birth:** ___ / ___ / ___ **Age:** _____

Address: _____ **City:** _____ **Zip:** _____

Parents/Guardians: _____ **School:** _____

Email Address: _____ **Alt. Email:** _____

Main 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: _____ **Can your child swim?** Yes No

Please list everyone besides parents/guardians 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 parents/guardians listed to verify identity. IDs required for pick-up****

Name/Relationship: _____ **Name/Relationship:** _____

Name/Relationship: _____ **Name/Relationship:** _____

Please circle all weeks you would like to attend.

First week must be paid in full up front; following weeks may be reserved (see reservation policy below)

- (1) June 20-24 (2) June 27-July 1 *(3) July 5-8: Short week: R \$68, NR \$102* (4) July 11-15
 (5) July 18-22 (6) July 25-29 (7) Aug 1-5 (8) August 8-12

Reservation Policy: Reserve additional weeks with a \$15 non-refundable/non-transferable reservation fee.

Full payment for reserved weeks will be due 7 days in advance of that week. Spots not paid in full on the Monday prior will be forfeited to a child on our waitlist. I agree to and understand this policy: _____ (Initial)

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

Weeks Paid: _____ **Weeks Reserved:** _____ **Total Paid:** _____

R: \$85/ (3) \$68 NR: \$130/ (3) \$102 CHECK# _____ **CC CASH ONLINE Date** _____ **Staff** _____