

City of Webster Ultimate Slammin Summer Camp Program Parent/Guardian Authorizations and Acknowledgements

Child's Name: _____

I understand that the City of Webster's camp supervision for my child begins when my child arrives at a City of Webster facility and is checked in by City of Webster camp personnel. I understand that I am not to leave my child at a City of Webster program site unless released to a City of Webster camp staff person who is there to receive and supervise my child.

I understand that the City of Webster's responsibility for my child ends when an authorized adult has signed my child out from the camp program.

I understand that my child will not be released to any person not listed as "authorized to pick up child." I understand that additions to the "authorized to pick up my child" list must be made in writing and given to the camp director prior to the time this individual is scheduled to pick up the child. I also understand that any authorized person who arrives to pick up my child and exhibits behavior as if under the influence of drugs or alcohol will not be allowed to check out my child. The City of Webster reserves the right to refuse the release of a child to any individual if the child will be in danger. The police and/or CPS may be contacted if other arrangements cannot be made.

My child has my permission to be transported by the City of Webster staff or their representatives.

My child has my permission to attend all scheduled field trips.

My child has my permission to participate in activities that involve water while under the supervision of the City of Webster staff or its representatives.

The City of Webster has my permission to use photographs of my child participating in the Ultimate Slammin Summer program for the purposes of advertisement or general informative articles concerning the Ultimate Slammin Summer program. This may include the "Gateway," the City of Webster Website, and local newspapers.

I understand that City of Webster staff and volunteers are not allowed to baby-sit or transport children at any time outside the City of Webster program.

I understand that state law mandates the City of Webster to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

I understand that all precautions will be taken to ensure the safety and health of my child. I further understand that neither the City of Webster nor its representatives shall be held liable or responsible for medical treatment in such case of illness, accident, or other emergency situation as may occur while my child is participating in the City of Webster summer programs.

Signature of Parent/Guardian

Date

City of Webster Ultimate Slammin Summer Camp Program 2016 Session Selection

Child's Name: _____

Instructions: During the Registration process - Please check the "Register" boxes for up to four sessions if spots are available. If you would like to be added to the vacancy waiting list for any of the remaining sessions, check the appropriate boxes in that column. Staff will then confirm the registration on our lists for each session. You will be assigned a waiting list number for any session that is full, or for any session you have chosen to wait for the vacancy fill date. On April 30th we will fill any vacancies remaining in the program using the vacancy waiting list. Please ask a staff member if you need further clarification.

Session	Register	Vacancy Waiting List
Session I (June 13- 24) <i>Just Ballin</i>	<input type="checkbox"/>	<input type="checkbox"/>
Session II (June 27 - July 8) <i>Living in Paradise</i>	<input type="checkbox"/>	<input type="checkbox"/>
Session III (July 11 - July 22) <i>A Ticket to Boardwalk</i>	<input type="checkbox"/>	<input type="checkbox"/>
Session IV (July 25 - August 5) <i>Just Puttin Around</i>	<input type="checkbox"/>	<input type="checkbox"/>

Please check your child's t-shirt size:

- | | | | |
|-----------------------------|-----------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> YS | <input type="checkbox"/> YM | <input type="checkbox"/> YL | |
| <input type="checkbox"/> AS | <input type="checkbox"/> AM | <input type="checkbox"/> AL | <input type="checkbox"/> AXL |

RESIDENTS (PER SESSION):

\$75.00 for the 1st child
 \$65.00 for each additional child
 \$20.00 extra for Extended Hours 8a.m.-5p.m

NON-RESIDENTS (PER SESSION):

\$200.00 for the 1st child
 \$180.00 for each additional child
 \$40 extra for Extended Hours 8a.m.-5p.m.

Camp Hours: 9a.m.-4p.m.

Signature of Parent/Guardian

Date