

Montpelier Recreation Department

Snow Days!

Registration Form

Campers Name:

Please Print:

First Name

Last Name

M.I.

Age

Date of Birth

Grade

Home Phone Number

Mailing Address:

Street Address

Street Address Line 2

City

State

Zip Code

Parent's/Guardian's Information:

Name

Email Address

Work Number

Cell Number

Parent's/Guardian's Information:

Name

Email Address

Work Number

Cell Number

MONTPELIER RECREATION SNOW DAYS! REGISTRATION FORM

Emergency Contact 1:

Name

Email Address

Work Number

Cell Number

Emergency Contact 2:

Name

Email Address

Work Number

Cell Number

Does your child have allergies?

Yes No

If Yes, What?

Any other medical information that may be helpful to us and/or emergency personnel.

Montpelier Recreation Day Camp Disciplinary Policy:

Day Camp is meant to be a fun, educational, and recreational activity. For the benefit of all campers, it is important that children behave appropriately within the day camp. If it becomes necessary to take disciplinary action against a student the steps that will be followed are outlined below:

1st Incident: The camper will receive a verbal warning and an explanation as to why the behavior is inappropriate (whenever possible, this will be done in a one-on-one setting removed from other campers).

MONTPELIER RECREATION SNOW DAYS! REGISTRATION FORM

2nd Incident: Staff will determine an appropriate consequence for the camper's actions (examples may include a "time out" or exclusion from participation in an activity). The camper's parent's will be notified of their child's behavior when they arrive for pick up.

3rd Incident: Child will be removed from camp without a tuition refund for that day.

If an action is considered harmful enough to the safety or wellbeing of the program and or cannot be controlled by steps one and two, staff may skip to step 3

Authorization of Treatment: I hereby give my permission to the medical personnel selected by the Camp Director to order treatment and necessary transportation of my child. In the event that I cannot be reached in an emergency, I hereby give my permission to the physician to secure and administer treatment for my child.

Initials

Liability Waiver:

I assume all risks and hazards incidental to such participant, including transportation to and from Day Camp, and I hereby waive, release, absolve, indemnify, and agree to hold harmless the City of Montpelier, the Montpelier Recreation Department and the Montpelier Public School System, their officials, employees, and volunteers, the organizers, sponsors, supervisors, and participants for any claim arising out of an injury to my child or myself.

Parent/Guardian Signature

Date