

VHFLC Summer Camp 2019 Emergency Information Form

Summer Camp _____ Child Currently Attends _____ Grade for 2019/20 _____

Student Full Name _____ Birthdate _____

Parent #1 _____	Parent #2 _____
Address _____	_____
City/Zip _____	_____
Home Phone () _____	() _____
Employer _____	_____
Position _____	_____
Work Phone () _____ Cell () _____	() _____ Cell () _____
Work Hours: From _____ to: _____	From _____ to: _____
Email Address _____	_____

Emergency Information

Child's Physician _____ Phone () _____

Child's Dentist _____ Phone () _____

Medical Conditions or Allergies _____

Current Treatment (glasses, medication, hearing aide, etc.) _____

If parent cannot be reached, who may make a local emergency decision for you and/or may be authorized to pick up child from the Site? Information must be submitted, as child will not be allowed to leave with any other person unless authorized photo or ID is available.

Name	Relationship	Phone ()
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_____	_____	_____
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_____	_____	_____
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Permission is given to Vermont Hills Family Life Center for the following: (Please check)

- As legal guardian, I hereby authorize the above named Center to consent to medical or surgical treatment for my child, when child is brought for treatment or ambulance called and when parent or guardian cannot be reasonably located.
- My child may be taken on **field trips** by Tri-Met or yellow bus and my child may be taken on walks with proper supervision.
- My child may have his/her photo taken and used on VHFLC information.
- My child may have a generic sun screen administered.
- My child may participate in swimming. If child is non-swimmer a flotation device will be used & required.

Signature: Parent or Guardian _____ Date _____

Vermont Hills Family Life Center

We inspire the promise of tomorrow!

A non-refundable deposit of \$25 per week must be submitted with the registration form.

Please return this application with deposits and \$20 registration fee to:

Vermont Hills Family Life Center, 4595 SW California St. Portland, OR 97219 or email: jessicav@vhflc.com

Call us if you have any questions at (503) 452-8633 www.VHFLC.com

Please scan and email, or mail in your registration. Photos of registration will not be accepted.

Child's Name _____

Parent or Guardian Name _____ Email _____

School Currently Attending: _____ Grade entering in Fall 2019 _____

Camp Attending (circle one):

St. Andrew's (SW PDX)

St. Cecilia (Beaverton)

Early Bird Special Must be registered by May 30 This price is adjusted to \$5 off per day	Standard Camp Rates	Payment Options Indicate your choice
Full Day 5 days \$ 215 4 days 215 3 days 155 2 days 105	Full Days 5 days \$ 235 4 days 235 3 days 170 2 days 115	A Pay entire summer up front and receive 10% off <input type="checkbox"/> Before May 30 B Pay reg. & deposits by May 30 <input type="checkbox"/> Early Bird Special C Pay reg. & deposits after May 30 <input type="checkbox"/> Standard Camp Rates

Camp Week	Weekly Dates	Days of the Week					Totals
		M	T	W	Th	F	
1	June 12-14 <i>(No St. Cecilia)</i>	Closed	Closed				
2	June 17-21						
3	June 24-28						
4	July 1-5 <i>July 4 Holiday Closure</i>				Closed		
5	July 8-12						
6	July 15-19						
7	July 22-26						
8	July 29 – August 2						
9	August 5-9						
10	August 12-16						
11	August 19-23						
	Enclosed registration fee of \$20 per child						
	Enclosed deposits; Number of weeks <input type="text"/> x \$25 (per child)						
	Total Due						

- I would like my fees taken through EFT (Electronic Funds Transfer) on **June 1, July 1, August 1.**
- I would like to pay by check: Entire Summer Monthly Weekly (Due Monday)
- Please keep my credit card information on file and take camp fees out weekly. (5% merchant fee charged)

No refunds on registration or deposits. Deposits will be forfeited if no-show.

Childs Name _____

Health History & Medication

- I/we agree to have the emergency contact and authorized photos completed by parents/guardians and returned to VHFLC office prior to the start of camp or on the first day of camp.
- I/we understand that any medication must have an authorization form filled out by parents/guardian with medication in the original container, with label, dosage and name clearly printed on the bottle.
- I/we agree as legal guardian, that in the event of a medical emergency that VHFLC camp may consent to medical or surgical treatment when parent or guardian cannot reasonably be located. An ambulance and 911 may be called if necessary.
- I understand that if my child is allergic to something I will hold VHFLC harmless of liability. We will make every effort to avoid – said allergy substance, but cannot be held responsible for sources beyond our control – including what other children may bring with them.

Releases

- I/we authorize my child's appearance in VHFLC camp promotional materials. Camper's names are not published or released unless arrangements are made with you.
- I/we understand the administration of VHFLC reserve the right to withdraw any camper when in his/her judgment that the camper's behavior interferes with the rights and safety of others and the smooth functioning of the group or activity.
- My child may go on walking field trips with proper supervision & field trips on Tri-Met bus service.
- My child may go swimming at a pool with certified life guards. If s/he cannot swim a flotation device is mandatory.

Registration – Refund

- A summer registration fee of \$20 is due with initial registration/enrollment per child.
- A \$25 deposit will be required for each week's enrollment, which will be credited toward the weekly balance due per child. In the event you cancel a week the deposit will not be refunded unless it is **prior** to May 30.
- An early bird special rate applies to those getting their enrollment forms & deposits in by May 30.
- Your balance is due on **Monday** of camp, according to your projected attendance, if your first day of attendance is not Monday, your balance is still due on Monday by mail.
- A \$1 per minute late fee will be charged for children being picked up after 6:00 PM. Payable to the staff.

Remember

- Bring a sack lunch with beverage daily. We will provide morning and afternoon snacks.
- Please send children in shoes that invite running & playing, with straps around the heel.
- Please provide your child with a back-pack, water bottle, we will provide a generic sun screen.

- **Please remember that children are always to be walked into the building when you arrive and make sure the camp staff acknowledges that you are arriving or picking up your child at the end of the day.**

By checking this box I have read and agreed with the terms and policies

Date: _____ / _____ /2019