



# Summer Day Camp

## Registration Form



**ASK ME HOW YOU CAN SAVE \$100!**

Registration & payment for each week of Camp is due no later than close of business the Wednesday before your selected camp week begins. A Rush Registration Fee of \$20 will be applied if registration is received, space is available and approved after Wednesday.

### Registration Form PLEASE PRINT Legibly (Please complete one per child)

Child's Name: \_\_\_\_\_ Child's Date of Birth \_\_\_\_\_

Parent/Guardian(s) Name(s): \_\_\_\_\_

(A) \_\_\_\_\_ Primary Phone # \_\_\_\_\_

(B) \_\_\_\_\_ Primary Phone # \_\_\_\_\_

Parent/Guardian(s) Date of Birth:(A) \_\_\_\_\_ (B) \_\_\_\_\_

Child's Primary Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian(s) Work Phone # (A) \_\_\_\_\_ Work Phone # (B) \_\_\_\_\_

Parent/Guardian(s) Email address (A) \_\_\_\_\_ Email address (B) \_\_\_\_\_

Child's School: \_\_\_\_\_ Grade: \_\_\_\_\_

Session	Camp Dates	Theme	Paid
<input type="radio"/> Week 1	May 31-June 3	Going Green	<input type="checkbox"/>
<input type="radio"/> Week 2	June 6 – June 10	Ooey, Gooley, Pooey	<input type="checkbox"/>
<input type="radio"/> Week 3	June 13 – June 17	Outdoor Adventures	<input type="checkbox"/>
<input type="radio"/> Week 4	June 21 – June 24	Summer Safari	<input type="checkbox"/>
<input type="radio"/> Week 5	June 27- July 1	Party in the USA	<input type="checkbox"/>

Session	Camp Dates	Theme	Paid
<input type="radio"/> Week 6	July 5 – July 8	A Trip to Space	<input type="checkbox"/>
<input type="radio"/> Week 7	July 11 – July 15	S'Winter	<input type="checkbox"/>
<input type="radio"/> Week 8	July 18 – July 22	Tee-Rific!	<input type="checkbox"/>
<input type="radio"/> Week 9	July 25 – July 29	Gotta Catch Em' All	<input type="checkbox"/>
<input type="radio"/> Week 10	Aug. 1 – Aug. 5	Island Fiesta	<input type="checkbox"/>

**Check-in for camp daily begins at 8:30 AM CAMP HOURS 9 A.M. – 5 P.M.**  Register for Extended Care: AM & PM \$50 weekly  
 AM only Extended Care 7:30 AM – 8:30 AM/\$25 weekly  PM only Extended Care 5:00 – 6:00 PM/\$25 weekly  
**Daily Late Pick-up charge is \$10 per day.** Members 8 yrs. of age or older may stay in the Loft after camp hours.  
 NOTE: Space is limited; registration will be accepted on a first-come, first-served basis. Please refer to the page 3 for Refunds & Cancellation Policies.

### Special Bonus FREE Week 11

Vacation Bible School **“MAKE WAVES: What you do today can change the world around you!”**

**August 8 – 12 9 A.M. – 12:30 P.M.**

Sign your child up for this ½ day week as we learn together that because of JESUS, we can have confidence. During this ½ day week of camp, campers will learn important Bible truths. Through this, they will realize they can be “Changemakers” by doing good in the world. It will be a time of music, games, bible lessons, snacks and more. Lunch will be provided. Pickups will be immediately following lunch. There will be NO early drop-offs or late pick-ups for this week.

#### My child is (check one)

Ages:  6 years old  7-8 years old  9-10 years old  11-13 years old

My child has a membership:  YES  NO

Child's T-shirt Size: Youth size:  Small  Medium  Large **Adult size:**  Small  Medium  Large  X-Large

Purchase Extra T-shirts (cost \$10/shirt): Qty. \_\_\_\_\_ (One T-shirt is provided for each child who registers for camp).

#### Cost of Camp Per Week

- Member: \$150/week
- Addt'l Member Child: \$120/week
- Non-member: \$180/week
- Addt'l Non-member Child: \$150/week

**Initial each section below**

\_\_\_\_\_ **(initial) Liability Waiver**

I understand that use of the facilities and equipment at The Salvation Army Kroc Center may involve risk of bodily injury, property damage, or exposure to infectious disease and I agree to assume any such risks. I understand that it is up to me to consult physicians and other professionals to make sure that I can safely participate in activities and events at The Salvation Army Kroc Center. I also understand and agree that by signing this agreement, I am giving up my right (and/or the right of the minor(s) for whom I sign) to make any claim against The Salvation Army Kroc Center, its agents, employees and volunteers, including the right to sue them, for bodily injury, illness, property damage or any other loss that I might suffer while using The Salvation Army Kroc Center facilities and services, except as limited by law. If the Salvation Army has actual knowledge that an individual is a registered sex offender, such individual shall be denied access to the Ray and Joan Kroc Corps Community Center (RJKCCC). By signing this document, I represent to The Salvation Army, that neither I, nor anyone I am signing on the behalf of, are registered sex offenders in any legal jurisdiction and that furthermore, I have an affirmative duty to The Salvation Army to immediately disclose to The Salvation Army any change in registered sex offender status for myself or anyone I am signing for who seeks admittance at the RJKCCC.

**NOTICE**

In order to promote a safe and secure environment, The Salvation Army Kroc Center has placed video cameras in various locations. As part of our commitment to the safety of children and vulnerable persons, The Salvation Army Kroc Center reserves the right to consult public sources to determine whether any member or guest of any member poses an unreasonable risk of harm to its patrons, staff, or visitors.

\_\_\_\_\_ **(initial) Field Trip Consent**

I understand that, on occasion, camp activities may include short day trips off The Salvation Army Ray and Joan Kroc Community Center grounds. Therefore, I hereby permit my child to participate in The Salvation Army Kroc Center activities conducted off the campgrounds with adult supervision.

\_\_\_\_\_ **(initial) Photo/Video Consent**

I agree to allow The Salvation Army Kroc Center to use and publish - for advertising - any pictures or videos where the Camper (the minor child for whom I am signing) appears. (Pictures are only used to promote the Kroc Center.)

\_\_\_\_\_ **(initial) Acknowledgment of Kroc Center Code of Conduct (attached)**

I have read the Kroc Center Code of Conduct and have disclosed below all known behavioral issues that may disrupt or interfere with the ability of my child or other children to fully participate in Camp Kroc. I also acknowledge that a child's egregious violation of the Code of Conduct (or failure to properly disclose a child's known behavioral issues) may result in his or her removal from Camp Kroc.

\_\_\_\_\_ **(initial) Behavior and Rules**

I understand that the Kroc Center reserves the right to ask any child not to return to camp for continued inability to follow rules and/or behaviors that are dangerous to others.

Does your child have a behavior modification plan at school?    **YES**    **NO**

If so, please describe what works best or list any behaviors we need to be aware of to make Camp Kroc a positive experience for your child.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I HAVE CAREFULLY READ THIS ENTIRE PAGE AND FULLY UNDERSTAND AND AGREE WITH ITS CONTENTS. I AM AWARE THAT BY SIGNING THIS DOCUMENT, I AM GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE SALVATION ARMY.**

**I hereby certify that I have the authority to sign this document for the child identified on this Registration Form.**

**Parent or Legal Guardian's Name (PRINT):** \_\_\_\_\_

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

**NAME OF CAMPER:** \_\_\_\_\_

**\*All camp fees must be paid BEFORE the start date for your child to participate in camp.**

**PLEASE KEEP YOUR RECEIPTS FOR TAX PURPOSES**

## Health History Form:

The information provided below will assist our staff in providing the best care for your child. Please check if applicable or allergic.

- Diabetes       Asthma       Carries Epi-Pen  
 Epilepsy       Carries Inhaler       Behavioral Challenges  
 Penicillin       Insect Stings  
 Other \_\_\_\_\_

Name & purpose of any medication: \_\_\_\_\_  
\_\_\_\_\_

Known allergies: \_\_\_\_\_

**Please note that the Kroc Center is not able to store or administer medications of any kind. Campers are not allowed to bring medications to camp and self-medicate.**

Dietary Restrictions: \_\_\_\_\_

We do not provide a specialized lunch or snack. When a child has severe food allergies, we recommend a lunch from home. Please let us know if there are any restrictions due to food allergies or other food restrictions.

Restrictions on physical activity:  
\_\_\_\_\_  
\_\_\_\_\_

Please list anything else that may affect your child's experience at camp. (i.e.: moving to a new home, divorce):  
\_\_\_\_\_  
\_\_\_\_\_

I grant permission to The Salvation Army Kroc Center Staff to treat my child for minor cuts, scrapes, and bruises. If immediate medical attention is needed, or if an injury is severe, parents will be notified and Emergency Medical System (911) will be activated at the discretion of Club Kroc Staff.

**Parent Initials:** \_\_\_\_\_

I understand that the Kroc Center is not responsible for lost or stolen personal belongings. **Parent Initials:** \_\_\_\_\_

### Please assess your child's swimming abilities:

Swimming is an activity that all Summer Campers participate in. Providing us with an assessment of your child's current swimming abilities will provide camp counselors and aquatic staff a better way to monitor pool activity.

- Camper cannot swim       Camper is a beginner swimmer  
 Assisted swimming with flotation device only       Camper is able to swim without direct assistance

Full Name of Minor/Camper: Please PRINT \_\_\_\_\_

### **Emergency Contact & Pick Up Authorization**

*(We require 2 emergency contacts other than the legal guardian)*

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Date of Birth \_\_\_\_\_

Phone # (\_\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Date of Birth \_\_\_\_\_

Phone # (\_\_\_\_\_) \_\_\_\_\_

People **NOT AUTHORIZED** to pick up my student:

Name \_\_\_\_\_

Name \_\_\_\_\_

Family Doctor \_\_\_\_\_

Doctor's Phone (\_\_\_\_\_) \_\_\_\_\_

Doctor's Address \_\_\_\_\_

### **Refund & Cancellation Policy**

Cancellations received before May 1 will be refunded minus a 15% processing fee. Cancellations after May 1 and up to 2-weeks prior to the start date of the week your child is registered in camp will be issued a 50% refund after the 15% processing fee has been deducted. No refunds are available for cancellations within 2 weeks of the start date or for any day(s) your child is absent during a week they are actively participating in. Please note that any questions should be directed to the Youth & Education Manager.