

CAMP STRUCTURE : Daily activities will begin at 8:30 am and end at 1:30 pm. Campers will be grouped according to ages: 5 -6, 7-9, 10-11 and 12-15. Parents must provide lunches on the 18th and 19th. There will be a pizza party on June 20th. There will be a supervised swim and lunch break daily from 11:30 am -12:30 pm.

NECESSARY ITEMS : Water/Gatorade, sunscreen, hat, lunch, swimsuit, towel, and tennis racket (if available). TOCC IS NOT RESPONSIBLE FOR LOST ITEMS.

REGISTRATION : Make checks payable to Steve Pennington. Cost is \$90 per participant with an \$8 sibling discount; \$98 for walk ups .

Child's Name: _____

Address: _____

Date of Birth: _____ Age: _____

Parent(s) Name: _____ Medications Taken by Child _____

Phone Number (Cell) _____ Can you child receive Tylenol if needed? _____

Phone Number (Home or Work) _____ Child's Known Allergies _____

Who will pick your children up? _____ Any other information we should be aware of? _____

EMERGENCY CONTACT if parent cannot be reached by phone:

Name: _____ Phone Number: _____

Please number activity choices in order of preferences. The 7-15 year old attendees will participate in three activities each day.

Tennis _____ Soccer _____

Arts & Crafts _____ Music _____

Which particular topic would your child prefer to have as the afternoon activity?

The 5-6 age group will participate in all four subjects. They will be accompanied by a counselor at all times.

This camp will fill to capacity. Please register as soon as possible.

PARENT'S CERTIFICATION FOR PARTICIPATION

By my signature below, I certify that as the parent or legal guardian of the above named camper I release from and all liability, claim, or right of action of any kind which my child or legal representative may have for any and all bodily or personal injuries or property damages resulting from or during participation in this program, any host, representative, management, board of directors, trustees, or club in which the program is conducted.

REGISTRATION VOID WITHOUT SIGNATURE OF PARENT/GUARDIAN

Printed Name of Parent or Legal Guardian: _____ Signature of Parent or Legal Guardian: _____