

Summer Day Camp 2020

Camper Application

Please print clearly. All communication will be done via email.

Camper Information

Name of Child _____ Gender: M or F
Date of Birth _____ Age _____ Grade (entering in fall) _____
Address _____ City _____ State _____ Zip _____
Primary Phone # _____ School _____
T-Shirt Size _____ (Youth S-XL, Adult S-XL)

Parent/Guardian Information

Parent's Name _____	Parent's Name _____
Place of Employment _____	Place of Employment _____
Work Phone _____	Work Phone _____
Cell Phone _____	Cell Phone _____
Email address _____	Email address _____

Health Information

Physician to be called in an emergency: Name _____ Phone _____
Health Insurance Co. _____ Number _____

If parent is unavailable, in emergency please contact:

Name _____ Phone _____

Please indicate any physical or medical conditions of this child that should be brought to the attention of the staff _____

Please include a copy of your child's immunization record with registration

Child will not be allowed to participate without proof of immunizations on file.

To the best of my knowledge, the above is accurate and correct and he/she has had a physical exam within the last 12 months by a physician. In the event of the camps inability to promptly locate a person designated to be notified in case of an emergency, measures will be taken as deemed appropriate.

Parent/Guardian Signature _____

Boys & Girls Club of Elma, Marilla & Wales

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Name of Child _____ Phone _____

Please check the Session(s) or circle days your child will be attending

Club Members: \$35/day

Non-Members: \$45/day

<u>Week</u>	<u>Dates</u>	<u>Days Attending</u>	<u>Total</u>	<u>Registration Deadline</u>
O Week 1	July 6 – July 10	M T W Th F	\$ _____	June 26 th
O Week 2	July 13 – July 17	M T W Th F	\$ _____	June 26 th
O Week 3	July 20 – July 24	M T W Th F	\$ _____	June 26 th
O Week 4	July 27 – July 31	M T W Th F	\$ _____	June 26 th
O Week 5	Aug 3 – Aug 7	M T W Th F	\$ _____	June 26 th
O Week 6	Aug 10 – Aug 14	M T W Th F	\$ _____	June 26 th
O Week 7	Aug 17 – Aug 21	M T W Th F	\$ _____	June 26 th

Any changes to schedules are required, in writing, 2 weeks in advance.
Once registered no refunds will be given for absences, dismissals, or withdrawals
before the end of the session.

Registrations received after specified deadline may not be accepted.

Date Received: _____ Director Signature: _____