



# SEEK SUMMER CAMP REGISTRATION FORM

TEL: 509-837-8660

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PROGRAM LOCATION: 1521 s 1<sup>ST</sup> Street, Sunnyside, WA

**PLEASE PRINT LEGIBLY AND COMPLETE ALL SECTIONS**

## CAMPER'S INFORMATION HERE

### 1 CAMPER INFORMATION MALE FEMALE

Check this box if address and home phone are the same as Account Holder listed below

Name (First & Last): \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age at time of Camp: \_\_\_\_\_

Grade entering this fall: \_\_\_\_\_ Has Camper ever attended a summer camp before?: \_\_\_\_\_

What language is most often spoken at home?: \_\_\_\_\_

List any Allergies and/or Dietary Restrictions: \_\_\_\_\_

T-Shirt Size:  Youth Small  Youth Medium  Youth Large  Adult Small  Adult Medium  Adult Large

## PARENT/GUARDIAN INFORMATION HERE

### 2 ACCOUNT HOLDER/ PARENT #1/ LEGAL GUARDIAN #1 INFORMATION: (all correspondence and invoices will be sent to this person)

Name (First & Last): \_\_\_\_\_

Email Address: \_\_\_\_\_

**\*Please be sure that your email address is valid. You will receive all correspondence to this email. Add "gweder@sunnyside-wa.gov" to your address book to ensure delivery.**

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Secondary Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Relationship to camper:  Mother  Father  Legal Guardian  Other: \_\_\_\_\_ Custodial Parent?  Yes  No

### 3 PARENT #2/LEGAL GUARDIAN #2 / NON-CUSTODIAL PARENT INFORMATION: (Note: All correspondence and invoices will be sent to the "Account Holder" above)

Name (First & Last): \_\_\_\_\_

Email Address: \_\_\_\_\_

**\*Please be sure that your email address is valid. Add "gweder@sunnyside-wa.gov" to your address book to ensure delivery.**

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Secondary Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Relationship to camper:  Mother  Father  Legal Guardian  Other: \_\_\_\_\_ Custodial Parent?  Yes  No

### 4 EMERGENCY CONTACTS AND AUTHORIZED PICK UP PERSONS: (IN ADDITION TO PARENTS/LEGAL GUARDIANS)

**\*Use this area to list individual(s) we may contact in an emergency and/or you authorize to pick up your camper from camp or pool location at the end of a day in the event that you are unable to do so.**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Relationship to Camper: \_\_\_\_\_

Relationship to Camper: \_\_\_\_\_

Relationship to Camper: \_\_\_\_\_

### 5 HOW DID YOU HEAR ABOUT SUMMER CAMP?

Internet, where: \_\_\_\_\_  School, which: \_\_\_\_\_  Newspaper  Other: \_\_\_\_\_

CAMPER NAME (FIRST & LAST):

**6 PROGRAM INFORMATION**

| Day Camps (Ages 7-12)                                   | Check Box of Session(s) you are registering for |      | Day Campers have the option of walking to the Sunnyside Municipal Swimming Pool on Thursdays for swimming. Parents must pick their child up from Central Park by 5pm on Thursday if participant opts to go swimming. Parents can give permission during registration or during the week of camp. |  |
|---|---|------|--|--|
| Around the World June 20 - June 24                      |   | \$50 | SWIM THURSDAY PERMISSION   |  |
| Awesome Astronomers! June 27—July 1                     |   | \$50 | SWIM THURSDAY PERMISSION   |  |
| All American Road-Trip July 5- 8* <b>No Camp July 4</b> |   | \$50 | SWIM THURSDAY PERMISSION   |  |
| Sail the 7 Sea's July 11—July 15                        |   | \$50 | SWIM THURSDAY PERMISSION   |  |
| Mad Science July 18—July 22                             |   | \$50 | SWIM THURSDAY PERMISSION   |  |
| Fun & Fitness July 25—July 29                           |   | \$50 | SWIM THURSDAY PERMISSION   |  |
| Zootopia! August 1—August 5                             |   | \$50 | SWIM THURSDAY PERMISSION   |  |
| All Sports Camp August 8—August 12                      |   | \$50 | SWIM THURSDAY PERMISSION   |  |
| Mini Camps (Ages 4-6)                                   | Check Box of Session(s) you are registering for |      |  |  |
| Around the World June 20 - June 24                      |   | \$50 |  |  |
| Awesome Astronomers! June 27—July 1                     |   | \$50 |  |  |
| All American Road-Trip July 5- 8* <b>No Camp July 4</b> |   | \$50 |  |  |
| Sail the 7 Sea's July 11—July 15                        |   | \$50 |  |  |
| Mad Science July 18—July 22                             |   | \$50 |  |  |
| Fun & Fitness July 25—July 29                           |   | \$50 |  |  |
| Zootopia! August 1—August 5                             |   | \$50 |  |  |
| Mini Sports Camp August 8—August 12                     |   | \$50 |  |  |

CAMPER NAME (FIRST & LAST):

### RELEASE

I (we) am/are the parents(s) or legal guardian of the above named child who desires to be a participant in the City of Sunnyside recreation activity. It is important to me(us) that this child be allowed to participate in this activity. I(we) understand there are special dangers and risks inherent in this activity, including but not limited to, the risk of serious physical injury, death or other harmful consequences which may arise directly or indirectly from the child's participation in this activity. Being fully informed as to these risks and in consideration of the City's allowing my(our) child to participate in this sponsored activity and/or use of City facilities I(we), on behalf of myself(ourselves) and on behalf of the above named participant child, assume all risk of injury, damage and harm to the child which may arise from the child's participation in the activities or use of City facilities. I(we) further agree, individually and on behalf of the above named child, to release and hold harmless the City of Sunnyside, its officials, employees and agents and agree to waive any right of recovery that I(we) may have to claim or lawsuit for damages against them for any personal injury, death or other harmful consequences occurring to the above name child to participate in the activity described above.

I (we) authorize any necessary emergency medical treatment that might be required for this child in the event of physical injury and/or accident to this child while participating in this program.

(parents'/legal guardians' Initials) \_\_\_\_\_

I (we) hereby consent to allow this child's picture or likeness to appear in any official document, City of Sunnyside website, sponsor advertisement and/or City produced television coverage of City sponsored recreational activity without compensation to me (us).

(parents'/legal guardians' initials) \_\_\_\_\_

**SIGN HERE**

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

#### OFFICE USE ONLY

**\$50 per session x \_\_\_\_\_ (amount of sessions) = \$ \_\_\_\_\_ total due**

**Received by: \_\_\_\_\_ Date: \_\_\_\_\_**