



Participant Information Form

The participant is registered for: (please check ALL boxes that apply)

Full Week

☐ The entire week of April 10-14, 2017 (Monday- Friday)

OR Daily

- ☐ Monday 4/10/17
☐ Tuesday 4/11/17
☐ Wednesday 4/12/17
☐ Thursday 4/13/17
☐ Friday 4/14/17

• **Child's Information**

Child's Name: _____ Name child prefers: _____

Age: _____ Gender: _____ Home Phone: _____

Child lives with: ☐ Both Parents ☐ Mother ☐ Father ☐ Other: _____

☐ **CHECK HERE IF YOU OBJECT TO PHOTOS BEING TAKEN OF THIS CHILD**

• **Parent/Guardian Information**

Name: _____ Work/Cell Phone: _____ Relationship: _____

Name: _____ Work/Cell Phone: _____ Relationship: _____

• **Additional persons who have permission to pick up your child**

Name: _____ Work/Cell Phone: _____ Relationship: _____

Name: _____ Work/Cell Phone: _____ Relationship: _____

• Is there anyone who is **NEVER to pick up** your child? _____

• **Medical Information**

Any allergies (food, insects)?: _____

Medical allergies or activity restrictions? _____

Current medications and dosage _____

• Complete the following *only* if your child is to take medication during camp hours

The child named above will be taking medication while at camp. CRPD staff has my permission to counsel camp staff regarding the possible effects of the medication on my child. I will not hold Cordova Recreation and Park District or its employees responsible if my child refuses to take the medication.

Parent's Signature _____ Parent's Name (print) _____

Medication name _____ Reason for Medication _____

Dosage _____ Time to be taken _____ If "as needed": how often may it be taken? _____

Side effects _____ Signs of over dosage _____

• **How did you hear about our program?** _____

Please contact us if your child requires special accommodations to fully enjoy our Day Camp Program.

CORDOVA RECREATION AND PARK DISTRICT • DAY CAMP PROGRAM WAIVER

Class: Spring Break Day Camp

Location: Hagan Community Center

Dates: 4/10/17 – 4/14/17

Times: 7:30AM-5:30PM

Instructor: Camp Staff

The Cordova Recreation and Park District's Day Camp program is an outdoor camp based in our community parks. Planned activities make extensive use of the ball fields, courts, buildings, picnic areas, open spaces, and playgrounds. Wildlife does flourish in the vicinity of our community parks. Gophers, poisonous and non-poisonous snakes and skunks have all been encountered by park users. Bee stings do occur, however infrequently. Arts and crafts activities involve paints, pastes, glues, paper, scissors, crayons, other basic materials and items found by participants. Active games are conducted on turf, asphalt, concrete and unimproved exterior surfaces, while indoor activities of active and passive types are held on tiled and hardwood floors. Games engaged in by participants may involve balls, bats, frisbees and hula hoops; they may require running, skipping, sliding and jumping. Quite often there are other activities taking place in the surrounding areas during program hours. Some of these activities are sponsored by CRPD, some by other agencies and many are unscheduled and spontaneous use of the area by groups and individuals. District maintenance activities such as mowing, watering, trimming, repairing and cleaning are ongoing.

Parents of children who take medication during camp assume all responsibility and risk of that medication. District will not be held responsible for injuries or problems that occur due to the use of medication. District is not responsible for medication which is lost, stolen, or traded by children. Problems may include: overdose, child refusing to take medication, or injuries to a child who receives medication prescribed to another child. District staff will not administer medication or assist child in taking medication. District will not be held responsible if child forgets or refuses to take medication. Please be advised that the District places the highest priority on the safety of your child. However, with activities taking place out-of-doors, over many acres of park space, accidents and injuries are possible, although serious injuries are exceedingly rare. Day Camp participants are subject to the usual assortment of abrasions, cuts, and sprains that active children experience.

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by Cordova Recreation and Park District (CRPD) to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which may have, or which may hereafter accrue to me as a result of participation in said activity (ies). This release is intended to discharge in advance CRPD (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of my death or any injury or property damage that I may sustain while participating in said activity.

PARENTAL CONSENT: I hereby consent that my son/daughter _____ participate in the above activity, and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity.

PHOTOGRAPH NOTE: By signing this waiver, I understand that CRPD staff or affiliates may photograph me and/or my minor children and that the District may use such photographs to promote District programs now and in the future. I expressly allow, and hereby waive any objection to, CRPD photographing of me and/or my minor children when I and/or my minor children are participating in a CRPD program. I understand that all photos will remain the property of the District.

☐ I do not approve of having me and/or my minor child(ren) photographed by CRPD staff or its affiliates.

I HAVE CAREFULLY READ THE ABOVE AGREEMENT, WAIVER, AND RELEASE, AND FULLY UNDERSTANDS ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT, AND I SIGN IT OF MY FREE WILL.

SIGNATURE _____ PRINTED NAME _____

NAME OF PARTICIPANT _____ DATE _____