Department of Parks, Recreation and Community Services JaxParks Aquatics

2018 Ocean Camp Registration Form

Location: Kathryn Abbey Hanna Park, 500 Wonderwood Drive







Session Information

PLEASE CIRCLE ALL SELECTIONS THAT APPLY:

June 18 - 29 July 2 - 13** July 16 - 27

Camp: 9 a.m. - 4 p.m. Camp: 9 a.m. - 4 p.m. Camp: 9 a.m. - 4 p.m. Extended day: 7 – 9 a.m. Extended day: 7 – 9 a.m. Extended day: 7 – 9 a.m. Extended day: 4 – 6 p.m. Extended day: 4 – 6 p.m. Extended day: 4 – 6 p.m.

No camp on July 4

FEE: \$150 per two-week session and \$25 for extended care per two-week session.

Please read and initial you understand the following refund policy:

_A \$20 administrative fee is applied to all refunds. Participants accepted on a first come, first served basis, limited space.

Participant Information						
					М	F
Child's Name		Date of Birth		Age	Sex	
Parent's/Guardian's Name		Emergency Conta	act Name			
Home Phone Work Phone		Home Phone	-	Work Phone		
Address		Address				
City, ST ZIP Code		City, ST ZIP Cod	le			
Email						
Who will be responsible for picking up the child daily? Parent / guardian must sign their child in daily upon arrival and sign out daily upon departure.						
Name			Phone Number			
Name			Phone Number			
I, give my child permission: (check all the apply)						
Parent's/Guardian's Name	to walk	and/ or	to ride			
	To camp	and/or	From camp			
	at above named fa	cility without being	contacted.			
Medical Information						
Physician's Name			Phone Number			
Allergies/Special Health Considerations						
GENERAL RELEASE OF LIABILITY						
I hereby release and agree to hold harmless the, C accrue from injury to my child or property. I further higive my permission to make the necessary arrange I also understand that falsification of information delessons.	néreby give my relea: ments to provide em	se for field trips and ergency care and tr	I the publishing of eatment for my ch	any and all photographild if an accident or se	hs or likeness. erious illness oc	í also curs.
Please print, sign, and date and submit the form in	person to JaxParks A	Aquatics.				
Parent's/Guardian's Signature			Date			