

# Tiftarea YMCA



# School's Out Camp

## 2010-2011 Registration Form

- Member: \$15 per day  
 Non-Member: \$20 per day

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Grade: \_\_\_\_\_ School: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Family E-Mail Address: \_\_\_\_\_

Mom: \_\_\_\_\_ Employer: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Dad: \_\_\_\_\_ Employer: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_ Relation to Child: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relation to Child: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Medical Information

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Does your child have any allergies? \_\_\_\_\_ if yes, please specify by list them below.

\_\_\_\_\_

Does your child have any other medical conditions that our staff needs to be made aware of? \_\_\_\_\_ if yes, please list them below.

\_\_\_\_\_

\_\_\_\_\_

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

(Please complete the backside of this registration form.)

Please list the names of the people who you, the parents or guardians, authorize to pick up your children from the Tiftarea YMCA. Please include both parents on the list. The YMCA will never release a child to anyone who is not listed on this form. Persons whom YMCA staff is unfamiliar with (and on this list) must present a picture ID before the child will be released.

_____	_____	_____
_____	_____	_____
_____	_____	_____

**Statement of Consent**

- ✓ I/We understand there are inherent risks involved in athletic and sporting events, and therefore agree to hold harmless the Tiftarea YMCA, its staff and volunteers, from liability in the event of injury due to my child's participation in the School's Out Day Camp Program.
- ✓ I/We understand that the Tiftarea YMCA will not be held liable for lost or stolen items while members and/or program participants while we are using the Tiftarea YMCA facilities, or are on the Tiftarea YMCA premises.
- ✓ I/We give my/our permission for the Tiftarea YMCA, without obligation to me/us, to use any photographs, film footage, or tape recording, which may include my/our child's image or voice for the purpose of promoting or interpreting Tiftarea YMCA programs.
- ✓ I/We give permission for my child, listed on this application, to participate in any field trip taken by the Tiftarea YMCA. I understand that field trips require travel away from the Tiftarea YMCA facility and authorize such travel.
- ✓ In the event of injury or illness to my/our child while in the care of the Tiftarea YMCA Schools Out Day Camp Program, I/We grant permission for the Tiftarea YMCA, its employees or agents, to take whatever steps or action deemed necessary for the medical or dental welfare of my/our child without liability or financial responsibility for the actions taken. I/We have noted any special medical instruction or allergies previous in this registration concerning my/our child that I/we deem necessary.
- ✓ I/We, the undersigned, certify that I/we have read and fully understand the contents and purposes of this form.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**2010-2011 School's Out Camp Dates**  
**Please check all that apply!**

- September 6
- October 11
- October 15 & 18
- November 22-26
- December 20-24
- December 27-31
- January 3
- January 17
- February 21
- March 7
- March 21-25
- March 28 – April 1
- April 22 & 25
- May 9

**2010-2011 School's Out Camp Dates HALF DAYS**  
**Please check all that apply!**

- September 3
- October 8
- November 19
- December 15-17
- January 14
- February 18
- March 4
- May 6
- May 13
- May 18-20

**Please note that half days will begin at noon and close at 6:00 pm.**

**Additional Comments or Concerns:**