

**Sunny Day Summer Camp at Saint Katharine Drexel Catholic School**  
**2019 Registration**

Family Name: \_\_\_\_\_

Parent/Guardian Names: \_\_\_\_\_

Address: \_\_\_\_\_

Parent Phone Numbers during Camp Hours: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Emergency Contact Name and Phone Number:  
\_\_\_\_\_

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Child's Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Grade for 2018-19 school year: \_\_\_\_\_ School: \_\_\_\_\_

Special Notes (allergies, restrictions, medications etc.):  
\_\_\_\_\_  
\_\_\_\_\_

Weeks Attending (Please circle) #1 #2 #3 #4 #5 #6 #7 #8

Please check: Full Day Camp: \_\_\_\_\_ Mini Camp: \_\_\_\_\_ Selected Days: \_\_\_\_\_

**CARES (Before and After care \$10.00 an hour)**

AM Session \_\_\_\_\_ Arrival Time: \_\_\_\_\_

PM Session \_\_\_\_\_ Pickup Time: \_\_\_\_\_

T-Shirt Size: (Please circle) YS YM YL AS AM AL AXL

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**Register Additional Children on Next Page**

**Child's Name:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_

**Grade for 2018-19 school year:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Special Notes** (allergies, restrictions, medications, etc.):

\_\_\_\_\_  
\_\_\_\_\_

**Weeks Attending** (Please circle) #1 #2 #3 #4 #5 #6 #7 #8

**Please check:** Full Day Camp: \_\_\_\_\_ Mini Camp: \_\_\_\_\_ Selected Days: \_\_\_\_\_

**CARES (Before and After care \$10.00 an hour)**

AM Session \_\_\_\_\_ Arrival Time: \_\_\_\_\_

PM Session \_\_\_\_\_ Pickup Time: \_\_\_\_\_

**T-Shirt Size:** (Please circle) YS YM YL AS AM AL AXL

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**Child's Name:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_

**Grade for 2016-17 school year:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Special Notes** (allergies, restrictions, medications, etc.):

\_\_\_\_\_  
\_\_\_\_\_

**Weeks Attending** (Please circle) #1 #2 #3 #4 #5 #6 #7 #8

**Please check:** Full Day Camp: \_\_\_\_\_ Mini Camp: \_\_\_\_\_ Selected Days: \_\_\_\_\_

**CARES (Before and After care \$10.00 an hour)**

AM Session \_\_\_\_\_ Arrival Time: \_\_\_\_\_

PM Session \_\_\_\_\_ Pickup Time: \_\_\_\_\_

**T-Shirt Size:** (Please circle) YS YM YL AS AM AL AXL

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**Waiver of Liability**

I hereby authorize the staff of Sunny Days Summer Camp to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive St. Katharine Drexel from any and all liability for any injuries or illness incurred while at the Sunny Days Summer Camp. I have no knowledge of any physical impairment that would be affected by my child/ren's participation in the program, as outlined in the Sunny Days Summer Camp description materials. I also understand Sunny Days Summer Camp retains the right to use for publicity and advertising purposes, photographs and video of the participants taken during the summer camp. I also understand that the Sunny Days Summer Camp staff reserve the right to dismiss any participant whose conduct is detrimental to the program and no refund will be issued.

I hereby give my permission for my child to watch G and PG rated movies.

I, give my son/daughter permission to use the technology at Sunny Days Summer Camp. During the times they will be using technology, they will be monitored by staff members. Campers are to follow all rules and use the technology with respect and responsibility. I, as well as my child understand if they do not cooperate, they will not be allowed to use any technology for the remainder of camp and if any damages occur I will be held accountable.

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**CAMPER RELEASE:**

PERSON(S) TO WHOM THE CHILD MAY BE RELEASED:

(PLEASE PROVIDE FULL NAME)

1.) \_\_\_\_\_

2.) \_\_\_\_\_

3.) \_\_\_\_\_

4.) \_\_\_\_\_

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**Payment Information:**

**Subtotal:**

**Registration Fee** **\$25**

**1<sup>st</sup> Child Tuition** \$ \_\_\_\_\_

**Extended Care Total for 1<sup>st</sup> Child** \$ \_\_\_\_\_

**2<sup>nd</sup> Child Tuition @ 10% off** \$ \_\_\_\_\_

**Extended Care Total for 2<sup>nd</sup> Child** \$ \_\_\_\_\_

**3<sup>rd</sup> Child Tuition @ 10% off** \$ \_\_\_\_\_

**Extended Care Total for 3<sup>rd</sup> Child** \$ \_\_\_\_\_

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**TOTAL DUE:** \$ \_\_\_\_\_

**Amount Enclosed with Registration** \$ \_\_\_\_\_

**Balance Due** \$ \_\_\_\_\_

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**Please return registration material to school by March 1st!**