

Day Camp Information

REGISTRATION DATES

Residents Monday, April 27

Non-Residents Monday, May 4

Day Camp Dates

2 week sessions

Session 1 - June 22 - July 2

Session 2 - July 6 - July 17

Session 3 - July 20 - July 31

Session 4 - August 3 - August 14

There is no camp on Friday, July 3rd

Day Camp Fees

Session 1 (Holiday Week) Resident \$385.00 Non-Resident \$445.00

Session 2,3,4 Resident \$420.00 Non-Resident \$490.00

A \$100.00 non-refundable/non transferable deposit is required per child per session.

DAY CAMP PROGRAM

- The Day camp program is open to boys and girls who are entering Kindergarten to 6th grade as of September.
- Campers will be grouped, by age, in a well supervised environment and participate in a variety of activities that challenge the mind and body as new friendships are built.
- Our camp program will offer special activities such as pizza parties, cookouts, entertainers, field trips and many other surprises.
- Camp will be held at the High Plains Community Center from 9:00am-4:00pm.
- For an additional charge of \$8.00 per slot, early drop off (7:30 am-9:00am) and/or late stay (4:00 pm - 5:30pm) services are available. Pre-registration is required and pick up must be no later than 5:30pm. A \$5.00 per minute late fee will be charged in order to cover staff overtime.
- The camp fee includes swimming lessons for 5 and 6 year-old campers.
- An open swim period will be offered to all campers in the afternoon.
- Campers must bring a clearly marked bagged lunch every day (will be refrigerated).



Day Camp Registration Form

Please check week or weeks child attending:

11-1 ___ Session 1 - June 22 - July 2*

11-2 ___ Session 2 - July 6 - July 17

11-3 ___ Session 3 - July 20 - July 31

11-4 ___ Session 4 - August 3 - August 14

***No camp on Friday, July 3rd—Session 1**

Child's shirt size (please circle one) YS YM YL AS AM AL AXL

Camper's name _____ Date of Birth ___/___/___ Male/Female

Address _____ City _____ Zip _____

Home phone _____ Grade entering in September _____ School _____

Mother's name _____ Work phone _____ Cell Phone _____

Employer _____ Email _____

Father's name _____ Work phone _____ Cell Phone _____

Employer _____ Email _____

Guardian's name _____ Work phone _____ Cell Phone _____

Employer _____ Email _____

Emergency contact person (other than parents or guardian) Name _____

Phone _____ **Cell Phone** _____

Email _____ Relationship _____

Emergency contact person's address _____ City _____

Those adults who have permission to pick up my child from camp are:

Name

Address

Phone Number

1. _____

2. _____

3. _____

MEDICAL INFORMATION

Allergies: Food Bee Stings Poison Insect Bites Other

If yes, please specify _____

Is your child under medical care for any illness or health problems? Yes No

If yes, please specify _____

Is your child on medication: Yes No

If yes, please specify _____

An "Administration of Medicine by Camp personnel" form is available at the Park and Recreation Office and a signed Doctor's order must be turned in to the Camp Nurse before the start of camp for every medication that will be administered to your child during camp.

Name of child's Doctor _____ **Phone** _____

Emergency Medical/Surgical Treatment Permission Waiver

In the event of an emergency, accident or other mishap, I authorize that my child,

_____ be taken to _____
(child's name) (hospital of first choice)

for emergency medical/or surgical treatment which a physician or dentist may determine is necessary for my child's health and well being. I authorize the Park and Recreation Department to seek emergency medical treatment for my child, including, but not limited to, surgical and possible life saving measures as may be necessary according to the attending physician. I hold harmless the Town of Orange, its officials, employees or agents from all liability which may arise from the aforementioned action. I understand that every attempt will be made to contact me before such a decision is made.

Signature _____ Date ____/____/____
Parent/Legal Guardian

**TERMS OF ACCEPTANCE FOR ORANGE PARK & RECREATION
SUMMER CAMPS**

- A \$100.00 non-refundable, non-transferable, deposit is required for each session of Day Camp and week of Travelin' Teens. It will be applied to the total session cost. **Cancellations will result in a forfeit of deposit.**
- REFUNDS will only be given for documented medical reasons, less a \$10.00 processing fee.
- Full payment is due the Friday before the session begins. The Park and Recreation Department retains the right to cancel any enrollment, without payment in full, prior to the start of the camp session.**
- The camp will not assume liability for damage to the property of campers. Please be sure to mark all belongings with your child's name. Name tags will not be used on any trips; names on shirts, bags or other items your child may bring should not be visible to strangers.
- The following items are not allowed to be brought to camp: ipods, handheld games, makeup, weapons of any sort(real or play), radios, valuables, cell phones or toys that may be deemed a danger to the staff or campers.
- Each day your camper should bring: a bathing suit, towel, goggles (if appropriate) and a lunch.
- Camper placement will be at the discretion of the Camp Director. Special requests should be noted at the time of registration, but are not guaranteed.
- The Park and Recreation Department retains the right to suspend, or expel without refund, for violation of camp rules.
- Smoking, use of alcohol or other drugs is prohibited and will be cause for immediate dismissal without refund.
- Pictures taken while in camp may be used in camp brochures, videos and/or newspaper publicity unless

Child's name _____

Please circle each day needed. Cost for each early or late session is \$8.00.

| SESSION 1 | Monday | Tuesday | Wednesday | Thursday | Friday |
|------------------|---------------|----------------|------------------|-----------------|----------------|
| Week 1 | Early Stay | Early Stay | Early Stay | Early Stay | Early Stay |
| 6/22-6/26 | Late Stay | Late Stay | Late Stay | Late Stay | Late Stay |
| Week 2 | Early Stay | Early Stay | Early Stay | Early Stay | NO CAMP |
| 6/29-7/2 | Late Stay | Late Stay | Late Stay | Late Stay | NO CAMP |
| SESSION 2 | | | | | |
| Week 3 | Early Stay | Early Stay | Early Stay | Early Stay | Early Stay |
| 7/6-7/10 | Late Stay | Late Stay | Late Stay | Late Stay | Late Stay |
| Week 4 | Early Stay | Early Stay | Early Stay | Early Stay | Early Stay |
| 7/13-7/17 | Late Stay | Late Stay | Late Stay | Late Stay | Late Stay |
| SESSION 3 | | | | | |
| Week 5 | Early Stay | Early Stay | Early Stay | Early Stay | Early Stay |
| 7/20-7/24 | Late Stay | Late Stay | Late Stay | Late Stay | Late Stay |
| Week 6 | Early Stay | Early Stay | Early Stay | Early Stay | Early Stay |
| 7/27-7/31 | Late Stay | Late Stay | Late Stay | Late Stay | Late Stay |
| SESSION 4 | | | | | |
| Week 7 | Early Stay | Early Stay | Early Stay | Early Stay | Early Stay |
| 8/3-8/7 | Late Stay | Late Stay | Late Stay | Late Stay | Late Stay |
| Week 8 | Early Stay | Early Stay | Early Stay | Early Stay | Early Stay |
| 8/10-8/14 | Late Stay | Late Stay | Late Stay | Late Stay | Late Stay |

Total number: _____ x \$8.00 = _____ **Total Early / Late Stay Add-on**