

# Application *(complete the front and back)*

Date \_\_\_\_\_ Received \_\_\_\_\_

**Please check (✓) applicable: Camper or Junior Counselor**

Camper     Jr. Counselor

**Please select weeks and enrichment classes on page 17.**

## St. Nicholas School Summer Camp Application Form

I hereby enroll \_\_\_\_\_ for the St. Nicholas Summer Program week[s] indicated on the reservation form [shown on back of this form]. I understand that completion of the medical form is a program requirement for day camp. All activities require completion of the Parent Release form below.

Camper's address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Camper's date of birth \_\_\_\_\_ Age \_\_\_\_\_ Grade Entering \_\_\_\_\_ Current School \_\_\_\_\_

Parent's Name \_\_\_\_\_ Cell \_\_\_\_\_ Phone (W) \_\_\_\_\_ Phone (H) \_\_\_\_\_

Email \_\_\_\_\_

Parent's Name \_\_\_\_\_ Cell \_\_\_\_\_ Phone (W) \_\_\_\_\_ Phone (H) \_\_\_\_\_

Email \_\_\_\_\_

List those who are authorized to pick up your child: \_\_\_\_\_

Known allergies, including food allergies: \_\_\_\_\_

Special medication or routines (please give instructions): \_\_\_\_\_

Over-the-counter medication that may be given without calling the parent/guardian, please list:

Physician \_\_\_\_\_ Phone \_\_\_\_\_ Health Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

In case of emergency, we would always call parents first. If parents are not available, whom would you like us to contact?

1) \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

2) \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

3) \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Did you attend St. Nicholas Summer Camp last summer? \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

Camper's t-shirt (indicate **YOUTH or ADULT S,M,L,XL**) \_\_\_\_\_ **(If you don't tell us, we have to guess)**  
Each camper receives ONE t-shirt.

Indicate if you wish to order additional T-shirts \_\_\_\_\_ at \$10 each / include sizes? \_\_\_\_\_

### Parental Release *(please read and sign)*

As parent or guardian of the above student/camper, I give my permission for my child/ward to participate in activities of the St. Nicholas Summer Programs. I have read the rules and policies of the St. Nicholas Summer Camp Program. I understand the St. Nicholas Summer Camp adheres to these rules.

I agree to follow the policies of the St. Nicholas Program. I understand that failure to do so may result in our being discharged from the program. I understand that payment is expected in advance and I understand that cancellation fees apply, and that there is a late fee of \$2.00 per minute, per child, for pickup after 6:00PM. I also agree to pay, to the fullest extent permitted by law, all collection costs, including reasonable attorney fees.

In the event of injury during the program, I agree that St. Nicholas School and its agent(s) may consent to any appropriate medical treatment for my child/ward, should my consent not be reasonably obtained. This consent shall be in effect for the duration of the program. I understand that St. Nicholas School does not provide insurance coverage for the Summer Camp Program participants and that I am responsible for coverage for my child/ward. Further, I agree to hold harmless St. Nicholas School, its agent(s) and employees against any loss or damage for any injury, illness, or other condition arising out of my child's participation in St. Nicholas Summer Camp program.

From time to time, there has been a need to use photos of summer campers, both in newspapers and brochures, as a means of advertisement for the camp. Keeping in mind that the pictures will be chosen with both your child's and St. Nicholas' best interest in mind, you give permission by signing here.