

# Earthplace Summer Camp 2009—Camper Information Form

## Age Group (please check one):

- 3's    4's    Entering Kindergarten    Grades 1 & 2  
 Grade 3 & 4    Grades 5-7    Grades 5-9 away

Previous Earthplace Summer Camp Attendee? \_\_\_ YES \_\_\_ NO

**Child's Name** \_\_\_\_\_

Birth date \_\_\_/\_\_\_/\_\_\_ M \_\_\_ F \_\_\_ Grade Entering \_\_\_

School \_\_\_\_\_

## Parent/Guardian Information

**Parent's Name** \_\_\_\_\_

Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Cell # \_\_\_\_\_

Work Name & # \_\_\_\_\_

Parent/Guardian Email \_\_\_\_\_

**Parent's Name** \_\_\_\_\_

Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Cell # \_\_\_\_\_

Work Name & # \_\_\_\_\_

Parent/Guardian Email \_\_\_\_\_

## Allergies and Food Intolerances

\_\_\_ NO known allergies

\_\_\_ YES, my child is allergic to  peanuts  nuts  milk  
 soy  bees  other \_\_\_\_\_

My child has food intolerance to  gluten  other \_\_\_\_\_

Due to my child's food allergies or food intolerances, I understand I must provide a snack if needed.

**Emergency Medications** \_\_\_\_\_

**Other Medical Issues** \_\_\_\_\_

**Child's Doctor** \_\_\_\_\_

Doctor's Phone \_\_\_\_\_

**Child's Dentist** \_\_\_\_\_

Dentist's Phone \_\_\_\_\_

Please indicate any other information which would be helpful in planning for your child \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**T-shirt Size:** Youth XS (2-4) \_\_\_ S (6-8) \_\_\_ M (10-12) \_\_\_

Yth L (14-16) \_\_\_ XL (18-20) \_\_\_ Adult S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_

## Emergency Information

Contacts (with permission to make decisions for the health and welfare of my child and can remove child from premises).

1) Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_

2) Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_

## RELEASES

If parent(s) or legal guardian(s) cannot be reached in the event of an emergency I do hereby appoint the staff of Earthplace to act in my (our) behalf to administer first aid treatment and/or authorize unexpected medical, dental or surgical care and hospitalization for my child. I give permission for my child to participate in all nature trail walks and related outdoor activities, visits to the live animal hall, field trips (1st-9th graders only) as well as other Earthplace Summer Camp activities.

I give my permission to Earthplace to take, use, publish and reproduce photographs, slides or video of my child for publicity purposes. \_\_\_ YES \_\_\_ NO

I give my permission for my child's name, telephone number, address and parents' names to be included on a class list that will be distributed solely to group members. \_\_\_ YES \_\_\_ NO

I give Earthplace staff permission to release my child to the contacts listed above. These people have my permission to make decisions as to the welfare and health of my child.

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

Signature of Parent or Guardian

\_\_\_\_\_

Parent's Name — *Please Print*

## New Camper Survey

How did you hear about us? \_\_\_ Friend \_\_\_ Ad \_\_\_ Flyer

Which:

Website \_\_\_\_\_ Publication \_\_\_\_\_

# Earthplace Summer Camp 2009—Registration Form & Contract

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Home Phone \_\_\_\_\_

(one child per form, fill out this page and Camper Information form)

### 3 Year Olds – Hummingbirds

\$270 per session

- |                       |                   |
|-----------------------|-------------------|
| ___ 3A June 15-19     | ___ 3E July 13-17 |
| ___ 3B June 22-26     | ___ 3F July 20-24 |
| ___ 3C June 29-July 3 | ___ 3G July 27-31 |
| ___ 3D July 6-10      | ___ 3H August 3-7 |

### 4 Year Olds—Woodpeckers

\$300 per session

- |                           |                        |
|---------------------------|------------------------|
| ___ <b>Preschool Room</b> | ___ <b>Malloy Room</b> |
| ___ 4A June 15-19         | ___ 4E July 13-17      |
| ___ 4B June 22-26         | ___ 4F July 20-24      |
| ___ 4C June 29-July 3     | ___ 4G July 27-31      |
| ___ 4D July 6-10          | ___ 4H August 3-7      |

### K– Falcons

\$300 per session

- |                       |                       |
|-----------------------|-----------------------|
| ___ <b>Eco Lab</b>    | ___ <b>Auditorium</b> |
| ___ 5A June 15-19     | ___ 5E July 13-17     |
| ___ 5B June 22-26     | ___ 5F July 20-24     |
| ___ 5C June 29-July 3 | ___ 5G July 27-31     |
| ___ 5D July 6-10      | ___ 5H August 3-7     |

### Grades 1 and 2-Owls

\$335 per session

- |                           |                       |
|---------------------------|-----------------------|
| ___ Owls-1 June 22-26     | ___ Owls 5 July 20-24 |
| ___ Owls-2 June 29-July 3 | ___ Owls 6 July 27-31 |
| ___ Owls-3 July 6-10      | ___ Owls 7 August 3-7 |
| ___ Owls-4 July 13-17     |                       |

### Grades 3 and 4– Hawks

\$335 per session

- |                            |                        |
|----------------------------|------------------------|
| ___ Hawks-1 June 22-26     | ___ Hawks 5 July 20-24 |
| ___ Hawks-2 June 29-July 3 | ___ Hawks 6 July 27-31 |
| ___ Hawks-3 July 6-10      | ___ Hawks 7 August 3-7 |
| ___ Hawks-4 July 13-17     |                        |

### Grades 5 to 7— Eagles

\$490 per session

- |                         |
|-------------------------|
| ___ Eagles 1 June 22–26 |
| ___ Eagles 2 July 6-10  |
| ___ Eagles 3 July 13-17 |
| ___ Eagles 4 July 20-24 |
| ___ Eagles 5 July 27-31 |
| ___ Eagles 6 August 3-7 |

### Grades 5 through 9-Trekkers

- |            |                |       |
|------------|----------------|-------|
| ___ Trek 1 | June 29-July 3 | \$770 |
|------------|----------------|-------|

### Ages 14 & 15 CITs

\$100 per session

- |           |                  |
|-----------|------------------|
| ___ CIT 1 | June 22– June 26 |
| ___ CIT 2 | June 29-July 3   |
| ___ CIT 3 | July 6-10        |
| ___ CIT 4 | July 13-17       |
| ___ CIT 5 | July 20-24       |
| ___ CIT 6 | July 27-31       |
| ___ CIT 7 | August 3-7       |

### Earthplace Summer Camp Contract

I understand that:

- Payment in full is due at the time of registration.
- 75% of tuition will be refunded if cancelled by May 1, 2009.
- No refunds after May 1, 2009.
- A \$25 administration fee is charged for session changes. Payment is due prior to changes.
- Payment for the full session regardless of how many days my child attends is required.
- My child's completed medical form must be returned by May 1, 2009.
- A current Earthplace non-refundable family membership must be maintained.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent's Name \_\_\_\_\_

*Please print clearly*

### Camp Fee Totals

Membership: \_\_\_ Existing \_\_\_ Renewing \_\_\_ New Member  
(see the address label for the expiration of your membership)

\$75 Family Membership Fee \_\_\_\_\_

(for new or renewing)

Total Camp Fees \_\_\_\_\_

Total Due \_\_\_\_\_

Payment by: \_\_\_ Check \_\_\_ Credit Card \_\_\_ MC \_\_\_ Visa \_\_\_ AMEX

Name on card \_\_\_\_\_

Address on billing statement \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Credit Card # \_\_\_\_\_

Security Code on Card \_\_\_\_\_ Exp. Date M/Y \_\_\_\_\_

Signature \_\_\_\_\_

Phone Number \_\_\_\_\_

### **Mail Completed Registration & Camper Information Forms**

**and Payment in Full to**

**Earthplace, PO Box 165, Westport, CT 06881**

Processed by: _____	<i>Office use</i>
Date: _____	Memb. Exp. _____
Amount Paid: _____	Payment type _____