



Village of Kingston 2022 Summer Day Camp Registration Form



Name of Camper: _____

Pronoun (he/she/they): _____

Date of Birth: _____ (MM/DD/YYYY)
(birth certificate required for ages 5 & 12 only)

Age: _____

Home Address: _____

Emergency & contact information during camp hours - must list at least two phone numbers.

Name	Relationship	Home #	Work #	Cell #	Pick Up (Y/N)

Medical information that our counsellors should be aware of (medications, allergies, special needs, other):

Behavioural Assistance, extra support, your child's personal tendencies to assist counsellors:

Does your child have an EA at school?

Permission Information

My child has permission to walk/ bike back and forth to the Day Camp from home by themselves: Yes No

My child has permission to go on posted walking/ bus outings: Yes No

Permission for photos including my child for Village program promotion: Yes No

Waiver and Releases. Please read the following carefully.

I, the parents/guardian of _____ hereby give consent for him/her/they to participate in the Village of Kingston Summer Day Camp Program and further agree to abide by the rules, regulations and decisions of the Day Camp Summer staff.

I do hereby, waive, release, and indemnify and agree to hold harmless the Village of Kingston and its members, staff, volunteers from any claim whatsoever arising from my child's participation in the Kingston Summer Day Camp Program.

In giving this waiver, I understand that there is a risk of injury in my child participating in Kingston Summer Day Camp Program, and that the Kingston Summer Day Camp Program does not provide one-on-one supervision of the activities.

Parent/Guardian Name(s): _____

Signature of Parent/Guardian: _____

Date: _____ (MM/DD/YYYY)

E-mail address to receive weekly Parent Guide: _____



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- Day camp costs are \$100 per child, per week.
- Regular camp hours are from 8:30am to 4:00pm, with drop off no earlier or later than times listed.
- Before and After Care is available from 8:00am - 8:30am, and 4:00pm to 4:30pm for an additional \$10 per half hour/per child.
- Cash, Cheque or Debit payments are to be made at the Village Office.
- Any planned walking trips, visitos, or bus trips may be changed, added or cancelled.
- Weekly schedule to be emailed to parents prior to week their child is signed up for.

Check the weeks your child will attend the Day Camp, and check beside any before/aftercare needed.

Name of Camper: _____

Weekly Activities	Cost	Before/After Care	Total	Amount Paid	Invoice #
WEEK ONE: July 4th - 8th Activities at Stronach Park Crafts with 7 Arts	\$100 / <u>week</u>	\$10 Before			
		\$10 After			
WEEK TWO: July 11th - 15th Pirate Day Sport days (rugby/ karate)	\$100 / <u>week</u>	\$10 Before			
		\$10 After			
WEEK THREE: July 18th - 22nd Visit from Dragonfly Haven Therapeutic Animal Farm Crafts with 7 arts	\$100 / <u>week</u>	\$10 Before			
		\$10 After			
WEEK FOUR: July 25th - 29th Day at Yogi-Bear Campground PJ Day	\$100 / <u>week</u>	\$10 Before			
		\$10 After			
WEEK FIVE: August 2nd- 5th *no camp on August 1st Trip to Greenwood pool Visit Library	\$100 / <u>week</u>	\$10 Before			
		\$10 After			
WEEK SIX: August 8th - 12th Trip to Oaklawn Farm Zoo Crafts with 7 Arts	\$100 / <u>week</u>	\$10 Before			
		\$10 After			
WEEK SEVEN: August 15th - 19th Stronach Park Scavenger Hunt Bouncy castle/ Pizza Day	\$100 / <u>week</u>	\$10 Before			
		\$10 After			
Total					

Signature of Parent/Guardian: _____

Date: _____

(MM/DD/YYYY)