

Town of Halfmoon Summer Camp Registration

Name (Last, First) List in Age Order	Grade Entering in Fall	D.O.B.	Age	Sex (M or F)	√ If First Year in Program	Ethnicity (Please circle)
						Caucasian
						Black
						Asian
						Hispanic
						American Indian
						Other

*****CHILD WILL REMAIN WITH THIS GRADE ALL SUMMER – NO CHANGES ALLOWED******

Mailing Address _____ City _____ Zip _____

GUARDIAN INFORMATION

Legal Guardian # 1 (Required):

Guardian's Name: _____

Relationship To Child: _____

Ph #1: _____

Ph # 2: _____

Ph # 3: _____

Legal Guardian # 2 (Optional)

Guardian's Name: _____

Relationship To Child: _____

Ph #1: _____

Ph # 2: _____

Ph # 3: _____

Emergency Contact (Required): * MUST Be Local & Different From Guardian Listed Above!! *****

Name (S): _____

Relationship (S): _____

Ph # 1: _____

Ph # 2: _____

Ph # 3: _____

3 Authorized Pick Ups (not listed above):

Any additional authorized person(s) must be submitted in writing before we allow pick up from camp.

Name: _____

Address: _____

Relationship: _____

Age: _____

Name: _____

Address: _____

Relationship: _____

Age: _____

Name: _____

Address: _____

Relationship: _____

Age: _____

*** Bus Information is for a staff member to complete, please leave BLANK ***

AM Stop	PM Stop

Bus Driver's Initials _____

MEDICAL INFORMATION

***** Please Complete One Section Per Child *****

Below please indicate Child's Name along with any serious limitations, medical problems, allergies, current medications or any special situations our staff should know.

Child's Name	
Child's Physician and Phone Number	
Medications / Limitations	

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Medications / Limitations	

Any child bringing medication to camp must have a written physician's note filled with the specifying medication, reason for it's use, dosage, frequency, how it is administered, possible side effects, etc.

Again this year – complete Medical Form (given out at the registration counter) for any medication to be taken.

RECREATION STATEMENT

All sections must be completed in order to participate in the Town of Halfmoon Program

*** * Authorized Participation * ***

I, _____ parent / guardian of _____ certify that my child / children can participate in the 2010 Summer Recreation Program with the Town of Halfmoon. I further agree that if he / she becomes injured, the Town of Halfmoon and the Town of Halfmoon Recreation Department, through it's servants, officers, employees, or agents, may obtain emergency medical treatment / and transportation as deemed necessary by them to provide individual safety and well being. I further understand that the Town of Halfmoon will first attempt to contact me at the numbers listed on the registration form to obtain consent for treatment if the conditions and time permits.

*** * Waiver Statement * ***

The undersigned states that he/she understands that the Town of Halfmoon is not and shall not be responsible for or liable for any illness, injury to person or damage to property resulting from the program, activities occurring during the program and/ or transportation during the program, and the undersigned hereby releases and holds harmless the said Town of Halfmoon from all claims of any kind that the undersigned or his/her heirs, executors, administrators, or assigns may have either individually or as a parent and natural guardian for any claim that has resulted from the child's participation in the said program. Also, the undersigned waives any and all claims that he/she alleges or his/her heirs, executors, administrators, or assigned may have or claim to have resulting from a photograph (black/white or color) or video taken of said person while participating in the program.

*** * Indemnification Waiver * ***

I, _____, hereby agree to indemnify and hold the Town of Halfmoon, it's employees, servants, officers and agents free and harmless from and against any and all losses, liabilities, causes of action, all other types of claims of every kind and character arising out of, relating to, and occurring either directly out of the use of any or all of the Halfmoon facilities, parks, municipal buildings, streets, highway or other lands by the undersigned either as individuals / parents of minor children or as member of a group or as result of any acts and or omissions including negligence by the Town of Halfmoon, it's officers, servants, employees, and agents. I further agree to investigate, handle, respond to, provide defense for and defend any such cause of action, loss or other claims at my sole expense and agree to bear all other costs and expenses related there to.

*** I Have Read & Understand The Registration, Authorized Participation And Waiver Statement and Indemnification Waiver.** I understand that if any clause, sentence, paragraph, section or part of the Recreation Statement is judged by any court of competent jurisdiction to be invalid, such judgment shall not affect, impair or invalidate the remainder thereof, but shall be confined in its operation to the clause, sentence, paragraph, section or part there of directly involved in the controversy in which such judgment shall have rendered.

This _____ Day Of _____, 2010 (Registration Invalid Without Signature)

Signature

Printed Name

Please INITIAL next to each sentence to acknowledge

1. _____ I have received a brochure / parent handbook and have read and acknowledge the policies of the Halfmoon Recreation Program
2. _____ I will explain the rules carefully to each child and will prepare them for a safe and enjoyable summer with Halfmoon Recreation and understand that if any inappropriate behavior is displayed, my child (ren) will be dismissed from the program and no fees will be refunded.
3. _____ The included Medical information, Medications / Limitations, and Immunization Records are all up to date, true and exact.
4. _____ Dates of operation: Monday, June 28th – Friday August 6th closed Monday, July 5th.
5. _____ All field trip money will be turned in on **WEDNESDAYS** – NO EXCEPTIONS!!!
6. _____ I acknowledge that after June 11th, no switching of grade groups will be allowed. I also acknowledge that I need to submit a written note asking for child to be switched.
7. _____ I acknowledge that PM transportation runs will NOT be provided for any Big Trip held on Wednesdays. I will need to pick my child up from the Pavilion, I will provide a photo ID and I acknowledge that I will have to sign them out from camp. Also I acknowledge that if I would like any other persons to pick up my child from any trips that I have listed them as an authorized person on the front of this packet or I will send in a note prior to the trip allowing such person to pick up my child and I will make sure they provide a photo ID when picking up my child. I understand that unless a person is listed on the front of this registration packet or a note is send in, my child will not be permitted to go home with someone besides his/her legal guardians.
8. _____ I acknowledge that Halfmoon Recreation is required to transport my child (ren) to and from all trips and lessons. I further acknowledge that I will not be able to drop off/pick up my child (ren) from any trips or lessons.
9. _____ I acknowledge that if I decide to utilize the 6-week permission slip it can only be used one time and changes cannot occur to it once I have submitted it. I further acknowledge that the due date for the 6 week permission slip, lessons and week #1 permission slips are due by June 11th.
10. _____ I acknowledge that if my child is a 1st – 3rd grader that I will wait with my child at the bus stop in the morning and will be at their stop in the afternoon to pick him/her up.
11. _____ I acknowledge that if my child is a 4th – 6th grader I will wait with my child at the bus stop in the morning and will be at their stop in the afternoon to pick him/her up unless I sign the waiver below.
12. _____ I acknowledge that if my child is a 7th – 10th grader that I am *not* required to wait with my child at the bus stop in the morning or be at their stop in the afternoon to pick him/her up.

For Grades 4th – 6th only: My child has my permission to walk home from the bus stop without waiting for me to pick them up.

Parent Signature