

2015 Summer Camp Registration Form

Camp Choice

Spring Season Theme

- Week 1 - June 08 to June 12
 Week 2 - June 15 to June 19
 Week 3 - June 22 to June 26

Summer Season Theme

- Week 4 - June 29 to July 02
 Week 5 - July 06 to July 10
 Week 6 - July 13 to July 17

Fall Season Theme

- Week 7 - July 20 to July 24
 Week 8 - July 27 to July 31

Winter Season Theme

- Week 9 - August 03 to August 07
 Week 10 - August 10 to August 14

Time

- Full day 9:00 am to 4:00 pm Week _____
 Morning 9:00 am to 12:00 pm Week _____
 Afternoon 1:00 am to 4:00 pm Week _____

Child Information

Child Name

_____ _____ _____ _____ _____ Female
First Name Last Name Age Grade Gender Male

Address

Street Address

Street Address Line 2

City _____
State / Province

Postal / Zip Code _____
Country United States

Parent / Guardian Information

Name

_____ _____
First Name Last Name

Home Number

_____ _____
Area Code Phone Number

Cell Number

_____ _____
Area Code Phone Number

E-mail

Emergency Contact's Name

1.- Emergency Contact's Name

Relationship

_____ _____ _____
First Name Last Name

Phone Number

_____ _____
Area Code Phone Number

2.- Emergency Contact's Name

Relationship

_____ _____ _____
First Name Last Name

Phone Number

_____ Area Code _____ Phone Number _____

Insurance Information

Health Insurance Co. _____ Phone number _____
Policy # _____
Group # _____

(Camp Insurance is secondary to personal health insurance)

Medical Information

1.-Does The child have any allergies, chronic illness, or medical conditions? _____
If yes, Please describe. _____

Child's Physician _____ Phone _____

Informed Consent and Acknowledgement

I, _____, parent/legal guardian of _____, give my approval for my child's participation in any activities prepared by **Kiddos Ranch** during the selected camp. In exchange for the acceptance of said child's candidacy by **Kiddos Ranch**, I assume all risk and hazards incidental to the conduct of the activities, and release, absolve and hold harmless **Kiddos Ranch**, and all its respective officers, agents, and representatives from any and all liability for injuries to said child arising out of participating in, or returning from selected camp sessions.

In case of injury to said child, I hereby waive all claims against **Kiddos Ranch**. Including all coaches and affiliates, all participants, sponsoring agencies, advertisers, and, if applicable, owners and lessors of premises used to conduct the event. There is a risk of being injured that is inherent in the sports activities. Some of these injuries include, but are not limited to, the risk of fractures or paralysis.

I acknowledge that in case of an emergency, illness, or accident an attempt will be made to reach the emergency contact people I have listed. However, if no one can be reached, I authorize the **Kiddos Ranch** representative to take whatever action is deemed necessary in their judgment, for the health of my child. I will be responsible for any cost in the event my child must be transported by ambulance.

_____/_____/2015
Please Print Parent's/Guardian's Name Parent/Guardian Signature Date

Permission to use child's photo on webpage/brochures/ etc. Yes No _____
(Parent Initial)

How did you hear about Kiddos Ranch Summer Camp 2015? (circle all that apply)
Kiddos Ranch Web Site Flyer Facebook Lawn signs Car Door Signs Friend Other _____

For Official use Only

Amt Paid: \$ _____ Cash _____ Check# _____ MC/Visa _____ Date Paid _____ Received By: _____