



Feather River Recreation and Park District  
 1875 Feather River Blvd. (530) 533-2011



# Camp Catch a Dream

## 2018 Summer Session

Name of Camper	2018-2019 Grade	Birthdate	Name of Camper	2018-2019 Grade	Birthdate
1			4		
2			5		
3			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 ask to complete the Medicine Permission Slip.

**Emergency contact if you are not available. Name:** \_\_\_\_\_

**Relationship to Camper:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

	[[ Contact First ]] Parent/Guardian	Parent/Guardian
Name		
Title		
Mailing Address		
City / Zip		
Email		
Contact this # 1st	Home Work Cell	Home Work Cell
Contact this # 2nd	Home Work Cell	Home Work Cell
Contact this # 3rd	Home Work Cell	Home Work Cell

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.**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>WEEK #1</b> <u>Welcome</u>	JUN-11 _____ x \$28 SWIMMING	JUN-12 _____ x \$28 SWIMMING	JUN-13 _____ x \$28 SWIMMING	JUN-14 _____ x \$28 SWIMMING	JUN-15 _____ x \$28
<b>WEEK #2</b> <u>Recycle, Reduce, Reuse</u>	JUN -18 _____ x \$28 SWIMMING	JUN-19 _____ x \$28 SWIMMING	JUN-20 _____ x \$28 SWIMMING	JUN-21 _____ x \$28 SWIMMING	JUN-22 _____ x \$28
<b>WEEK #3</b> <u>Minute –To-Win-It Challenge</u>	JUN-25 _____ x \$28 SWIMMING	JUN-26 _____ x \$28 SWIMMING	JUN-27 _____ x \$28 SWIMMING	JUN-28 _____ x \$28 SWIMMING	JUN-29 _____ x \$28
<b>WEEK #4</b> <u>Disney</u>	JUL-2 _____ x \$28 SWIMMING	JUL-3 _____ x \$28 SWIMMING	JUL-4 <b>Holiday NO CAMP</b>	JUL-5 _____ x \$28 SWIMMING	JUL-6 _____ x \$28
<b>WEEK #5</b> <u>Animal</u>	JUL-9 _____ x \$28 SWIMMING	JUL-10 _____ x \$28 SWIMMING	JUL-11 _____ x \$28 SWIMMING	JUL-12 _____ x \$28 SWIMMING	JUL-13 _____ x \$28
<b>WEEK #6</b> <u>Hero</u>	JUL-16 _____ x \$28 SWIMMING	JUL-17 _____ x \$28 SWIMMING	JUL-18 _____ x \$28 SWIMMING	JUL-19 _____ x \$28 SWIMMING	JUL20 _____ x \$28
<b>WEEK #7</b> <u>Sensory</u>	JUL-23 _____ x \$28 SWIMMING	JUL-24 _____ x \$28 SWIMMING	JUL-25 _____ x \$28 SWIMMING	JUL-26 _____ x \$28 SWIMMING	JUL-27 _____ x \$28
<b>WEEK #8</b> <u>D-I-Y</u>	JUL-30 _____ x \$28 SWIMMING	JUL-31 _____ x \$28 SWIMMING	AUG-1 _____ x \$28 SWIMMING	AUG-2 _____ x \$28 SWIMMING	AUG-3 _____ x \$28
<b>WEEK #9</b> <u>Camping</u>	AUG-6 _____ x \$28 WATER PLAY	AUG-7 _____ x \$28 WATER PLAY	AUG-8 _____ x \$28 WATER PLAY	AUG-9 _____ x \$28 WATER PLAY	AUG-10 _____ x \$28 WATER PLAY
<b>EXTRA DAYS</b> <u>Back to School</u>	AUG-13 _____ x \$28 WATER PLAY	AUG-14 _____ x \$28 WATER PLAY			

## 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.

\_\_\_\_\_

Print Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date



## 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 from 5pm - 6pm (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.  
Initial

# Parent/Guardian Agreement

I have read and understand terms and conditions of Camp Catch a Dream's 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.

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

\_\_\_\_\_  
Date



If your camper is attending other FRRPD programs at the Activity Center, please indicate so below.  
Driver will make a single trip to the Activity Center for classes.

Child: \_\_\_\_\_ Program: \_\_\_\_\_ Day: M T W Th F Time: \_\_\_\_\_

Child: \_\_\_\_\_ Program: \_\_\_\_\_ Day: M T W Th F Time: \_\_\_\_\_

Child: \_\_\_\_\_ Program: \_\_\_\_\_ Day: M T W Th F Time: \_\_\_\_\_

Child: \_\_\_\_\_ Program: \_\_\_\_\_ Day: M T W Th F Time: \_\_\_\_\_



**Anything else we should know about your child/children?**

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