

Camper Name: _____

DOB: _____

PARENT / GUARDIAN INFORMATION

Parent / Guardian 1: _____

Parent / Guardian 2: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____

Cell Phone: _____

Work Phone: _____

Work Phone: _____

Evening Phone: _____

Evening Phone: _____

Email: _____

Email: _____

EMERGENCY CONTACT / AUTHORIZED PICK-UP LIST

You must list at least one adult other than the parents/guardians listed on the registration form. Your child will not be registered without at least one alternate emergency contact/authorized pick-up. Even in an emergency, the camp is not able to release your child to anyone who is not on this list. Please inform all authorized pick-ups to have a photo ID ready **WHENEVER** they pick up.

I give permission for the camp to release my child to the following people, and to contact those listed when a parent/guardian cannot be reached in an emergency:

Name: _____ Relationship to camper: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone 1: _____ Phone 2: _____

Name: _____ Relationship to camper: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone 1: _____ Phone 2: _____

Name: _____ Relationship to camper: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone 1: _____ Phone 2: _____

All of the information on this form is correct and current. I understand that it is my responsibility to notify the YMCA immediately if any of this information changes.

Parent / Guardian Name (print): _____

Parent / Guardian Signature: _____ Date: _____

Camper Name: _____

DOB: _____

HEALTH HISTORY / EMERGENCY MEDICAL AUTHORIZATION

Physician: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Dentist: _____ Phone: _____

Date of last physical exam: _____ *(documentation required for registration)*

Medical Insurance Carrier: _____ Policy or Group #: _____

Has the child ever had or been subject to (check all that apply):

- | | | | |
|------------------------------------|-----------------------------------|---|--|
| <input type="checkbox"/> ADD/ADHD | <input type="checkbox"/> Asthma | <input type="checkbox"/> Ear Infections/Tubes | <input type="checkbox"/> Learning Disability |
| <input type="checkbox"/> Allergies | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Heart Problems | <input type="checkbox"/> Epilepsy |

If you answered yes to any of the above questions explain here:

Will your child need to have an Inhaler and/or Epi-pen at Camp? (please check) Epi-pen ____ Inhaler ____

Operations or Serious Illness: _____

Dietary Restrictions: _____

Disability/Chronic Illness: _____

Activities Limited by Physician: _____

Medication to be given at camp: _____ Dose: _____ Time: _____

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If your child requires medication during the camp day (different from the medications listed above), please deliver the amount needed for the day or the week in the original prescription bottle to the Camp Director accompanied with written authorization to administer the medication. This note must be signed by the Parent or Guardian.

Authorization to dispense medications (parent signature): _____

Is there any additional information we should know about your child?

All of the information on this form is correct and current. I understand that it is my responsibility to notify the YMCA immediately if any of this information changes.

Parent/Guardian Name (print): _____

Parent/Guardian Signature: _____ Date: _____

Camper Name: _____

DOB: _____

ARRIVAL / DEPARTURE PLAN

Camp for the Arts	8:00 am to 5:30 pm	YMCA, Murray Ave. entrance
Urban Adventures	8:00 am to 5:30 pm	KLC, Piedmont Street
Voyagers	8:00 am to 5:00 pm	YMCA, Murray Ave. entrance

Blanchard

Arrive at camp by the following method:

- Bus from Murray Ave. (sign-in starts at 8:00am, bus departs at 8:15am)
- Bus from Auburn High School (bus departs at 8:30am)
- Parent drop-off AT CAMP BLANCHARD IN SUTTON (8:00am-9:00am)

Will depart from camp by the following method:

- Bus to Murray Ave. (bus arrives at 5:00pm, sign-out until 5:30pm)
- Bus to Auburn High School (bus arrives at 4:45pm)
- Parent pick-up AT CAMP BLANCHARD IN SUTTON (4:30pm-5:30pm)

Please initial each section:

- _____ Changes to this plan: I understand that any other transportation requests or changes, including the authorized pick-up list, must be made in writing. Under no circumstances will a phone call or verbal request be sufficient to amend this plan.
- _____ I agree to adhere to the transportation policies and procedures as stated in the Parent Handbook.
- _____ I understand that anyone signing out a child must have a photo ID available EVERY TIME they pick up.
- _____ I understand that a late fee of \$1.00 per minute, per child will be assessed for any camper not signed out by 5:30pm (5:00pm for Voyagers) unless they are registered for Extended Care.
- _____ I understand that a court order must be provided whenever a legal guardian or biological parent is to be prevented from signing out a camper.

AUTHORIZATION / POLICY AGREEMENTS

Please initial each section:

_____ I authorize camp staff who are trained in first aid to give my child first aid when appropriate. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. However, if I cannot be reached, I hereby authorize the camp to arrange transportation for my child to the nearest medical facility and/or to _____, and to secure any necessary medical treatment. This form may be reproduced for trips out of camp.

_____ Department of Public Health regulations require that every person enrolled in the camp program have a certificate of immunization on file before attending. I understand that this registration will not be complete and my child will not be allowed to attend camp without this documentation.

_____ I authorize camp staff to apply sunscreen and insect repellent (supplied from home) to my child.

_____ I give permission for candid photographs and videos to be taken of my child while engaged in activities/programs at the YMCA. I understand that these pictures may be used in a variety of ways (i.e.: promotional slideshows, YMCA brochures and flyers.) These pictures will be available to parents.