



# Camp SoundWaters 2012 Registration Form



*Please use a separate form for each child*

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Grade Child Will Enter in Fall 2012 \_\_\_\_\_ School Attending \_\_\_\_\_

**Parent/Guardian #1.** Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Day/Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email (will be used for camp related correspondence) \_\_\_\_\_

**Parent/Guardian #2.** Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Day/Cell Phone \_\_\_\_\_

**Emergency Contact.** Name \_\_\_\_\_ Relation to child \_\_\_\_\_

(other than parents/guardians)

Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Authorized pick up #1.** Name \_\_\_\_\_ Relation to child \_\_\_\_\_

Cell phone/daytime phone \_\_\_\_\_

**Authorized pick up #2.** Name \_\_\_\_\_ Relation to child \_\_\_\_\_

Cell phone/daytime phone \_\_\_\_\_

## In order for us to serve your child better, please answer the following questions:

1. Is your child restricted from any activities?

No  Yes, please explain \_\_\_\_\_

2. During the school year does your child receive related services?

None  Speech  Occupational Therapy  Physical Therapy

3. During the school year does your child have an aide in the classroom?

No  Yes, please explain \_\_\_\_\_

*Due to the public nature of our site we cannot guarantee that any area is peanut/nut free*

## Please tell us how you heard about Camp SoundWaters:

Mailing  Website  Outdoor Sign  Staff Member  Past Camper

## Required Medical Forms:

**Camp Health Form** and **Authorization for the Administration of Medication Form** (if necessary) can be found at [www.SoundWaters.org/camp/forms.pdf](http://www.SoundWaters.org/camp/forms.pdf) or requested by calling (203) 406-3319.

Please check here to acknowledge that it is your responsibility as a Parent/Guardian to provide properly filled out Health Form and Authorization for the Administration of Medication Form (if necessary) by **June 1, 2012** (fax, e-mail, mail). If you register your child after June 1, 2012, the forms are due immediately.

## PERMISSION

As parent or guardian of the above enrolled camper I give permission for my child's participation in camp activities including walking, hiking, swimming, sailing, canoeing, field trips and overnights to designated areas and other educational activities that may occur in the SoundWaters Center, Cove Island Park and on field trip sites.

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

\_\_\_\_\_  
Date

## CONDITIONS

1. I understand that in case of emergency, if, after reasonable effort, I or other parties on the contact list are unable to be reached by phone, this document authorizes any attending medical personnel to administer medical care as needed. Every effort will be made to contact the parent/guardian prior to treatment.
2. I understand that my child must be dropped off and picked up at the designated time and in the designated area stated by SoundWaters. I further understand that failure to pick up my child or ward on time will result in my being charged a late fee of \$25.00 for each occurrence.
3. I understand that in the event of inclement weather Camp SoundWaters activities may be changed.
4. I understand that part of the camp experience involves activities and interactions that may be new to my child. New experiences come with uncertainties beyond what my child may be used to dealing with at home. I am aware of these risks, and I am assuming them on behalf of my child. I realize that no environment is risk-free and so I have instructed my child on the importance of abiding by the camp rules. My child and I both agree that he or she will obey the rules of Camp SoundWaters.
5. I understand that Camp SoundWaters has the right to dismiss my child if Camp SoundWaters believes his/her actions or attitude are detrimental to the best interest of the camp or campers and under these circumstances no refund will be given.
6. I understand that SoundWaters takes photographs of campers' activities to promote educational efforts in publications and for program fund raisers. Please check one of the following:

- I give my permission for SoundWaters to take photos of my child or ward.
- I do not give my permission for SoundWaters to take photos of my child or ward.

As parent or guardian of the above enrolled camper I understand and agree to all the above CONDITIONS.

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

\_\_\_\_\_  
Date

## ASSUMPTION OF RISK

This Assumption of Risk applies to my minor child or ward, \_\_\_\_\_'s, use of SoundWaters facilities, ground, watercraft, and other equipment and to his/her participation in any and all SoundWaters' programs (collectively, "SoundWaters").

I understand that SoundWaters has made, and can make, no representations, warranties or promises respecting the condition of SoundWaters facilities, and watercraft that might be used by my child during the course of the Camp SoundWaters experience.

I also understand that during my child's attendance at Camp SoundWaters, supervision will be provided by personnel trained only in basic first aid procedures; which is classified as American Red Cross Standard First Aid and CPR/AED for the Professional Rescuer. Should my child require emergency medical procedures of a more serious or comprehensive nature, I understand that such procedures will not be provided by SoundWaters personnel but that referral will be made to local emergency service providers.

I also understand that I bear responsibility for my child's conduct while at Camp SoundWaters and so I agree that in consideration for my child's participation in Camp SoundWaters I agree to indemnify, defend and hold SoundWaters, its employees, officers, directors, agents and assigns harmless from and against all liability, damages, costs and expenses, including legal fees and court costs, that might result from either my child's or my own misconduct.

Finally, I understand and concur that this agreement will be interpreted according to the laws of the State of Connecticut and that any disputes between myself and SoundWaters will be heard in the courts of the State of Connecticut. If any portion of this agreement is determined by a court to be null and void, the remaining portions of this agreement shall nevertheless remain valid and binding upon both parties.

I have carefully read this agreement, have been given an opportunity to ask any questions that I might have about it, fully understand its contents, and acknowledge that I sign it of my own free will.

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

\_\_\_\_\_  
Date

### Sea Stars: Grades K-2

Add extended hours?

- Session One: 6/25 – 7/06 (2 weeks, no 7/04) **\$675**  **+\$90**
- Session Two: 7/09 – 7/20 (2 weeks) **\$725**  **+\$100**
- Session Three: 7/23 – 8/03 (2 weeks) **\$725**  **+\$100**
- Session Four: 8/06 – 8/17 (2 weeks) **\$725**  **+\$100**
- Session Five: 8/20 – 8/24 (1 week) **\$475**  **+\$50**

Camp runs from 9:00am – 3:00pm  
Extended hours are 8:30am – 9:00am & 3:00pm – 5:00pm

### Bluefish: Grades 3-5

Add extended hours?

- Session One: 6/25 – 7/06 (2 weeks, no 7/04) **\$675**  **+\$90**
- Session Two: 7/09 – 7/20 (2 weeks) **\$725**  **+\$100**
- Session Three: 7/23 – 8/03 (2 weeks) **\$725**  **+\$100**
- Session Four: 8/06 – 8/17 (2 weeks) **\$725**  **+\$100**
- Session Five: 8/20 – 8/24 (1 week) **\$475**  **+\$50**

Camp runs from 9:00am – 3:00pm  
Extended hours are 8:30am – 9:00am & 3:00pm – 5:00pm

### Small Boat Sailing: Optimx Grades 4-6

Add extended hours?

- Session One: 6/25 – 6/29 **\$595**  **+\$25**
- Session Two: 7/02 – 7/06 (no 7/4) **\$495**  **+\$25**
- Session Three: 7/09 – 7/13 **\$595**  **+\$25**
- Session Four: 7/16 – 7/20 **\$595**  **+\$25**
- Session Five: 7/23 – 7/27 **\$595**  **+\$25**
- Session Six: 7/30 – 8/03 **\$595**  **+\$25**
- Session Seven: 8/06 – 8/10 **\$595**  **+\$25**
- Session Eight: 8/13 – 8/17 **\$595**  **+\$25**
- Session Nine: 8/20 – 8/24 **\$595**  **+\$25**

All sessions are 1 week • Camp runs from 9:00am – 5:00pm  
Extended hours are 8:30am – 9:00am

### Small Boat Sailing: Pixels Grades 5-8

Add extended hours?

- Session One: 6/25 – 6/29 **\$595**  **+\$25**
- Session Two: 7/02 – 7/06 (no 7/4) **\$495**  **+\$25**
- Session Three: 7/09 – 7/13 **\$595**  **+\$25**
- Session Four: 7/16 – 7/20 **\$595**  **+\$25**
- Session Five: 7/23 – 7/27 **\$595**  **+\$25**
- Session Six: 7/30 – 8/03 **\$595**  **+\$25**
- Session Seven: 8/06 – 8/10 **\$595**  **+\$25**
- Session Eight: 8/13 – 8/17 **\$595**  **+\$25**
- Session Nine: 8/20 – 8/24 **\$595**  **+\$25**

All sessions are 1 week • Camp runs from 9:00am – 5:00pm  
Extended hours are 8:30am – 9:00am

### Payment Conditions

**\$50 Early Registration Discount for each session registered before March 31, 2012!** (cannot be deducted from Deposit)

Registration will not be considered complete unless payment of all amounts due SoundWaters are received by due date.

**\$200 Non-Refundable Deposit** per session and Registration Form must be received by SoundWaters in order to reserve your child's spot in camp. Balance of tuition due, plus any extended day charges, less Early Registration Discount if applicable, must be received by SoundWaters by **May 1, 2012**. If you register after May 1, 2012, full tuition plus any extended day charges is due to SoundWaters with the Registration Form submission.

### Cancellation Policy

SoundWaters reserves the right to cancel a camp session due to insufficient enrollment. In this event, you will be notified and a full refund of amounts paid will be made. **No refunds will be made and there will be no credit given for absences, family vacations, withdrawals or camp closings.**

### Payment Information

- Check (Make checks payable to **SoundWaters**)
- Credit Card (Visa, MasterCard, Amex, Discover)

Card # \_\_\_\_\_ Exp. \_\_\_\_\_ Cardholder's Signature \_\_\_\_\_

Credit Card Billing Address (if different from above) \_\_\_\_\_

**Charge the Deposit Immediately** (\$200 per session) and charge the balance due for tuition plus any extended day charges less Early Registration Discount (if applicable) on May 1, 2012.

**Charge the Full Amount**

I wish to help another child attend Camp SoundWaters with a scholarship gift of \$ \_\_\_\_\_

### Registration may be submitted

**Online:** please go to [www.soundwaters.org/camp](http://www.soundwaters.org/camp) **By Fax:** 203 967 8306

**By Mail:** Camp SoundWaters, 1281 Cove Road, Stamford CT 06902