



2019 Summer Play ! Camp Registration Form

CAMPER INFORMATION (please complete one Registration Form for each Camper):

CAMPER'S NAME: _____ Age _____ D.O.B _____ Sex _____

Address: _____ City: _____ Zip _____

Daytime Phone: _____ School: _____ Grade: _____

Camper T-shirt size (included with camp fee): YXS (if available) YS YM YL AS AM AL

How did you hear about our camp? Friend RP! Website Other Website Email Facebook Advertisement Other

CONTACT INFORMATION (Parent or Legal Guardian):

PARENT 1 NAME: _____ PARENT 2 NAME: _____

Parent 1 Home Phone: _____ Parent 2 Home Phone: _____

Parent 1 Work Phone: _____ Parent 2 Work Phone: _____

Parent 1 Cell Phone: _____ Parent 2 Cell Phone: _____

Parent 1 Email: _____ Parent 2 Email: _____

Person other than parent to be contacted if the parent is not available:

Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____

The NAMES of persons, other than parent, to whom **THE CHILD MAY BE RELEASED:**

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Please INITIAL here _____

MEDICAL INFORMATION

Known Medical Problems/Special Concerns: _____

Allergies: _____ Medications: _____ Can we apply sunscreen? _____ (must be provided by parent)

WILL MEDICATIONS BE TAKEN AT CAMP? YES or NO **If yes, please note that RP! staff are not permitted to administer any medications to campers.**

WHAT ELSE DO WE NEED TO KNOW? Is there anything that Rochester Play! should know about your child's physical or mental health or special needs? Any instructions? _____

Please INITIAL here to confirm and approve _____

BEHAVIOR/NEEDS/DISCIPLINE POLICY:

Upon the occurrence of a behavior, needs, or disciplinary problem as determined by Rochester Play!, the child may be suspended or terminated from the program. In such cases, the parent will be notified to pick up the child immediately. A BEHAVIOR/NEEDS/DISCIPLINE PROBLEM IS DEFINED as any child who is hampering the smooth flow of the program by either requiring one on one attention; is inflicting physical or emotional harm on other campers; is physically and/or verbally abusing staff or is otherwise unable to conform to the rules and guidelines. If your child is excluded from the program due to any behavior, needs, or discipline infractions, NO REFUNDS WILL BE GIVEN.

Please INITIAL here to confirm and approve _____

PHOTO RELEASE:

PHOTOS MAY BE TAKEN during Rochester Play! programs and unless Rochester Play! receives signed, written objections, PHOTO'S MAY BE REPRODUCED for publication by or with any media outlet chosen by Rochester Play!.

Please INITIAL here to confirm and approve _____

SESSION, PRICE and PAYMENT INFORMATION:

Pre-registration and pre-payment is required. Socks are also required each day of Camp. Session fee includes all activities and indoor field trip fees, camp T-shirt (one per camper per summer), snacks (any lunch and before/after care is an additional cost) and a non-refundable \$50 registration fee. There will be a \$25 fee for all returned checks. All order changes must go through and be approved by the Program Director. Please check AM or Day for each camp attending:

1/2 Day/All Day

____ June 24 – June 28 Session 1 – Toy Story Week
____ July 8 – July 12 Session 2 – Animal Planet Week
____ July 15 – July 19 Session 3 – Disney Week
____ July 22 – July 26 Session 4 – Christmas in July

1/2 Day/All Day

____ July 29 – August 2 Session 5 – Scavenger Hunt Week
____ August 5 – August 9 Session 6 – Board Games Week
____ August 12 – August 16 Session 7 – Super Heroes Week
____ August 19 – August 23 Session 8 – Frozen Week

Enter the total number of sessions selected above of each of the following options:

____ AM/PM Session (9am–12pm/1pm-4pm) 1 Day Option @ \$40.00 per camp = \$ _____ (Circle) AM or PM
____ AM/PM Session (9am–12pm/1pm-4pm) 3 Day Option @ \$95.00 per camp = \$ _____ AM or PM
____ AM/PM Session (9am–12pm/1pm-4pm) 5 Day Option @ \$120.00 per camp = \$ _____ AM or PM
____ All Day Session (9am – 4pm) 1 Day Option @ \$65.00 per camp = \$ _____
____ All Day Session (9am – 4pm) 3 Day Option @ \$140.00 per camp = \$ _____
____ All Day Session (9am – 4pm) 5 Day Option @ \$165.00 per camp = \$ _____

Session Price: \$ _____
Sibling 10% Discount : \$(_____)

TOTAL Session(s) Price: \$ _____
Member 10% Discount (10% off Amount): \$(_____)
Total Amount Due: \$ _____

Refund Policy: All cancellations must be received in writing to the Program Director. Rochester Play! will refund 100% of the remaining Session and Option fees if received 6 weeks or more prior to the start of a Session, 50% if requested 2 – 5 weeks prior to the start of a Session, and forfeit all Session and Option fees if received less than 2 weeks prior to the first day of a Session. All refunds will be processed within 45 days of receiving written cancellation request.

Please INITIAL here to confirm and approve _____

WAIVER AND RELEASE OF LIABILITY STATEMENT:

I GIVE CONSENT FOR MY CHILD TO TAKE PART IN CAMP, and all associated activities, field trips or excursions. I AM AWARE THAT THERE ARE INHERENT RISKS associated with participation in Rochester Play camps, programs, parties, and/or use of the play area and equipment including but not limited to scrapes, cuts, bumps, bruises contusions, fractures, paralysis, or death, and I, for myself and the participant(s) named above, knowingly and freely assume all such risks, both known and unknown, including those that may arise out of the negligence of other participants. IN REGISTERING MY CHILD FOR THIS ACTIVITY, I, for myself and the participant(s) named above, and our respective heirs, assigns, administrators, personal representatives, and next of kin, HEREBY indemnify, protect, release and hold and save harmless, Advance Management Solutions Group, LLC, Rochester Play, and, their affiliates, officers, members, agents, employees, other participants, and sponsoring agencies from and against any and all claims, injuries, liabilities, loss, or damages arising out of, resulting from or caused even in part by Advance Management Solutions Group, LLC, Rochester Play's negligence, as well as any other Claims arising out of, resulting from, or caused by the Use of Premises or Participation in Off-Premises Activities suffered by myself or participant or related to our or my child's participation in any and all Rochester Play camps, programs, activities, parties, the use of the play area and/or equipment. I, for myself and the participants named above, am of physical ability to participate and legally competent to understand and complete this agreement. I hereby execute this agreement without coercion.

Please INITIAL here to confirm and approve _____

I hereby certify I have read this entire Agreement and Waiver and agree to accept the terms and conditions. I agree the Participating Camper will abide by all rules and regulations of Rochester Play, which are subject to change, and which in the opinion of Rochester Play management, are deemed necessary and reasonable for the best interest of guests, participants, staff, Programs, and Rochester Play, AND I AM ENROLLING MY CHILD IN ROCHESTER PLAY! CAMPS. Please SIGN below:

Signature of Parent or Guardian

Date