

**LARA SUMMER DAY CAMP 2010  
CAMPER REGISTRATION**

**CAMPER INFORMATION:**

NAME: \_\_\_\_\_  
AGE ON JUNE 7, 2010: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ MALE/ FEMALE  
SCHOOL GRADE LEVEL COMPLETED (by July 2010): \_\_\_\_\_  
SCHOOL DISTRICT: \_\_\_\_\_

**PARENT INFORMATION:**

PRIMARY GAURARDIAN'S NAME: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
SECONDARY GUARDIAN'S NAME: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**HOUSEHOLD INFORMATION:**

STREET ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
COUNTY: \_\_\_\_\_ TOWNSHIP: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

**CONTACT #1:**

NAME: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_  
ALT. PHONE: \_\_\_\_\_  
CONTACT INSTRUCTIONS: \_\_\_\_\_

**CONTACT #2:**

NAME: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
ALT. PHONE: \_\_\_\_\_  
CONTACT INSTRUCTIONS: \_\_\_\_\_

**CONTACT #3:**

NAME: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
ALT. PHONE: \_\_\_\_\_  
CONTACT INSTRUCTIONS: \_\_\_\_\_

PRIMARY GUARDIAN SIGNATURE: \_\_\_\_\_  
DATE: \_\_\_\_\_

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MEDICAL INFORMATION:

DOCTOR'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

CURRENT MEDICATIONS:

MEDICATION NAME: \_\_\_\_\_

REASON FOR MEDICATION: \_\_\_\_\_

DOES MEDICATION NEED TO BE ADMINISTERED DURING CAMP HOURS? \_\_\_\_\_

IF YES, PLEASE GIVE DIRECTIONS: \_\_\_\_\_

MEDICATION NAME: \_\_\_\_\_

REASON FOR MEDICATION: \_\_\_\_\_

DOES MEDICATION NEED TO BE ADMINISTERED DURING CAMP HOURS? \_\_\_\_\_

IF YES, PLEASE GIVE DIRECTIONS: \_\_\_\_\_

**IF YOU REQUIRE MORE SPACE, PLEASE USE BACK OF PAPER.**

PLEASE TELL US A LITTLE ABOUT YOUR CHILD'S MEDICAL HISTORY: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

IS YOUR CHILD ALLERGIC TO ANYTHING? (ENVIRONMENTAL, FOOD, MEDICATIONS, INSECTS, ANIMALS, ETC.) IF SO, PLEASE USE THIS SPACE TO EXPLAIN WHAT HAPPENS WHEN THEY REACT, WHAT WE SHOULD DO IF THIS HAPPENS, ETC. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

IS YOUR CHILD AWARE OF AND PREPARED TO DEAL WITH THESE ALLERGIES?: \_\_\_\_\_

\_\_\_\_\_

DOES YOUR CHILD HAVE ANY PHYSICAL, EMOTIONAL, PSYCHOLOGICAL, BEHAVIORAL, OR SOCIAL DISABILITIES?: IF SO, PLEASE TELL US ABOUT THEM. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HAS YOUR CHILD EVER BEEN VIOLENT? IF SO, PLEASE EXPLAIN. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PRIMARY GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

## LARA SUMMER DAY CAMP 2010 CAMPER REGISTRATION

LIKES AND DISLIKES: (PLEASE CHECK OFF ALL THAT YOU FEEL WILL BENEFIT OR INTEREST YOUR CHILD)

ACTIVITIES:

- CRAFTS AND ART PROJECTS
- RELAY RACES
- SWIMMING
- PLAYING AT THE PARK
- READING/STORY TELLING
- ROLE PLAYING/ ACTING
- BOARD GAMES
- BOWLING
- PLAYING BALL (KICKBALL, BASEBALL, FOOTBALL, ETC.)
- COOKING
- SCIENCE
- HIKING
- NATURE EDUCATION AND GAMES

FOODS YOUR CHILD LIKES: \_\_\_\_\_

\_\_\_\_\_

MOVIES:

- COMEDY
- DRAMA
- ANIMATION
- MUSICALS

IS THERE ANYTHING ELSE YOU WOULD LIKE TO TELL US ABOUT YOUR CHILD: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**WAIVER OF LIABILITY:**

I understand that during camp the Lewisburg Area Recreation Authority staff, volunteers, and affiliates will do everything they can to keep my child safe, however accidents do happen. In case of an accident, I will not hold the Lewisburg Area Recreation Authority, its staff, volunteers, or its affiliates responsible for any harm that might come to my child. I understand if something should happen to my child that the staff and volunteers will use their best judgment in responding. I understand that these responses might include calling for emergency medical services, emergency medical treatment, going to the emergency room, or going to the doctor's office. I understand that I am responsible to pay for any expenses associated with these treatments. I give my permission for the Lewisburg Area Recreation Authority staff, volunteers, and affiliates to use whatever means necessary to treat my child in case of an emergency.

Primary Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**LARA SUMMER DAY CAMP 2010  
PARENT/ GUARDIAN EXPECTATIONS**

1. Children are to be picked up by 6:00 PM each day unless The Lewisburg Area Recreation Authority's hours are extended. If your child/children are not picked up on time there will be a \$3 per minute fee. Repeated lateness will result in loss of privileges. Families who are charged a late fee cannot return until the fee is paid.
2. Children are to be prepared for the day's activities, bring a swimsuit, sneakers, or whatever is needed. Check your weekly agenda or speak to a counselor for more details.
3. Parents/guardians are expected to come into the Ice Rink, speak to a counselor, and sign out their child/children. Failure to do so can result in loss of privileges.
4. Children will not be allowed to use the phone to call for forgotten items, such as swimsuits, towels, sneakers, etc. They will simply be excluded from the activity. If forgetting a pool item happens the child will have to sit at the pool.
5. Parents/guardians are expected to clean out campers cubbies every Friday. All items left in the cubbies will be thrown out every Friday night at 6:00 PM regardless of their worth or importance.
6. Parents/guardians are expected to follow the campers rules while in the building.

I, \_\_\_\_\_, have read and understand these rules. I understand the consequences involved if I fail to comply.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Child/Children's Names:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

LARA SUMMER DAY CAMP 2010  
CAMPER RULES

**Camper's Name:** \_\_\_\_\_

- 1) Respect your environment:
  - ✓ If you use something, put it away when you are finished.
  - ✓ If you spill or break something, clean it up and tell a counselor.
  - ✓ If you see something is messy, clean it up. Enlist other campers to help!
  - ✓ Flush the toilet and wash your hands after going to the bathroom.
  - ✓ No chewing gum.
  - ✓ No camper will be allowed access to a phone unless approved by an adult.
  
- 2) Respect others:
  - ✓ No hitting, spitting, slapping, punching, kicking, pushing, or physically hurting.
  - ✓ No name calling.
  - ✓ Do not use words such as stupid, retard, idiot, moron, loser, freakin, friggin, faggot, queer, or any other word that is used to hurt or exclude others.
  - ✓ Do not talk about people behind their backs. If you cannot say something to them, do not say it at all.
  - ✓ Do not emotionally hurt others.
  - ✓ No mind games, scaring, babying, or excluding others.
  
- 3) Respect yourself:
  - ✓ Do not leave the building without a counselor or parent/guardian.
  - ✓ Do not leave with your parent/guardian without first signing out and letting a counselor know.
  - ✓ Do not say bad things about yourself; make jokes about yourself that are hurtful, etc.
  - ✓ No Game Boys, electronic handheld devices, CD players, MP3 players, IPODS, DVD players, or cell phones.
  - ✓ Money can be brought to the Ice Rink for snacks at the pool; however the child (regardless of age) is responsible for it.

**LARA SUMMER DAY CAMP 2010  
CAMPER RULES**

**Camper's Name:** \_\_\_\_\_

Infraction System: (What happens if you break these rules)

- ✓ If a camper breaks a rule once, the behavior is pointed out and the camper is asked not to do it again.
- ✓ If a camper breaks a rule twice the camper is put in time out (1 minute for each year of age).
- ✓ If a camper breaks a rule a third time they are sent to the Director/Assistant Director and a parent is notified.
- ✓ If a camper breaks a rule a fourth time they are sent home and suspended depending on the severity of the situation and at the discretion of the Director/Assistant Director.
- ✓ If a child physically hurts, breaks a sexual boundary, uses racial, sexual, or other unacceptable remarks they will be sent home immediately and possibly suspended or expelled from the camp, at the discretion of the Executive Director/ Board of Directors.
- ✓ At any time the Executive Director and Assistant Directors have the right to suspend or expel a camper if the camper is repeatedly found to be breaking rules, disrespectful, or contributes to an unsafe environment.
- ✓ All rules are subject to change without notice.

I, \_\_\_\_\_, (Parent/guardian's name) have read and discussed these rule with my child. I understand that my child can be suspended, expelled, and/or lose privileges if their behavior is not satisfactory. I understand that I will be called and expected to come immediately to pick up my child if it is requested by the counselors or staff. No refunds will be granted.

Parent/Guardian's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I, \_\_\_\_\_, (Camper's name) understand that it is my job to follow these rules. If I do not, I will be put in time out, suspended, expelled, help back from trips, etc. I will try my best to follow all of these rules and learn from any mistake I may make.

Camper's Signature: \_\_\_\_\_ Date: \_\_\_\_\_