



# Summer Camp Registration Form

Camper Name \_\_\_\_\_ Nickname \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Grade Entering Fall 2018 \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Municipality \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Employer Name & Phone \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Employer Name & Phone \_\_\_\_\_

**T-Shirt Size:** Youth  Small  Medium  Large  XLarge  
 Adult  Small  Medium  Large  XLarge

**Camps run from 9:00am-12:00pm Monday-Friday \* No camp week of July 4th \* Camp ages are 5-14  
 Camp Fee is \$55 per week plus \$10 supply fee for some camps (noted below)  
 Full payment due 3 weeks prior to start of camp \* NO REFUNDS after 2 weeks prior to start of camp  
 Camps may be cancelled due to low registration or lack of instructor \* Some camps have limited spaces  
 Cooking Camp will be held at Trinity Lutheran Church, East Berlin**

Indicate camps your child will be attending (choose only one per week):

June 10-14	<input type="radio"/> Soccer 9+	\$55	<input type="radio"/> Candy Making	\$65	<input type="radio"/> Kinder Ready 3-5	\$55
June 17-21	<input type="radio"/> Basketball 9+	\$55	<input type="radio"/> Dance	\$55	<input type="radio"/> Arts & Crafts	\$65
June 24-28	<input type="radio"/> Volleyball	\$55	<input type="radio"/> Cooking 5-8	\$65	<input type="radio"/> Variety 3-5	\$65
	<input type="radio"/> Outdoor Games	\$55				
July 8-12	<input type="radio"/> Gymnastics 3-5	\$55	<input type="radio"/> Variety	\$65	<input type="radio"/> Lego	\$55
July 15-19	<input type="radio"/> Gymnastics	\$55	<input type="radio"/> Basketball 5-8	\$55	<input type="radio"/> Princess 4-6	\$65
July 22-26	<input type="radio"/> Soccer 5-8	\$55	<input type="radio"/> Cooking 9+	\$65	<input type="radio"/> Theatre	\$55
July 29- Aug 2	<input type="radio"/> Outdoor Games	\$55	<input type="radio"/> Candy Making	\$65	<input type="radio"/> Cheerleading	\$55

### Agreement Statement

- I agree to inform EBACC staff in writing of any custody limitations regarding my child.
- I agree to provide written permission to EBACC if I choose to allow my child to be released to any person other those listed as approved for pick up and said individuals will agree to provide ID to verify validity.
- I authorize representatives of EBACC to give consent for emergency medical care of my child while attending summer camp. I also agree to allow camp staff to administer minor first aid treatment. I understand EBACC will not provide or dispense any type of medication including sun lotion or bug repellent; I must provide all medications.
- I give permission for my child to participate in any walking trips with EBACC staff and group.
- I give permission for my child to be photographed and/or filmed for use in future EBACC advertising and social media unless a Right of Refusal Waiver is completed. Please request one from the Camp Director.
- I understand and agree to allow my child to participate in all activities and hold harmless EBACC staff, volunteers, and EBACC for any injuries sustained by my child during participation in programs. I waive all rights to claim damages against EBACC and understand all programs are use at your own risk.
- I have read and agree with the Disciplinary Policy as stated on the back of this form.

I have read and fully understand the above statements and hereby agree to it by signing my name and dating this document.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

**ADDITIONAL CAMPER INFORMATION NEEDED**

**Please check all of the following that apply.** Use a separate paper if necessary.

Has medical condition(s) or allergies?       Yes    No    If yes, please describe and advise what special care is required.

Takes medication?       Yes    No    If yes, please list medication and reason for taking.

Are there any additional special needs we should be aware of?       Yes    No    If yes, please describe.

**Pick-up information**

***Please list all adults permitted to pick up your child, including parents or primary caregivers.***

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
Address \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
Address \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
Address \_\_\_\_\_

**Emergency Contacts**

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
Address \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
Address \_\_\_\_\_

**EBACC Summer Camp Disciplinary Policy**

If a child speaks and/or acts inappropriately toward instructors and/or fellow campers, the following steps will be followed:

First occurrence: Child will be spoken to privately and reminded of the consequences of further inappropriate behavior.

Second occurrence: Child will be spoken to privately. The adult picking up the child at the end of the camp day will be informed about the child’s inappropriate actions and be told that on the next occurrence he/she will not be allowed to stay in camp the rest of the week. This second occurrence might even be in the same day.

Third occurrence: Child may not return to camp. There will be no refund of the camp fees.

OFFICE USE ONLY

Date	Amount Paid	Cash/Check/Credit Card	Initials