

2025 Camp Blue Wave Summer Registration Form

@ P.K. Yonge

Please check off if your child will attend Little Waves, Big Waves, or Sports Camp. They may mix this option with our Drama Camp during the dates specified if desired. Drama camp is available for full time campers only.

Little Waves (K-3rd) Big Waves (4th-8th) Sports Camp (2nd-8th)
 Drama Camp (3rd-8th Graders ~Offered July 7th-July 18th only)

Camp pricing:

- Full time Little Waves, Big Waves, and Sports Camps ~ \$200 per week
- Part time Little Waves, Big Waves, and Sports Camps ~ \$125 per week
- Drama Camp~ Full time, two weeks ~ \$440 total for both weeks of camp (must commit to BOTH weeks)

Please check off dates of attendance and if your child will be full time/half time (if half time, please circle if your child will attend camp in the am or pm)

Part Time AM 7:45 – 12:15 Part Time PM 12:15 – 5:30

<input type="checkbox"/> June 9-13	Full Time	Part Time (AM / PM)	<input type="checkbox"/> July 7-11	Full Time	Part Time (AM / PM)
<input type="checkbox"/> June 16-20	Full Time	Part Time (AM / PM)	<input type="checkbox"/> July 14-18	Full Time	Part Time (AM / PM)
<input type="checkbox"/> June 23-27	Full Time	Part Time (AM / PM)	<input type="checkbox"/> July 21-25	Full Time	Part Time (AM / PM)
<input type="checkbox"/> June 30-July 3*	Full Time	Part Time (AM / PM)	<input type="checkbox"/> July 28-Aug 1	Full Time	Part Time (AM / PM)

*There will be no camp attendance on Friday, July 4

- **Due to limited enrollment Camp Blue Wave requires a 50% deposit on all weeks registered by April 2 (This can be paid on your Procure account when processed)**
- **The \$50 registration fee is nonrefundable**
- **Prepaid deposit fee is nonrefundable without a two week notice of any changes in registered attendance.**

Does your child have a sibling attending Blue Wave Summer Camp? yes* no

*If so, please provide the sibling(s) name(s) here: _____

PARTICIPANT INFORMATION / RELEASE

Child's name _____ Sex _____ DOB _____ Grade Entering _____

Childs T-Shirt Size: **Youth** XS S M L **Adult:** S M L XL

Address _____ City _____ Zip _____

Mother's name _____ Father's name _____

Cell Phone _____ Cell Phone _____

Work Phone _____ Work Phone _____

Email* _____ Email* _____

**Please note Email is important for our online system, confirmation of registration, updates, and newsletters*

Contacts:

Your child will only be released to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident, or emergency, if for some reason, the custodial parent or legal guardian cannot be reached.

Name _____ Phone Number _____

Name _____ Phone Number _____

Name _____ Phone Number _____

Special instructions that the staff should know about?

Please list any information you feel would be helpful for us to know about your child to provide the best experience. Example: name preference, special interests, concerns etc...

Please list specific allergies your child has _____

In case of an emergency, Camp Blue Wave _____ does _____ does not have permission to take my child to the hospital. Hospital Preference: _____

CAMP BLUE WAVE WAIVER

I, the parent/guardian of _____ hereby give consent my child to engage in all CAMP BLUE WAVE summer activities, including field trips. I understand that all necessary precautions will be taken by the CAMP BLUE WAVE staff for the welfare and safety of my child, and I will not hold the above parties responsible in case of injury to my child. The camp has my permission to use pictures of my child taken at camp to use for promotional purposes.

Signature of Parent or Guardian _____ Date _____