

# Allenhurst Beach Club - Rec Camp 2019 - REGISTRATION

Please complete one per child

The program cost is \$495 for the first child, and \$425 for additional children within the same family. Checks should be made payable to the "Borough of Allenhurst". (for tax purposes, the Borough ID is 21-6000010)

**Program Runs June 24 - August 9 from 10am - 3pm. There will NOT be camp on Thursday, July 4.**

Child's Name \_\_\_\_\_

Facility # \_\_\_\_\_ Age \_\_\_\_\_ Grade (Sept. '19) \_\_\_\_\_ Gender \_\_\_\_\_

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

Summer Address \_\_\_\_\_

Winter Address (if different) \_\_\_\_\_

Cell Phone(s) \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact Name & Phone \_\_\_\_\_

2nd Emergency Contact Name & Phone \_\_\_\_\_

Child's Favorite Part of Camp:

\_\_\_\_\_

What else would you like us to know about your child?

(please include allergies/dietary concerns, behavioral concerns, special assistance needed, as well as anything else that can help us give your child the best possible experience)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Photo Release Permission Slip

Parents,

Throughout the summer, we would like to photo/video your child for both projects that we may be working on and to keep you in on the action that goes on at camp. Photographs will NOT be distributed with names and will only be shared on platforms that relate to camp activities. With this in mind, please complete the following photo waiver.

As a parent or guardian of \_\_\_\_\_, I hereby consent to the use of photographs/videotape taken during the course of the camp season for publicity and/or promotional uses. I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

\_\_\_ Yes, I give consent for Allenhurst Rec. Camp to photograph my child for camp purposes and/or at camp events.

\_\_\_ No, I do not authorize Allenhurst Rec. Camp to photograph my child for any event.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Medical Waiver / Trip Release

In signing this form, I DO hereby give permission for my camper to leave the Allenhurst Beach Club without a parent/ guardian on all Summer Camp field trips. All campers will be under the direct care of camp staff during field trips.

In signing this form, I DO hereby give permission for the camp staff to apply sunscreen on my child IF assistance is needed. Parents are responsible to make sure each child has sunscreen. We recommend a waterproof, long wearing formula for best protection.

In signing this form, I DO hereby consent and authorize the Allenhurst Beach Club staff to take any and all action, including the use of medical services and hospital facilities as they deem appropriate in the event that my child should become ill or otherwise injured under the care of the Summer Camp program. In signing this form, I release the Allenhurst Beach Club from all claims of injury, which may be sustained by above child while participating in any Rec. Camp sponsored activity, whether caused by the negligence of the Allenhurst Beach Club or otherwise. If medical attention is required, I give my permission for such medical care.

In signing this form, I DO hereby agree to everything in this form and hold free from any and all liability the Allenhurst Beach Club and its respective officers, employees, volunteers, and members, and do hereby for myself, my heirs, executors, and administrators, waive and release and forever discharge any and all rights and claims for damages which I may have hereafter accrued to me arising out of connection with my child's participation in any of the activities of the Allenhurst Beach Club.

Camper Name(s) \_\_\_\_\_

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

Parent/ Guardian's (signature): \_\_\_\_\_

Date \_\_\_\_\_