

## JUNE 19, 2023 - AUGUST 11, 2023 JUNE 19, 2023 - AUGUST 11, 2023 Monday - Friday 9:00 AM - 3:00 PM Ages 5 - 12 2023 CAMP CAPE MAY REGISTRATION FORM

and More!

Chocolate Day, Morrie Day, Pool Days Salore!

FEES & REGISTRATION All Summer (8 Weeks) - \$1,000 Weekly (based on availability) - \$200 Per Week

Child's Name:		
		Age:
Child's T-Shirt Size (please circle):	CHILD / ADULT	X-SMALL / SMALL / MEDIUM / LARGE / X-LARG
List any Allergies:		Allergic to Stings? YES / NC
PARENT / GUARDIAN INFORMATI	<u>ION</u>	
Parent/Guardian Name:		
Home Phone:	_ Work Phone:	Cell Phone:
Email:		
Street Address:		
Сіту:	State	:: Zip Code:
	Phone Number (01	THER THAN PARENT/GUARDIAN):
Name:		
Phone Number:		
Additional Name(s) and Phone Numb	er(s) of those allow	wed to pick up Camper:
Name and Phone Number:		
Name and Phone Number:		
Name and Phone Number:		

## PLEASE SELECT WEEKS CHILD WILL BE ATTENDING OR SELECT FULL SUMMER:

FULL SUMMER (ALL 8 WEEKS)

- \_\_\_\_\_ June 19 June 23
- \_\_\_\_\_ June 26 June 30
- July 3 July 7
- \_\_\_\_\_ July 10 July 14
- \_\_\_\_\_ July 17 July 21
- \_\_\_\_\_ July 24 July 28
- \_\_\_\_\_ July 31 August 4
  - \_\_\_\_ August 7 August 11

Before & After Care Available for additional fee of \$5.00 Per Child, Per Hour between 8 AM and 9 AM and between 3 PM and 5 PM payable weekly.

- All Children must be toilet trained and be able to attend to their own hygiene. If a toilet accident occurs, the Staff will notify the Camper's Parent/Guardian to immediately come and pick up the child for the remainder of the day.
- Lunches, snacks, and drinks must be provided by Campers. The City does not provide food, snacks, or drinks. Kiwanis Park does have a water fountain.

To register, fill out attached form and:

- Mail to City of Cape May ATTN: David Scheffler - Recreation Department 643 Washington Street Cape May, NJ 08204
- Or drop off at Convention Hall: 714 Beach Avenue Cape May, NJ 08204

\*All registration payments for camp must be made by June 1, 2023. Payment must accompany registration form to secure the child's position in camp. Space is limited and registration is first come, first serve. Before & After Care payments may be made weekly during the Camp Season.

## WAIVER AND RELEASE

The undersigned, being over the age of 18 years, hereby acknowledge that there are certain risks in participating in the Camp Cape May Program (the "Activity"). In consideration of the City allowing my child to use its facilities to participate in the Activity, I hereby assume all risks associated with the Activity, including but not limited to, full and complete responsibility for any injury or accident which may occur to my child in connection with the Activity. This release is intended to discharge the City of Cape May, its officials, officers, employees, volunteers, and agents from liability, even in the case of perceived negligence on the part of persons mentioned above. It is understood that some recreational activities involve an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. I knowingly and intentionally hereby release and waive any and all claims, of whatsoever kind or nature that I may have against the City, its officials, employees, agents and representatives, resulting in whole or in part, from participation in the Activity. This release and waiver shall also be binding on my heirs, administrators, and assigns.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

INTERNAL USE ONLY - TO BE FILLED OUT BY RECREATION DEPARTMENT STAFF ONLY

PAYMENT TYPE (CIRCLE ONE): CASH / CHECK

DATE RECEIVED:

Contact our Recreation Department for more information! Phone: (609) 884-9565 Website: www.capemaycity.com Email: recdept@capemaycity.com