

SUMMER CAMP REGISTRATION FORM

Mail Money Order to: Bay Area BMXers, 2601 C Blanding Ave. Ste #278, Alameda, CA 94501

One form per participant is required. Both sides must be filled out completely in order to process your registration.

PLEASE PRINT CLEARLY

Camper's First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Parent/Guardian's email: _____

Camper's Birthday: ___/___/___ Entering Grade: ___ School: _____

The above address and/or phone number has changed in the last year. Yes No

Camp Payment and Cancellation/Transfer Policy

- I understand that camp payments are nonrefundable. Program payments are as follows:
Summer Day Camp \$250/per week. Weekly payments in full are due 1 week before each session.
- Cancellations must be in writing. If received at least one full business week prior to the cancelled week.
- If cancellation is submitted one week prior to the week of camp, payment/s will be forfeited and not refunded.
- No refunds will be made once the camp week begins.
- I understand my registration may be cancelled if the balance is not paid 1 week before the start of each camp session. If space is available, I may re-register with BAY AREA BMXERS and requires a new \$50/Deposit.
- By signing up for the programs indicated below, I understand and accept the above policies and I am responsible for payment:

X _____
(Parent/Guardian's Signature)

Is there another camper with whom your child would like to be in a group with?

(Please indicate other camper's full name. We will try to accommodate your request but cannot guarantee it.)

Are there any activities in which she/he should not participate? _____

Does your child have any special physical, behavioral and/or needs our staff should be aware of?

Please explain _____

Parent/Guardian Information

Name: _____

Work Phone: _____

Cell: _____

Name: _____

Work Phone: _____

Cell: _____

Are there any custody concerns that we should be aware of? _____

Emergency Contact / Child Release Authorization

The Bay Area BMXer has my unrestricted permission to release the named minor at any time, to the following individuals, and to contact them in case of an emergency if the parents / guardians are unavailable.

Name: _____ Phone #: _____ Relationship: _____

Name: _____ Phone #: _____ Relationship: _____

Name: _____ Phone #: _____ Relationship: _____

Health Information

To be completed by parent/guardian.

If your child has special needs, please contact the Director at (510) 418-3737.

Health History

Does your child have any allergies or health issues we need to know about? (Please list and/or explain)

Parental/Guardian Consent

Recognizing that the BAY AREA BMXERS will do its best to ensure a safe experience, I understand that certain dangers or accidents may occur. I hereby release the BAY AREA BMXERS of the Central Bay Area from any and all responsibility and liability of any nature, including claims of injury, illness, death, loss or damage, resulting from my child's participation in any program activities.

Medical Consent

As the parent, legal guardian, or authorized representative, I hereby give consent to the BAY AREA BMXERS summer camp to provide all emergency dental or medical care prescribed by a duly licensed physician (MD or DO) or dentist (DDS) for the above named child. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of the child.

Participation Agreement

Please go over these items with your child:

1. Participant agrees to abide by rules and regulations set by the program for the health, safety and welfare of the participants
2. All medications will be brought directly to the site staff in accordance with the Medications Policy.
3. Willful destruction of property will be the responsibility of the participant's parent/guardian.
4. Participants must remain within established boundaries wherever the program occurs on and off BAY AREA BMXERS property.
5. Participants are not allowed to be in possession of any tobacco, alcohol, illegal drugs, firecrackers, firearms, or knives.
6. BAY AREA BMXERS is not responsible for lost, damaged or stolen personal belongings.
7. Continued inappropriate behavior, such as threatening, swearing, not following directions, teasing, sexual harassment/intimidation, fights, or improper behavior in vehicles, may result in immediate dismissal from the program with no refund.
8. Any participant who poses a threat to themselves or to others will be dismissed from the program with no refund.

The Program Director reserves the right to determine what constitutes a violation of these rules and will enforce them as necessary.

We reserve the right to dismiss any participant from the program at the parent/guardian's expense and liability for violating any of the above.

By Signing Below, I Agree That:

- ✓ I have read and understand the parent/guardian consent.
- ✓ The named minor has my permission to participate in BAY AREA BMXERS programs and field trips.
- ✓ I give my permission for any pictures taken of my child participating in BAY AREA BMXERS events to be used for publicity purposes.

Signature of Parent / Guardian
or Authorized Representative

Printed Name

Date

Thanks to people like you, consider making a donation today to support diversity in your program!

Donation: _____