

Camp Pineville ♦ 2017 Summer Camp ♦ Registration Form

Please Print ♦ One Form Per Child

Camper's Name _____ Age _____ DOB _____ Gender M F

Address _____

T-shirt size: (Circle One) Youth S Youth M Youth L
 Youth XL Adult Med. Adult Large

Contact Information

Mother/Guardian Information

Name _____

Address (if different from camper's) _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

E-Mail address _____

Father/Guardian Information

Name _____

Address (if different from camper's) _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

E-Mail address _____

EMERGENCY CALL AND APPROVED PICK-UP LIST:

1. Name _____ Relation _____ Phone _____

2. Name _____ Relation _____ Phone _____

Camp Selection: Circle the appropriate dates and insert appropriate fee

Week	Dates	Resident Fee	Non-Resident Fee	Per Week Total
1	June 19 – 23	\$70/\$60 – 2 nd child	\$90/\$80 – 2 nd child	\$
2	June 26 – 30	\$70/\$60 – 2 nd child	\$90/\$80 – 2 nd child	\$
3	July 3 – 7 (NO CAMP ON July 4 th)	\$70/\$60 – 2 nd child	\$90/\$80 – 2 nd child	\$
4	July 10 – 14	\$70/\$60 – 2 nd child	\$90/\$80 – 2 nd child	\$
5	July 17 – 21	\$70/\$60 – 2 nd child	\$90/\$80 – 2 nd child	\$
6	July 24 – 28	\$70/\$60 – 2 nd child	\$90/\$80 – 2 nd child	\$
7	July 31 – Aug. 4	\$70/\$60 – 2 nd child	\$90/\$80 – 2 nd child	\$
8	Aug. 7 - 11	\$70/\$60 – 2 nd child	\$90/\$80 – 2 nd child	\$
	Registration Fee			\$ 10.00
	Total			\$
	Deposit (1/2 total) due @ Reg.			\$
	Balance due by June 9			\$

Release Section

1. If parents of the camper are divorced, please list the name of who has legal custody of the child named on this application

2. May the non-custodial parent pick up the child named on the application? Yes No

3. If yes, please list them above. If no, legal documentation may be required.

The child named on this application will be released only to the people named as parents or emergency contacts on this application. **Please be advised that identification will be required.**

Additional Information

Please indicate any special needs that your child may have that would affect his/her participation in planned Day Camp activities. List any additional comments you feel would be helpful for our staff to know about your child.

Allergies (State Allergy, Reaction and Treatment)

Consent and Release

I _____ hereby grant permission for the participant to take part in the Summer Day Camp program, which is sponsored by the Pineville Parks & Recreation Dept. I also agree, on behalf of myself and the participant, not to make any claims or demands of any kind against the Town of Pineville or any of its employees or agents for any loss or injury that the participant might sustain while engaged in the Summer Day Camp program including transportation for any activities.

◆ I authorize such physician or medical staff as the Pineville Park & Recreation Department may designate to carry out any minor medical/surgical treatment and/or medication necessary, or to take the participant to the nearest emergency facility, and I further authorize its medial staff to provide any treatment decided necessary for the will-being of the participant.

◆ I also agree that photographs of the participant may be published for the purpose of publicizing and promoting programs operated and /or sponsored by the Pineville Parks & Recreation Department.

◆ All written requests for refunds must be submitted by June 9, 2017, and a 10 % administrative fee will be deducted.

Signature of Parent/Guardian _____ Date _____

Camp Pineville ♦ 2016 After Camp Care ♦ Registration Form
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Week	Dates	Resident Fee	Non-Resident Fee	Per Week Total
1	June 19 -23	\$30	\$40	\$
2	June 26 – 30	\$30	\$40	\$
3	July 3 – 7 (no camp on July 4 th)	\$30	\$40	\$
4	July 10 – 14	\$30	\$40	\$
5	July 17 – 21	\$30	\$40	\$
6	July 24 - 28	\$30	\$40	\$
7	July 31 – Aug. 4	\$30	\$40	\$
8	Aug. 7 - 11	\$30	\$40	\$
	Total			
	Deposit (1/2 total) due @ Reg.			\$
	Balance due by June 9			\$