

Camp @ the Woods 2022

Camper Information

Camper's Full Name: _____ Goes By: _____
Current School: _____ Birthdate: _____ Gender: _____
Home Address: _____
City: _____ State: _____ Zip: _____
Grade Level Entering Fall 2022: _____
Returning WA Camper: yes or no

I understand all requests are not guaranteed. My camper would like to be placed with the following friends:

Parent Information (please provide all information requested)

Father's Name: _____	Mother's Name: _____
Cell Phone: _____	Cell Phone: _____
Employer: _____	Employer: _____
Employer Address: _____	Employer Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Business Phone: _____	Business Phone: _____
Email: _____	Email: _____

Emergency Information

Please provide the information below for emergency contacts and authorized pick ups for your campers. These contacts must be aware that they may need to be available to in the event of injury or illness. (**Please provide all information requested.**)

Name: _____	Name: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Home Phone: _____	Home Phone: _____
Cell Phone: _____	Cell Phone: _____
Relationship to camper: _____	Relationship to camper: _____

Has your child been recommended for and/or received services for any physical, emotional or learning difficulty? If so, please provide description of condition and/or evaluation.

Please describe any medical conditions or allergies:

Please describe any dietary restrictions or requirements:

Pediatrician: _____ Telephone: _____

I hereby grant permission to authorized Wood Acres staff to seek emergency treatment for my child if warranted and will assume all costs related to such services. My hospital of choice is: _____.

Parent's Signature: _____ Date: _____

Camp Registration

COVID - 19 Health & Safety Guidelines: Camp @ the Woods will operate in accordance with public health guidelines and the CDC. We will monitor all recommendations and will continue to sanitize, social distance, wear masks indoors, and maintain small groups. Camps will be grouped in sessions, so campers stay together with their cohorts for several weeks at a time. To maintain the Wood Acres record of safety during these times, please remember that you are responsible for full payment whether you attend the entire session or not.

Please initial next to the session of camp that you want your child to attend. No cancellations or changes are permitted. *Camp @ the Woods will be closed July 4 - July 8.*

Parent Initials _____	Session 1 4 weeks	Dates
1	South America Nature's Magic	June 6 - 10
2	Australia Treasure Hunters	June 13 - 17
3	Asia Jr. Master Chef	June 20 - June 24
4	North America America's Got Talent	June 27 - July 1

Parent Initials _____	Session 2 3 weeks	Dates
1	Europe Art Around the Globe	July 11 - 15
2	Africa It's a Jungle Out There	July 18 - 22
3	Antarctica Winter in July	July 25 - 29

Tree House

Tree House (before and after camp care) is available per week from 7:30 am until 5:00 pm. Fulltime, morning only, or afternoon only Tree House reservations should be noted below. Please check for expected Tree House use for each session:

Weeks	Full Time 7:30 am - 5:00 pm	Morning Only 7:30 am - 9:00 am	Afternoon Only 3s&4s 12:30 pm - 5:00 pm K-4th 3:00 pm - 5:00 pm
Session 1			
Session 2			

Payment Information

The registration fee, activity fee and your first camp session fee must accompany this registration form. If you are attending both sessions, payment for the 2nd session is due no later than June 1st.

With my signature below, I understand that I will be held financially responsible for all of the camps for which I have registered, even if my child does not attend part or all of said camps. **All camp payments are non-refundable and non-transferable.** Camp Wood Acres reserves the right to cancel under-filled camps with advance notice to parents. Camp Wood Acres holds campers to a high standard of cooperative behavior. Campers who do not demonstrate this ability may be asked to withdraw.

Parent's Signature: _____ Date: _____

Water Activity Permission

I, _____ give permission for my child _____ to participate in all water related activities for each week that my child attends camp. I understand that proper supervision will be provided in accordance with the rules set forth in Bright from the Start.

Parent's Signature: _____ Date: _____