Ashford Summer Camp

July 15th – July 19th Full Day 8:30-4:30, 2024

REGISTRATION FORM

Please type or print legibly.		
First Name: _		
e Age:		
Grade attended year 2023-2024:		
State:	_ Postal/Zip Code:	
Father's nam	e:	
Father's day phone:_		
Father's cell:		
ild:		_
		_
Relationship:	Phone:	
problems:		
No Yes If so, please specify:		_
	First Name: Age: 24: Father's nam Father's day phone: Father's cell: Relationship: problems: problems:	

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:

- \$200/week
- Additional siblings \$175/week

Registration fee: Registration and half the total fee is due by 7/1/24, if there are not 20 children signed up, camp will not run, and registration fees will be returned. The remaining balance is due by 7/8/24.

Contact Information

For more information, contact Sherry York 860-487-4409, (cell during camp 860-559-4971)

Emails: syork@ashfordtownhall.org

	by July 1st. We do not provide make-ups or refunds for any days to come to Ashford Summer camp every day.
SIGNATURE OF PARENT/GUARDIAN _	DATE
DROP OFF AND PICK UP TIMES Drop off time: • 8:30 AM- 9:00 AM Pavilion at Ashfo	rd Memorial Park
Pick up time: • 4:00- 4:30 PM Pompey Hollow Park • A fee will be charged to parents who	o pick up late after a 10 minute courtesy wait.
physician, nurse practitioner or medical per	n emergency and in case we are unavailable, to authorize any sonnel to examine, interview, test and if necessary, treat my as they may deem advisable.
Parent/Legal guardian name	Date
Student Allergies	
Student Medical Problems	
Doctor	Phone number
Insurance carrier	_Policy number
PARENT STATEMENT	
physical exertion, injury, strains, falls, and conta participate in this program, I hereby expressly a	nclude activities which may include risks such as, but not limited to, act with other participants. In consideration of my child being allowed to ssume all risks, including serious personal injury, arising out of my child's I to come and pick up a camper who is unruly, unsafe, or displaying
Town of Ashford, Ashford Youth Services Burea volunteers, and employees from all liability, claim participation in this camp, whether it results from	ors and administrators, to not sue and to release and hold harmless the u, Ashford Parks and Recreation, and their affiliates, officers, directors, ms, demands, and causes of action whatsoever, arising out of my child's m the negligence of any of the above named persons or entities, or from use of my child's image and voice as may be captured by photograph or
	ement shall be as broad and inclusive as is permitted by State law. If any ntinue in full force and effect. I have read, understand, and agree to the
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 break or you would be sad if lost/damaged