



- 2012 Registration -
**Fig Garden
 Summer Camp**

Child Information

First Name: _____ Last Name: _____ Age: _____

Gender? Male Female Swimming Ability: None Beg. Inter. Adv. Have You Attended Our Camp Before? Yes No

If No, How Did You Hear About Us? _____

Parent Information

Parent's / Legal Guardian's First Name: _____ Last Name: _____

Mailing Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____ E-Mail: _____

Please provide for confirmation purposes!

Emergency Contact Information

Full Name: _____ Relationship: _____ Phone: _____

Full Name: _____ Relationship: _____ Phone: _____

Please Circle The Week(s)
 Your Child Will Be Attending Camp

Office Use Only

- M T W Th F Week 1 June 11th - 15th
- M T W Th F Week 2 June 18th - 22nd
- M T W Th F Week 3 June 25th - 29th
- M T W Th F Week 4 July 2nd - 6th (Special Rate)
- M T W Th F Week 5 July 9th - 13th
- M T W Th F Week 6 July 16th - 20th
- M T W Th F Week 7 July 23rd - 27th
- M T W Th F Week 8 July 30th - August 3rd
- M T W Th F Week 9 August 6th - 10th

Special Needs / Allergies / Dietary Concerns /
 Medications: _____

Payment Options

Summer Camp (# Of Weeks) _____ x \$160 = _____

Non-Member Fee (# Of Weeks) _____ x \$10 = _____

Optional Lunch Plan (# Of Weeks) _____ x \$20 = _____

Sibling Discount (# Of Weeks) _____ x **-\$15** = _____

Additional Siblings Only

Total = _____

Member Charge (# _____)

Or

Check Attached (# _____)

Payable to FGSRC

Full payment must be submitted with registration.

I have read, understand, and agree to all sections of the *Conditions Of Registration* on the back of this registration.
 All questions about the policies, activities, and operations of *Fig Garden Summer Camp* have been answered to my satisfaction.

Print Name: _____ Parent / Legal Guardian Signature: _____ Date: _____

Conditions Of Registration

I, the signing parent or legal guardian, hereby apply to register the child, whose name appears on the reverse, in *Fig Garden Summer Camp*. By doing so, I acknowledge that I read and agree to the following conditions of registration.

General Matters

- 1) I agree that the child and his / her parents or legal guardians will abide by the rules and regulations set by *Fig Garden Summer Camp* for the health, safety, and welfare of the child.
- 2) I understand that *Fig Garden Summer Camp* reserves the right to dismiss a child whose conduct is dangerous, illegal, or detrimental to *Fig Garden Summer Camp* and / or to other children. I agree that there will be no refund in the event of dismissal.
- 3) I understand that the *Fig Garden Summer Camp* reserves the right to cancel, change, or substitute programs or activities as listed in its *Fig Garden Summer Camp* flyer as necessary.
- 4) I consent to the use of any pictures of the child in connection with *Fig Garden Summer Camp's* future advertising or promotion.
- 5) I understand that a number of children's activities will involve swimming and various water sports. I certify to you that the child can swim adequately to participate safely in such activities and that the child suffers from no physical or medical condition which would make his / her participation unsafe or unusually dangerous to himself / herself or others.
- 6) Parents are required to pick-up their children promptly at the end of camp. If the child will be going home with someone other than you or your spouse, the counselors must be notified. Children who are not picked-up at the conclusion of camp will incur an additional charge.

Payment & Cancellation Policy

Full payment must be submitted with every child's registration. There will not be any refunds in connection with cancellations. If a child is unable to attend *Fig Garden Summer Camp* due to an emergency or illness, he / she will be able to make it up in another camp based on space availability. We make exception for a child who suffers a physical injury or illness and whose doctor certifies to us, in writing, that the injury or illness is of a nature that the child cannot safely participate in any other week of camp. A child who withdraws from camp early due to a doctor certified injury or illness will receive a pro-rated refund. Dismissal from camp or withdrawal due to a personal scheduling conflict is not accepted as a basis for refund.

Release Of Liability

I understand and acknowledge that certain camp activities (whether or not listed on the *Fig Garden Summer Camp* flyer) have a risk of injury associated with them. I hereby release, and agree to indemnify and hold harmless, *Fig Garden Summer Camp* and its counselors and representatives whatsoever from any and all losses, claims, damages, liabilities, costs, and expenses (including attorney fees) which a child may sustain or incur in any way arising out of or in connection with the child's participation in any and all camp activities.

Medical

In the event of a medical emergency, I hereby give permission to Fig Garden and / or medical personnel, to secure, at my expense, proper treatment, as necessary, for the child named on the reverse side. I understand that all reasonable efforts to contact me will be made should an emergency arise.