

Individual Information Application

GOLDEN ARROW DAY CAMP

EXACT WEEKS YOUR CHILD WILL ATTEND: 8 wks ___ 7 wks ___ 6 wks ___ 5 wks ___ 4 wks ___

Specific Weeks: 1 2 3 4 5 6 7 8

Indicate Dates Attending:

Start Date: _____ End Date: _____

Check off number of days attending:

3 Days 4 Days 5 Days

Circle days attending:

M T W Th F

Check off only ONE (1) lunch choice:

No Lunch Hot Lunch Each Day Attending (incl. cookout) Cookout Lunch Only

CAMPER'S NAME (first) _____ (last) _____

Nickname _____ Birthday (month, day & year)* _____ Age in June _____

Sex ___ School in Sept. _____ Grade (in Fall after camp) _____

Shirt Size:

___ 10-12 ___ Adult S
___ 14-16 ___ Adult M
___ ___ Adult L

PARENT'S NAME (father) _____ (mother) _____ (Marital Status) _____

Address _____ City _____

Address for pickup/dropoff (if different) _____

City _____ Zip Code _____

Home Phone(s) _____ cell phone _____

Business Address (mother) _____ Phone _____

Business Address (father) _____ Phone _____

Emergency Name #1 _____ Phone _____

Emergency Name #2 _____ Phone _____

Are there any special medical problems which we should be aware of? _____

Vision _____ Hearing _____

Special Medications _____ Allergies _____

SWIMMING STATUS _____

** FRIENDS REQUEST LIST **: My child would like to be in the same group with: _____

Parent Consent

In the event of medical emergency, if a parent cannot be reached, I authorize emergency measures necessary for the child's welfare that have been deemed necessary by medical personnel. I recognize that certain risk of physical injury may occur. I agree to assume the full risk of any injuries including damage or loss that may occur as a result of the participation in any or all activities of the camp program. I agree to waive and relinquish all claims I may have as a result of participating in the program against Prospect Heights Park District and Golden Arrow Day Camp. I realize that no environment is risk-free and so I have instructed my child on the importance of abiding by the camp's rules. My child and I both agree that he or she is familiar with these rules and will obey them. I give permission for my child to be used in promotional photographs.

Parents' Signature (mother) _____ (father) _____

** New Campers Only ** - Please give directions to your house on the back of this sheet