



Camp Catch a Dream

Fall & Winter Session

Name of Camper	2017-2018 Grade	Birthdate	Name of Camper	2017-2018 Grade	Birthdate
1			2		
3			4		
5			6		

Any allergies? _____

Any medical conditions that we should be aware of? _____

Is your child taking any medications while attending camp? _____

Does our staff need to administer the medication? YES or NO If so, please fill out the Medicine Permission Slip.

Emergency contact if you are not available. Name: _____

Relationship to Camper: _____ Phone #: _____

	Parent/Guardian - 1	Parent/Guardian - 2
Name		
Title		
Mailing Address		
City / Zip		
Email		
Home #		
Cell #		
Work #		

The following people have my permission to pick up my camper(s):

Name	Phone #	Relationship to Camper(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Camp staff will ask for picture id prior to releasing child to them. Please be prepared to show picture id.

_____ I am aware that payment to camp must be made prior to my camper(s) attending.

Initial

*** Please mark below which camp days your camper is attending camp. ***



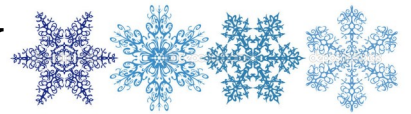
FALL SESSION - November -



MON	TUE	WED	THU	FRI
20	21	22	23	24
\$28 x _____	\$28 x _____ Fieldtrip Day	\$28 x _____ Fieldtrip Day	NO CAMP	NO CAMP



WINTER SESSION - December -



MON	TUE	WED	THU	FRI
25	26	27	28	29
NO CAMP	NO CAMP	\$28 x _____	\$28 x _____	\$28 x _____

- January -

MON	TUE	WED	THU	FRI
1	2	3	4	5
NO CAMP	NO CAMP	\$28 x _____	\$28 x _____	\$28 x _____

If your camper is attending other FRRPD programs at the Activity Center, please indicate so below.

Program: _____ Day: M T W Th F Time: _____

Program: _____ Day: M T W Th F Time: _____

Program: _____ Day: M T W Th F Time: _____

Consequences of Misbehavior:

- ◆ **First Offense** Verbal Warning
- ◆ **Second Offense** Written Warning & Time to Reflect
- ◆ **Third Offense** Sent home for day
- ◆ **Fourth Offense** Sent home for week
- ◆ **Five Offense** Termination from camp

Electronic Toys/Cell Phone

Camper(s) will be allowed electronic time up to three times a day (morning, after lunch, and the last hour of camp). Camper(s) are not allowed to surf the internet, only play the appropriate games that are on the unit.

- ◆ **First Offense** Verbal warning
- ◆ **Second Offense** Loss of electronic time for day
- ◆ **Third Offense** Loss of electronic time for 5 days
- ◆ **Fourth Offense** Loss of electronic time for 2 weeks
- ◆ **Five Offense** Complete loss of electronic time for camper

FRRPD is not responsible for any lost or stolen electronics.

- I agree with the Behavior and Electronic Toy/Cell Phone consequences stated above.**
- I do not agree with the Behavior and Electronic Toy/Cell Phone consequences stated above.**

Print Name

Signature

Date

Photo Release

Feather River Recreation & Park District like to use photos of Camp Catch a Dream campers to promote the camp. The photos will be used for thank you cards, journals, activity guides, flyers, and marketing purposes for FRRPD. If you would or would not like your child's photo used in the promotion of FRRPD, please indicate so below by checking the correct box.

- I authorize my child's picture to be used to promote FRRPD.
- I do not want my child's picture to be used to promote FRRPD.

Parent/Guardian Agreement

I have read and understand terms and conditions of Camp Catch a Dream's Summer Session Registration Packet. I am satisfied with the methods of discipline, education, and activities as set forth in the packet. Should I have questions or concerns now or in the future, I will not hesitate to contact the Director or Assistant Director of FRRPD Children's Services to discuss

Parent/Guardian Signature

Date



If you are planning to send your child/children to FRRPD upcoming February and/or Spring Sessions, please let us know which days you're interested in.

February

19	20	21	22	23
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April

2	3	4	5	6
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