

**REGISTRATION FORM**  
**Holderness Recreation**  
**DAY CAMP 2004**

**Please circle the sessions you wish to register for**

Session #1 June 28 to July 9    Session #2 July 12 to July 23    Session #3 July 26 to August 6

If you wish to register for **one week** of a session at the cost of \$85 plus a \$20 activity fee per week, fill in below

Week # \_\_\_\_\_ of Session # \_\_\_\_\_    Dates \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Camper's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Physical Address \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade(in Fall) \_\_\_\_\_ Sex M F

**EMERGENCY INFORMATION**

Parent's Name \_\_\_\_\_

Work/Day Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Physician \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Medical Insurance \_\_\_\_\_ Policy# \_\_\_\_\_

Medication \_\_\_\_\_

Allergies \_\_\_\_\_

Any other information that will help our staff meet your child's needs:

*Cost per two-week session is: before May 15 \$140 plus a \$33 activity fee, after May 15 \$150 plus a \$33 activity fee*  
**A non-refundable deposit of \$75 per session is required to hold your child's space.** Please note that the new activity fee will cover all the weekly fieldtrip costs that were previously collected on the day of the fieldtrip. Please make **checks payable to Holderness Recreation** and mail to PO Box 203, Holderness NH 03245. Enrollment is limited. First come, first serve. Full payment deadline: two weeks prior to the start date for each session..

We periodically take pictures of campers in activities. Some pictures may be used by Holderness Recreation for advertisement and Day Camp promotions.

Holderness Recreation reserves the right to dismiss campers with extreme discipline problems from Day Camp.

**RELEASE OF ALL CLAIMS**

In consideration of the permission granted for the above named participant to take part in the above named Holderness Recreation program, I hereby release for myself and my heirs, the Town of Holderness, its agents, employees, volunteers, and other program participants, from all actions, damages, and claims that may result in personal injuries and property damages.

I recognize there may be inherent dangers in participating in Holderness Recreation Programs which may present a strain on the body and its parts, and furthermore, I represent that to the best of my knowledge the participant is in proper physical condition to allow participation. I therefore assume all risks associated with participation in said program.

I understand that, in case of injury or illness, Holderness Recreation will attempt to contact the person identified above as the "emergency contact". In the event of a medical emergency, I consent to the participant's treatment by a medical doctor and I agree to pay all costs associated with said treatment, including transportation to the medical facility.

I, the undersigned, have read this release and understand all its terms and implications and I hereby execute this release of my own free will and with full knowledge of its significance.

\_\_\_\_\_  
Signature Parent / Guardian

\_\_\_\_\_  
Date

