

# Ashford Summer Camp

July 11th – July 15th, 2022

## REGISTRATION FORM

### PARTICIPANT INFORMATION

Please type or print legibly.

Ashford Summer Camp July 11<sup>th</sup> -15<sup>th</sup>

Full Day 8:30-4:30  Half Day 8:30-12:00

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Gender:  Female  Male Age: \_\_\_\_\_

Grade attended year 2021-2022: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ cell: \_\_\_\_\_

Parent email: \_\_\_\_\_

(Include area code with telephone)

Mother's name: \_\_\_\_\_ Father's name: \_\_\_\_\_

Mother's day phone: \_\_\_\_\_ Father's day phone: \_\_\_\_\_

Mother's cell: \_\_\_\_\_ Father's cell: \_\_\_\_\_

Person's Authorized to pick up child: \_\_\_\_\_

Other Dismissal Arrangements \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Specify any of your child's health problems: \_\_\_\_\_

Is your child on any medication? No Yes If so, please specify: \_\_\_\_\_

**Lunch/Snack:** You must send your child/ren with lunch and snack each day. Please make sure your child's lunch does not need refrigeration or has an ice pack as we cannot guarantee refrigeration each day. Your child will also need a morning snack. An afternoon treat/snack will be provided.

**Payments:** Tuition may be paid by cash or by check. Make the check payable to: **Town of Ashford**

#### Camp Fees:

\*Full day of camp \$200/week \*Additional siblings \$150/week \*Half day of camp \$100/week

**Registration fee:** Registration form and ½ the fee is due by June 24<sup>th</sup>. We must have a minimum of 20 children signed up, by the above deadline for camp to run. The remaining balance is due by 7/1/22 if camp runs, if not registration fees will be returned.

**Contact Information**

For more information, contact Sherry York  
860-487-4409 or Email: [syork@ashfordtownhall.org](mailto:syork@ashfordtownhall.org)

We are delighted to announce that Teacher, Stephen Caldwell will be our Assistant Camp Director!

I understand that the registration fee is due by June 24th. We do not provide make-ups or refunds for any days missed for any reason. Please do your best to come to Ashford Summer camp every day.

**SIGNATURE OF PARENT/GUARDIAN** \_\_\_\_\_ **DATE** \_\_\_\_\_

**DROP OFF AND PICK UP TIMES**

Drop off time:

- 8:30 – 9:00 AM for full day campers

Pick up time:

- 4:00 -4:30PM for full day campers
- 12:00PM for half day campers
- A fee will be charged to parents who pick up late after a 10 minute courtesy wait.

**REQUIRES PARENT'S SIGNATURE:**

You have our permission, in the event of an emergency and in case we are unavailable, to authorize any physician, nurse practitioner or medical personnel to examine, interview, test and if necessary, treat my child \_\_\_\_\_ as they may deem advisable.

Parent/Legal guardian name \_\_\_\_\_ Date \_\_\_\_\_

Student Allergies \_\_\_\_\_

Student Medical Problems \_\_\_\_\_

Doctor \_\_\_\_\_ Phone number \_\_\_\_\_

Insurance carrier \_\_\_\_\_ Policy number \_\_\_\_\_

**PARENT STATEMENT**

Participating at **Ashford Summer Camp** will include activities which may include risks such as, but not limited to, physical exertion, injury, strains, falls, and contact with other participants. In consideration of my child being allowed to participate in this program, I hereby expressly assume all risks, including serious personal injury, arising out of my child's participation in the camp.

I agree, for myself, my family, my heirs, executors and administrators, to not sue and to release and hold harmless the Town of Ashford, Ashford Youth Services Bureau, Ashford Parks and Recreation, and their affiliates, officers, directors, volunteers, and employees from all liability, claims, demands, and causes of action whatsoever, arising out of my child's participation in this camp, whether it results from the negligence of any of the above named persons or entities, or from any other cause. Furthermore, I authorize the use of my child's image and voice as may be captured by photograph or recording during my participation in this camp.

The foregoing release and indemnification agreement shall be as broad and inclusive as is permitted by State law. If any portion of it is held invalid, the balance shall continue in full force and effect. I have read, understand and agree to the terms of this Agreement.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

## Items to bring to camp

Lunch

Snack

Water bottle

Sneakers

Swim suit

Towel

Flip Flops or water shoes (for swimming days only)

Change of clothes (just in case)

Sunscreen (please put on before coming to camp as well)

Hat/sunglasses

Bug spray

## Things to leave at home

Electronics

Phones

Toys that can be break or you would be sad if lost/damaged