



LACEY SUMMER FUN TOUR DAY CAMP 2018

MONDAY- FRIDAY 7:30AM - 5:30PM (Ages 6-12yrs)

Completed registration form & two weeks payment is required to register. Receipt will be emailed after you call with payment (VISA/MC)
 laceyparks@ci.lacey.wa.us Fax: 360.438.2669 Phone: 360.491.0857

Camper's Name _____ M / F _____ Date of Birth _____

Address _____ City _____ ZIP _____

GUARDIAN #1 _____
 Name _____ RELATIONSHIP _____
 Work Phone _____
 Home/Cell Phone _____
 Email _____

GUARDIAN #2 _____
 Name _____ RELATIONSHIP _____
 Work Phone _____
 Home/Cell Phone _____
 Email _____

SELECT CAMP LOCATION: _____ **LAKES ELEM** _____ **LYDIA HAWK ELEM**
6211 Mullen Rd SE, Lacey 7600 5th Ave SE, Lacey

TSHIRT SIZE *: __Yth Small __Yth Med __Yth Lrg __Adult Small __Adult Med __Adult Lrg

Please initial

YOUR CHILD WILL NEED A SACK LUNCH & WATER BOTTLE EVERY THURSDAY FOR FIELD TRIPS (WK 3 field trip is Tuesday)

<input checked="" type="checkbox"/>	Dates	Theme/Field Trip	Fee	Paid
	June 25-29	Wild, Wacky Water (Wild Waves)	\$165	
	July 2-6 (no camp July 4)	Hokey Pokey (Rollerdrome & Olympic Club)	\$135	FOR
	July 9-13	Storm Watch (Seattle Storm game TUESDAY)	\$165	
	July 16-20	Spoonful of Sugar (Children's Theater: Mary Poppins)	\$165	OFFICE
	July 23-27	Zootopia (Pt. Defiance Zoo)	\$165	
	July 30-August 3	Barnyard Blitz (Thurston County Fair & Long Lake)	\$165	USE
	August 6-10	Hello for Hollywood (Puget Sound Entertainment & Yelm Cinema)	\$165	
	August 13-17	Beat the Heat (Stewart Heights)	\$165	ONLY
	August 20-24	Ultimate Adventures (field trip every day) Meet at Rainier Vista Comm Park	\$175	
	*Add'l camp tshirts available for purchase through May 18		\$8 + tax	

Please initial

If not pd in full, additional weeks payment due by 5pm the Monday prior to the week your child(ren) are attending, or you will be charged a \$10 late fee and possibly withdrawn from camp to accommodate the waitlist.

PERMISSION TO RELEASE/EMERGENCY CONTACTS

Please list below names and phone numbers of anyone, other than yourself, that you authorize to pick up your child from Lacey Parks & Recreation Summer Day Camp. Please list contacts in the order you would like them to be contacted in the event of an emergency. You will always be the first person we attempt to reach.

- Name _____ Relationship _____ Phone _____
- Name _____ Relationship _____ Phone _____
- Name _____ Relationship _____ Phone _____

PLEASE COMPLETE REVERSE SIDE



CAMPER'S HEALTH and BEHAVIORAL HISTORY

Allergies? (plant, insect, food, medication) _____

Special dietary needs? _____

Please list any medications your child is taking: _____

Describe any behaviors staff should be aware of and explain management of behavior: _____

Please provide any information that you feel would be helpful in the supervision of your child: _____

PARENT/GUARDIAN - PLEASE READ and SIGN BELOW

I **DO DO NOT** give permission for non-prescription medication (non-aspirin product, Neosporin) to be given to my child.

I **DO DO NOT** In case of emergency **only**, give permission to the physician selected by the camp staff personnel to hospitalize, secure treatment for, and order injections, anesthesia, or surgery for my child named on this form. Any directions to the contrary should be specified on this form with signature of parent/guardian.

I **DO DO NOT** grant the City of Lacey permission to use and publish my child's name or otherwise identify my child in association with any photo in which my child appears for editorial, marketing and promotional purposes in print and electronic media. No financial or other liability to me will be incurred by the city or the photographer.

Parent/Guardian (signature) _____ Date _____

WAIVER for PARTICIPATION - PLEASE PRINT CLEARLY

I fully realize that there are certain inherent risks to which my minor child(ren) will be exposed because of the nature of this activity. Fully understanding those risks, I hereby release the City of Lacey, its officers and employees, from any damages that may be suffered through participation in any activity related to the Lacey Parks and Recreation Summer Day Camp.

Parent/Guardian/Name (print please) _____

Lacey Parks & Recreation
420 College Street SE
Lacey, WA 98503
360.491.0857

Child's Name (print please) _____

Parent/Guardian (signature) _____

*** PLEASE KEEP THIS PAGE FOR YOUR REFERENCE ***

SUMMER DAY CAMP 2018 PAYMENT SCHEDULE & FREQUENTLY ASKED QUESTIONS

REGISTRATION

Summer Day Camp & Teen Adventure Camp registration will begin at 6:00am, Wednesday, March 7th in conjunction with our Spring Program Registration.

WAYS TO REGISTER:

Submit completed registration form and 2 weeks payment (cash, check, VISA/MC)

- In person at Lacey City Hall, 420 College St SE, Lacey
- Fax : 360.438.2669, then call 360.491.0857 to make payment*
- Email: laceyparks@ci.lacey.wa.us, then call 360.491.0857 to make payment*

Your child will be registered and we'll email a confirmation receipt when we have your paperwork and required payment

Once your child is registered, you may make changes by phone on a space available basis.

WHEN DO I PAY FOR ADDITIONAL WEEKS MY CHILD IS REGISTERED IN CAMP?

After your initial registration & 2 weeks payment, weekly camp fees are due by 5pm the Monday prior to the week your child is attending camp.

Payments for subsequent weeks may be made online, by phone (Visa/MC), or in person at Lacey City Hall. If payment is not received by due date, there will be a \$10.00 late fee and possible withdrawal from the camp to accommodate our waitlists.

**YOUR CHILD WILL NEED A SACK LUNCH & WATER BOTTLE EVERY THURSDAY FOR FIELD TRIPS
(WK 3 FIELD TRIP IS TUESDAY)**

WEEK	DATE OF CAMP	PAYMENT DUE BY 5:00PM \$10 LATE FEE ADDED AFTER 5PM	DATE PAID My Records
1	June 25-29	at time of registration	
2	July 2-6 (no camp July 4)	at time of registration	
3	July 9-13 (Field trip is Tuesday)	July 2	
4	July 16-20	July 9	
5	July 23-27	July 16	
6	July 30-August 3	July 23	
7	August 6-10	July 30	
8	August 13-17	August 6	
9*	August 20-24	August 13	

*Week 9 is Summer Day Camp meets at Rainier Vista Community Park, with field trips everyday, so please bring snacks, sack lunch and water bottle each day.

REFUND POLICY

<u>Notice Received</u>	<u>Refund</u>
by 5:00pm Thursday prior to camp	100%
1st Camp day	50%
2nd Camp day	0%

No refunds for camp violations/dismissal

Lacey Parks & Recreation Department
420 College St SE
Lacey, WA 98503
360.491.0857
laceyparks@ci.lacey.wa.us
TaxID 910819427