

HANOVER PARKS & RECREATION

SUMMER CAMPS 2010

June 28th – August 6th

I. CAMP INFORMATION

_____ **Circle H**—\$125 Monday — Friday Max Enrollment: 20 9 am to 12 pm
Hanover Residents & Registration in person ONLY beginning 6/1/10 (9am)

_____ **Dragonfly AM Session** 8:30 am to 12 pm _____ **Dragonfly PM Session** 12 pm to 4:30 pm
 \$175 for each session for the summer (Hanover Residents)
 \$350 for each session for the summer (Non Residents)

*** **Dragonfly by the Week** – full day only 8:30 am to 4:30 pm
 \$85 per week (Hanover Residents) \$170 per week (Non Residents)

_____ Week 1: June 28th
 _____ Week 2: July 5th
 _____ Week 3: July 12th

_____ Week 4: July 19th
 _____ Week 5: July 26th
 _____ Week 6: August 2nd

Tween—\$70 per week (Hanover Residents) 8:30 am to 4:30 pm
 \$140 per week (Non Residents)

_____ Week 1: June 28th
 _____ Week 2: July 5th
 _____ Week 3: July 12th

_____ Week 4: July 19th
 _____ Week 5: July 26th
 _____ Week 6: August 2nd

Camp Quest—\$50 per day or \$200 for the week (Hanover Residents) 8:30 am to 4:30 pm
 \$60 per day or \$240 for the week (Non Residents) (Max Enrollment: 40)

_____ Monday 8/9
 _____ Tuesday 8/10
 _____ Wednesday 8/11

_____ Thursday 8/12
 _____ Friday 8/13

II. CAMPER INFORMATION

Camper's Name: _____ Fall 2010 Grade: _____ Age: _____ DOB: _____

Camper's Address _____

Mom's name: _____ Home Phone: _____ Day #: _____ Cell # _____

Dad's name: _____ Home Phone: _____ Day #: _____ Cell # _____

Caregiver: _____ Day #: _____ Cell # _____

Email address: _____

In the event of an emergency, and we cannot reach one of the above listed contacts, please supply a name and number for an additional person to call:

Name: _____ Relationship: _____ Day #: _____ Cell # _____

III. CHECK OUT INFORMATION

My Camper will be picked up by parent, caregiver or the following individuals:

Name _____ Phone _____ Relationship _____
Name _____ Phone _____ Relationship _____

IV. SPECIAL CONSIDERATIONS

Please list any allergies/medications/behavioral plans/or special needs your camper has: _____

V. CONSENTS

I certify that I am the parent or legal guardian of _____ (camper's name). By initialing below I am hereby giving my consent to the following:

- _____ Photo/Video Consent for my camper to be photographed, videotaped or otherwise recorded during camp.
- _____ Field Trip Consent for my camper to participate in all field trips led by Hanover Parks & Recreation camps..
- _____ Food Consent for my camper to eat meals or snacks provided by Hanover Parks & Recreation camps.
- _____ Permission for my camper to participate in camp activities such as group games, arts & crafts, G and PG movies and sports led by Hanover Parks & Recreation camps.
- _____ Permission for my camper to participate in all swimming activities led by Hanover Parks & Recreation camps.

VI. RELEASE AND INDEMNIFICATION AGREEMENT:

Please read carefully and sign below.

The undersigned, being the parent and/or legal guardian of the above named child, in consideration of the agreement by the Town of Hanover to allow my child to participate in the day camp program listed above, hereby agrees as follows:

1. That no claim will be made by the undersigned on behalf of myself or on behalf of my child for personal injuries of other losses sustained by my child as a result of my child's participation in the above listed day camp program.
2. That in the event any claim is made by my child for injuries or damages sustained by my child as a result of my child's participation in the above listed day camp program. I shall hold the Town of Hanover, the Parks and Recreation Department, and all their agents, principals, employees and representatives harmless from, and indemnify them against, any such claims, including reasonable attorneys' fees incurred by my child in connection therewith, whether or not such claims result in litigation.

The undersigned acknowledges that my child's participation in the above listed day camp program may reasonably be considered a dangerous activity. This agreement is executed by the undersigned upon the understanding that the Town of Hanover will use best efforts in the conduct of the day camp program.

Parent/Guardian Signature _____ Date: _____

If you have any questions or concerns about the day camp program, please don't hesitate to contact Liz Burdette, Assistant Director at 603-643-5315 or Liz.Burdette@Hanovernh.org.

