

Garner Parks & Recreation Department Camp Kaleidoscope 2010 Registration Form

The Camper

Camper's Name _____ Preferred Name _____

Address _____ City _____ Zip _____

Birth Date _____ Age _____ Grade as of March 2010 _____

Medical Information

Are there any physical/mental/emotional conditions, medicine, or other information of which the camp staff should be informed? No Yes (please explain)

Family Information

Mother's Name _____

Employer _____

Work Phone _____ ext. _____

Home Phone _____ Other Phone _____

Email _____

Father's Name _____

Employer _____

Work Phone _____ ext. _____

Home Phone _____ Other Phone _____

Email _____

Emergency Contact

If mother or father cannot be reached, the following information will be used.

Name _____

Work Phone _____ ext. _____

Home Phone _____ Other Phone _____

Pick Up Authorization

In addition to parents listed on this form, the following person(s) is/are authorized to pick up the camper.

Sessions

Check all weeks you would like to attend.

- | | |
|--|---|
| <input type="checkbox"/> Week 1 - June 14 - 18 | <input type="checkbox"/> Week 6 - July 19 - 23 |
| <input type="checkbox"/> Week 2 - June 21 - 25 | <input type="checkbox"/> Week 7 - July 26 - 30 |
| <input type="checkbox"/> Week 3 - June 28 - July 2 | <input type="checkbox"/> Week 8 - August 2 - 6 |
| <input type="checkbox"/> Week 4 - July 5 - 9 | <input type="checkbox"/> Week 9 - August 9 - 13 |
| <input type="checkbox"/> Week 5 - July 12 - 16 | <input type="checkbox"/> Week 10 - August 16 - 20 |

Camp T-Shirt

Campers may purchase t-shirts for \$10 each at the time of registration through May 22. After that time, any remaining shirts will be available on a first come first served basis.

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Youth Small | <input type="checkbox"/> Adult Small |
| <input type="checkbox"/> Youth Medium | <input type="checkbox"/> Adult Medium |
| <input type="checkbox"/> Youth Large | <input type="checkbox"/> Adult Large |
| | <input type="checkbox"/> Adult Extra Large |

For Office Use Only			
	Resident	Non-Resident	
	Deposit	Paid in Full	Total
Week 1	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 2	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 3	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 4	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 5	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 6	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 7	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 8	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 9	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Week 10	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
T-Shirt	<input type="checkbox"/>		\$ _____
Total Due			\$ _____

Signature Required on Reverse

Verified

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Registration and Payment Information

- Reservation for camp may be on a weekly or an entire summer basis. Each session must have a minimum of 12 and a maximum of 48 registered campers. In order to reserve a space for the weeks you want to attend, you may make a deposit of \$25 per week. However, full payment is due by the deadlines listed below. A waiting list will be formed if necessary.
- In order to provide adequate staffing levels, campers must be registered and have paid fees in advance. The Parks & Recreation Department maintains a 1:12 ratio to provide each camper with a safe and enjoyable experience. However, all camp groups will have a minimum of two staff members present throughout the day. **No registration will be accepted after the payment deadline. If full payment is not made by the payment deadline as listed on the chart below, your child will not be permitted to attend camp for that week.** Payments may be made at Town Hall in the Parks and Recreation Department, at the Avery Street Recreation Center Annex, or online at www.GarnerParks.org. Completed registration forms, deposits, and payments-in-full can be mailed to:

Town of Garner
Camp Kaleidoscope
PO Box 446
Garner, North Carolina 27529

Fee Payment Chart

	Date	Town of Garner Resident Fee	Non Resident Fee	Payment Deadline
1	June 14 - 18	\$75	\$98	June 10
2	June 21 - 25	\$75	\$98	June 17
3	June 28 - July 2	\$75	\$98	June 24
4	July 5 - 9	\$75	\$98	June 31
5	July 12 - 16	\$75	\$98	July 8
6	July 19 - 23	\$75	\$98	July 15
7	July 26 - 30	\$75	\$98	July 22
8	August 2 - 6	\$75	\$98	July 29
9	August 9 - 13	\$75	\$98	August 5
10	August 16 - 20	\$75	\$98	August 12

Other Important Information

- Camp is for completed K through completed 7th graders and is based at Avery Street Recreation Center.
- Participants must bring their own lunch and afternoon snack every day, unless otherwise specified. No refrigeration or microwave is available for summer camp. Participants will not be allowed to use the snack machine during camp hours.
- Participants should wear clothing appropriate for camp activities. Close-toed shoes are strongly encouraged. The participant's name should be written on all items brought to camp. Do not bring valuables such as radios, jewelry, electronic games, trading cards or money. Town of Garner employees will not hold money or personal items for the participants. The Town of Garner will assume no responsibility for lost, stolen, or damaged property brought to camp.
- Camp hours are 7:30 am until 6:00 pm. Scheduled group activities take place between 9:00 am & 4:30 pm. There is a \$5 per child late fee for every 15 minutes or part thereof after 6:00 pm that your child is not picked up. More than three late pick ups may result in dismissal from the program.

Camp Kaleidoscope Behavior Management Policy

If a participant is consistently disrupting a group, not following directions, or causing trouble that effects his/her safety or the safety of another child, the following procedures will be initiated. I understand that if my child is removed from the program, I will not receive a refund and will need to pick them up one hour from the time I am contacted.

- Quiet reprimand/Verbal warning
- Time Out (maximum of 10 minutes)
- Child brought to office/camp director who will evaluate the problem. Parents may be contacted at the discretion of the director.
- If the problem persists, a parent will be contacted and the child will be sent home. Parent must arrange for pick up within 1 hour of the notification.
- If a child is sent home three times during a program, they will be asked to leave the program and no refund will be given.
- For severe offenses (including, but not limited to fighting, theft, possession of a weapon or drugs, and abuse), the participant may be dismissed from the program immediately with no refund.

Waivers

- In the event of an emergency and the camp staff is unable to contact me, I hereby give the Town of Garner authorization to provide medical treatment and/or emergency medical service to my child.
- I grant the Town of Garner permission to use, for any legitimate reason, any photographs, motion picture, or recording of my child's participation in this activity.
- I realize that this camp will travel in a Town of Garner vehicle for field trips. My child is authorized to participate in these field trips.
- I understand that participation in this recreational program involves the risk of injury. These risks include but are not limited to collision with other participants, being hit by a ball or bat, tripping or falling, contact with other participants that may have infections (communicable diseases), physical exertion, or other accidents. I further understand that before participating in this or any program I should consult a physician for advice. By signing this form, I acknowledge all risk of injury and death and affirm that I am willing to assume responsibility should injury or death result from them. I also agree to follow all rules and procedures of the program and to follow reasonable instructions of the teacher and supervisors of the program. Furthermore, in return for the opportunity to participate in this program, I agree for myself, and for my heirs, assigns, executors and administrators, to waive any legal rights I may have to seek payment or damages resulting from injuries or death. I understand that the Town of Garner provides no insurance coverage.

I have read and understand all the policies and waivers stated above.

Parent/Guardian Signature

Date

