



Session Information

PLEASE CIRCLE ALL SELECTIONS THAT APPLY:

June 18 - 29

Camp: 9 a.m. – 4 p.m.

Extended day: 7 – 9 a.m.

Extended day: 4 – 6 p.m.

July 2 - 13**

Camp: 9 a.m. – 4 p.m.

Extended day: 7 – 9 a.m.

Extended day: 4 – 6 p.m.

No camp on July 4

July 16 - 27

Camp: 9 a.m. – 4 p.m.

Extended day: 7 – 9 a.m.

Extended day: 4 – 6 p.m.

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

				M	F
Child's Name		Date of Birth	Age	Sex	
Parent's/Guardian's Name		Emergency Contact Name			
Home Phone	Work Phone	Home Phone	Work Phone		
Address		Address			
City, ST ZIP Code		City, ST ZIP Code			
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 facility without being contacted.

Medical Information

Physician's Name	Phone Number
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Allergies/Special Health Considerations

GENERAL RELEASE OF LIABILITY

I hereby release and agree to hold harmless the, City of Jacksonville, JaxParks, its employees and sponsors, from all liabilities and claims that may accrue from injury to my child or property. I further hereby give my release for field trips and the publishing of any and all photographs or likeness. I also give my permission to make the necessary arrangements to provide emergency care and treatment for my child if an accident or serious illness occurs. I also understand that falsification of information detailed on this application about my child's age will result in immediate termination of my child from lessons.

Please print, sign, and date and submit the form in person to JaxParks Aquatics.

Parent's/Guardian's Signature	Date
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