

Camp Tunz-A-Fun 2009 Registration Form

This form is two sided, signatures are required on both sides.

Summer Day Camp Ages 4+

Camper Information

Last Name: _____ First Name _____ DOB: _____ Grade Attending September 09: _____

Address _____ City _____ State: _____ Zip: _____ Home Phone: _____

Mothers Name: _____ Work Phone _____ Cell Phone: _____

Fathers Name: _____ Work Phone _____ Cell Phone: _____

Please list below any additional people authorized to pick up your child

Name: _____ Relationship: _____ Phone _____

Name: _____ Relationship: _____ Phone _____

Name: _____ Relationship: _____ Phone _____

Please note: These are the only people to whom we will release your child without prior written authorization

email address: _____ Email will be used for confirmation purposes and camp updates.

Please check requested camp days

Summer Day Camp	Full Week M to F		Three Day M-W-F		Two Day Tu-Th	
	Full Day	Half Day	Full Day	Half Day	Full Day	Half Day
	1. June 22 to June 26 Ball Bonanza					
2. June 29 to July 3 Planet Green						
3. July 6 to July 10 Christmas in July						
4. July 13 to July 17 Mad Science						
5. July 20 to July 24 Who's Got Talent?...We do!						
6. July 27 to July 31 Pixar Picks						
7. August 3 to August 7 Construction Production						
8. August 10 to August 14 Bugs, Slugs and Spiders						
9. August 17 to August 21 Lions, Tigers and Bears...Oh My!						
10. August 24 to August 28 Dragons, Knights and Castles.						

Extended care

Week	Please mark am, pm or both				
	Mon	Tue	Wed	Thurs	Fri
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

am care
7:30 to 8:15
pm care
4:30 to 5:30

• Three day Summer Day Camp will be held Monday, Wednesday and Friday. Two day Summer Day Camp will be Tuesday and Thursday. NO EXCEPTIONS

• We do not provide refunds or credits for unused or cancelled camp days. Exceptions may be made in the case of illness, providing we receive at least twenty four (24) hours notice. A doctors note may be required. Illness related make up days are not guaranteed.

• The completed registration form must accompany a deposit of 50% per week The balance is due by June 12, 2009. Changes to the original registration must be made in writing and will result in the loss of the deposit for that week. Payment plans can be arranged. Please see office personel for more information.

• A completed camp medical must be on file before your child's first day of camp. Your child will not participate without it. Refunds will not be made for those missing camp due to lack of necessary paper work. Please make arrangements for this well in advance, as the medical must be signed by the child's physician. For those requiring epi-pen or inhalers please see our web site for specific polices pertaining to their use.

• We make every possible effort to provide the daily swim lessons and free swim time, however if swimming must be cancelled due to unsafe conditions we do not provide make-up's.

• Please arrive on time for camp. Late arrivals are disruptive to the WHOLE camp. Late comers will not be admitted to swim class, if their group's session has started.

• Extended care begins at 7:30 and end at 5:30 sharp. If you are late, there will be an extra charge of \$5.00 per fifteen minute block (or any part thereof).

I have read and understand the above policies. Parent Signature: _____

About My child

Please use this space to tell us about your child. Please include allergies, activity limitations, phobias/fears, motivators etc. _____

I recognize that potentially severe injuries, including but not limited to permanent paralysis or death can occur in sports or activities involving height or motion, including but not limited to gymnastics, swimming, tumbling, fitness, trampoline, cheerleading, dance, ball sports and martial arts. Being fully aware of these dangers, I voluntarily consent for my child/children to participate in all Action Kids Athletics LLC programs and accept all risks associated with that participation.

Initial

In consideration for allowing my child to use these facilities, I, on my own behalf and the behalf of my child and our respective heirs, administrators, executors and successors, hereby forever release and covenant not to sue Action Kids Athletics LLC, its officers, directors, share holders, employees, volunteers and all others associated with the corporation(s) from all liability for any and all damages and injuries suffered by my child or myself while under all instruction, supervision, or control of Action Kids Athletics LLC. Initial

I also understand that Action Kids Athletics LLC retains the rights to use any photographs, videotapes, motion picture recordings or any other record of events for publicity, advertising, or any legitimate purposes. Initial

In the event of an accident or emergency I hereby authorize my child(ren) to be transported to a hospital for medical treatment and I hold Action Kids Athletics LLC and it's representatives harmless in the execution of such.

I hereby agree to individually provide for all present and possible future medical expenses which may be incurred by my child as a result of any injury sustained while participating at or for Action Kids Athletics LLC. Initial

I have read and understand this acknowledgment of risk and waiver of liability and I voluntarily affix my name in agreement.

Parent Signature: _____ Date: _____

Price List	Full Day	Half Day
Five day week	\$230	\$160
Three day week	\$150	\$110
Two day week	\$105	\$75

All campers must be members.
Memberships are \$35

Before Care \$3.50 per day
After Care \$5.00 per day
Before and After Care \$8.00 per day

Camp Hours

Full day	8:15 to 4:30
Half Day	8:15 to 12:00 noon
Before Care	7:30 to 8:15
After Care	4:30 to 5:30

What to Bring

snacks
water bottle
bathing suit
towel
lunch*

*1/2 day campers do not require a lunch

sneakers (Sandals are not acceptable)