

FRIDAY DAY CAMP - 2024



Initial: _____
 Date of purchase: _____
 Receipt #: _____
 Membership _____

Family Last Name: _____

Day camp will be from 8am to 1pm. The day will include games, arts & crafts, and of course swimming! It will be so much fun. Lunch is included. Every child will be able to join open swim after camp that day for free (1pm to 6pm). Child must be enrolled in school for the upcoming year & fully potty trained. Please, send child with lifejacket if needed. The pool does not have extra. Each child also needs a towel. All items brought to camp should be labeled with child's name.

Cost is \$25 per day per child, \$200 for all 2024 camps if registered & paid for by June 14th.

Participant Name:	Age:	Allergies or needed info – put N/A if none

Please mark the date(s) your child will be attending:

<input type="checkbox"/> June 14th	<input type="checkbox"/> July 5th	<input type="checkbox"/> July 26th
<input type="checkbox"/> June 21st	<input type="checkbox"/> July 12th	<input type="checkbox"/> August 2nd
<input type="checkbox"/> June 28th	<input type="checkbox"/> July 19th	<input type="checkbox"/> August 9th

Emergency Contact:	Best Contact Number:

Legal guardian of participants' information:

Email:	Cell Phone Number:
Address:	Phone Number:
Any other needed information:	

RELEASE AND WAIVER OF LIABILITY (This is a legal and binding contract.)

“I am aware that accidents can happen around and in a swimming pool, and I or (my child/children/dependents) am voluntarily participating in the activities with knowledge of the dangers involved and hereby accept any and all risks of injury. I have carefully read this release and waiver and fully understand its content. I also understand that if I or (my child/children/dependents) do not follow the rules of the Morehead Family Community Pool and do not act in accordance with the instructions of the managers or lifeguards that I and/or my child(ren) may be asked to leave the premises. I fully understand that the managers have the duty to close the pool early in the event of extreme weather, water quality problems and/or low attendance (less than 12 swimmers) as agents of the SYO board. I am aware that this is a release of liability, including asserted negligence and is a contract between our family (including our guests) and the Sutter Youth Organization and its board members. I am signing this of my own free will. I agree that in the case of an emergency, illness and/or injury that the supervisor on duty has my permission to authorize emergency treatment for my minor age children.

I hereby give my consent to Morehead Family Community pool to photograph, film, videotape and then use, reproduce and publish said images of me and/or my children.”

Date	Printed name of guardian	Signature of guardian