

Day Camp & Carrier Camp Registration Information

If you are planning to register for 2021 Day Camp and/or Carrier Camp, please take a moment to thoroughly review this important information about registration. Day Camp is open to children who have completed grades K-5. Carrier Camp is open to children who have completed grades 4-8.

- Registration for J-D and ESM district residents opens at **8:00am on Tuesday, May 4** at the Recreation Office ONLY. Online registration is not available for Day Camp or Carrier Camp.
- Each person can register one (1) family ONLY. Please use a separate form for each camper.
- At least one half (1/2) of the total fee is due at registration. Cash, check or *credit card will be accepted. **Please note a 3.09% service fee will be applied to all credit/debit card transactions.* All balances must be paid in full by Friday, June 11.
- Space is extremely limited – we highly recommend registering on May 4.
- **Before Registration:**
 - Ensure that your RecDesk account is set up properly at <https://townofdewitt.recdesk.com>. If your account is not set up, you will be asked to step out of line and set one up before you can register. Contact the Recreation Office at (315) 446-3910 x 9 **before May 4** if you need assistance setting up your account.
 - Complete the required registration forms and waivers. Forms can be found at www.townofdewitt.com/departments/recreation/summer_day_camp/index.php
 - Obtain a copy of your child's immunization records. **Registration forms will not be accepted without immunization records.**
- **Registration Day (May 4):**
 - Please **do not** arrive at the Town Hall before 7:00am on May 4. This is for your safety. Doors will not open until 8:00am.
 - Due to safety protocols, the line for registration will be outside. Please plan accordingly. Masks are required at all times.
 - Have your registration forms, waivers and your form of payment (cash, check or credit card) ready. Checks should be made out to *Town of DeWitt*.
- We will **not** accept registrations for Day Camp or Carrier Camp by fax or in the mail.
- Non-resident registration will begin on Tuesday, June 1 on a space available basis.
- Once the programs are full, we will begin a wait list. You can sign up for the wait list online or in the Recreation Office on a first come, first serve basis.
- If you have any questions please contact the Recreation Office at (315) 446-3910 x 9.

TOWN OF DEWITT DAY CAMP REGISTRATION

The Town of DeWitt Summer Day Camp program offers supervised activities for children who have completed grades K – 5. It is a limited enrollment program that is sponsored by the Town of DeWitt Recreation Department and is not affiliated with the J-D or ESM School Districts. The use of school buildings or school buses during camp is not to be mistaken for school sponsorship of any kind. The Town of DeWitt Recreation Department reserves the right to take any necessary steps to provide a safe, non-disruptive environment for both campers and staff.

For Office Use Only

GROUP/HOMEROOM _____

AM TRANSPORTATION Parent Walk CEH

PM TRANSPORTATION Parent Walk CEH

YOU MUST HAVE IMMUNIZATION RECORDS TO REGISTER FOR CAMP. NO EXCEPTIONS!

Camper's Name _____

Address _____
Street City Zip

Camper's Current Grade _____ Date of Birth _____ Age _____

Parent/Guardian #1 _____

Cell _____ Work _____ Home _____

E-mail Address (required) _____

Parent/Guardian #2 _____

Cell _____ Work _____ Home _____

E-mail Address _____

Any parental custody arrangements we should be aware of? _____

Does your child have permission to walk home from camp? Yes No

Emergency Contacts/Authorized Pick-Ups (NOT Parent/Guardian)

NOTE: Emergency contacts will be called if parent/guardian(s) cannot be reached. Staff will not permit others to pick your child up from camp without expressed permission from you. If you would like to list additional emergency contacts/authorized pick-ups, please use the Additional Emergency Contact form.

Name _____ Phone _____

Name _____ Phone _____

Day Camp Add-Ons – Check All That Apply

Camp Extended Hours (CEH)

AM Extended Hours (7:30-9:30)

PM Extended Hours (3:00-5:15)

Cost

\$150 J-D/ESM Residents \$200 All Others

\$150 J-D/ESM Residents \$200 All Others

HEALTH HISTORY

CAMPER'S NAME:

Medications at Camp: _____ EpiPen _____ Inhaler _____ Other _____

NOTE: You must indicate on this form if your child will have an EpiPen, Inhaler, or other medication at camp. A doctor's note is required to have medications at camp.

Allergies/Illnesses: List any allergies to foods, medications, or the environment, any recurring illnesses and/or any specific medical illnesses. Please notify the Recreation Office if your child is exposed to any communicable disease prior to or during camp.

Behavior: Please describe any behavioral concerns you may have regarding your child that the Recreation Office should be made aware of.

PARENT'S AUTHORIZATION: The health history is correct so far as I know, and the person herein described has permission to engage in all prescribed camp activities, except as noted by me. In the event I cannot be reached in an emergency, I hereby give permission to the physician and/or hospital selected by the Recreation Department in compliance with Onondaga County Health Regulations to hospitalize, secure proper treatment for, and order injection, anesthesia or surgery for my child as named above.

**NO MEDICAL INSURANCE IS CARRIED BY THE TOWN FOR PROGRAM PARTICIPANTS.
REGISTRANTS ARE ENCOURAGED TO HAVE THEIR OWN MEDICAL COVERAGE.**

In consideration of your accepting this registration, I, the undersigned, intending to be legally bound hereby, for myself, my heirs, executors and administrators, waive and release any and all claims for damages I may have against the Town of DeWitt, the Town of DeWitt Parks and Recreation Department, the Town of DeWitt Parks and Recreation Commission, and all sponsors, representatives, successors and assigns, for any and all injuries suffered by my child in said program.

PARENT/GUARDIAN SIGNATURE

DATE

MODEL/TALENT RELEASE

I hereby give the Town of DeWitt Recreation Department and its successors and assigns, unrestricted permission to publish in print and/or internet, reproduce, alter, distribute, and/or broadcast in perpetuity images and/or video segments taken of the minor subject identified on this form.

I understand that these images and/or video segments may be manipulated and combined with other images and/or edited into a video presentation but that the subject may be recognizable in the final version.

Children's names will not be used.

PARENT/GUARDIAN SIGNATURE

DATE

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

The Town of DeWitt Parks and Recreation Departments (“the Town”) has put in place preventative measures to reduce the spread of COVID-19; however, the Town cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the Town’s programming could increase your risk and your child(ren)’s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the Town’s programming and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Town’s programming may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Town employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)’s attendance or participation in Town programming (“Claims”). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the Town, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Town, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Town program.

Print Name(s) of Participant(s)

Print Name of Parent/Guardian (if participant is under 18)

Participant or Parent/Guardian Signature

Date