Shorewood Summer Camp Registration Form

Γ -shirt size (Youth): \Box XS (6-8) \Box S (10-12			□ Male □ Fem	iic
1-SIIII SIZE (10uii). \Box AS (0-8) \Box S (10-12) □ M (14-16) □ L (18-20)) \Box XL (22-24)		
Address:		City:	State:	Zip Code:
Camper's Birth Date:	Age on June	e 1:	Grade going into the Fa	1
Parent/Guardian 1:	 	Male Female Home	<u> </u>	Cell#
Email address:		Employer	Busin	ess #:
Parent/Guardian 2:		□ Male □ Female Home #		_ Cell#
Email address:				
Child in custody of (Please check one) 🗆 bo				
·	•		fy)	
	ar infection \square Convulsions \square	_		
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Allergies: □ Pollen □ Poison Oak/Iv	y/Sumac □Penicillin □I	Insect Stings (list type)	Foods:	Other
Behavioral conditions or problems of which	camp staff should be aware:			
n addition to Parent/Guardian names listed	d above, these person(s) have person		-	
n addition to Parent/Guardian names listed	d above, these person(s) have perthorization from parents/guare	dian, and that the person pic	king up my child will ne	ed to show identification.
In addition to Parent/Guardian names listed allowed to leave with any person without au	d above, these person(s) have person	dian, and that the person pio	king up my child will neAddress:	ed to show identification.
In addition to Parent/Guardian names listed allowed to leave with any person without au	d above, these person(s) have perthorization from parents/guarePhone#:Phone#:	dian, and that the person pions Relation Relation	king up my child will neAddress:	ed to show identification.
In addition to Parent/Guardian names listed allowed to leave with any person without au	d above, these person(s) have perthorization from parents/guarePhone#:Phone#:	dian, and that the person pio	king up my child will neAddress:	ed to show identification.
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Village of Shorewood Parks and Recreation Waiver and Release of All Claims

The above participant agrees to obey all programs rules and regulations as well as the Park and Recreation Supervisor of the Program. As a participant in this program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages or loss which I may sustain as a result of participating in any and all activities connected with or associated with such program. I agree to waive and relinquish all claims I may have, as a result of participation in the program, against the Village of Shorewood, its officers, agents, servants, and employees. I do hereby fully release and discharge the Village of Shorewood and its officers, agents, servants and employees from any and all claims from injuries, including death, damage or loss which I may have or which may occur to me on account of my participating in the program. I further agree to indemnify and hold harmless and defend the Village of Shorewood and its officers, agents, servants and employees from any and all claims resulting from injuries, including death, damages and losses sustained by me and arising out of, connected with, or in any way associated with the activities of the program. I have read and fully understand the above program details and Waiver and Release of All Claims. Before registration in this program is valid, the Waiver and Release of All Claims must be signed by the participant. Where the participant is less than 18 years of age, the Waiver and Release of All Claims must be read and signed on behalf of the participant by their parent or legal guardian.

Parent/Guardian Signature	Date:
Ry registering for any Darks and Degreetions activities, you agree to allow pub	lication of any photos taken at programs, or events enoncored by the Village of Shorewood Parks and Regression 5

By registering for any Parks and Recreations activities, you agree to allow publication of any photos taken at programs, or events sponsored by the Village of Shorewood Parks and Recreation.