2	Henry Street Settl 016 Summer Camp App		For Office Use Only Date Received: Received By:
Camper Information: New Camper D	CAMP HENRY DAY	CAMP	Camp Director Regina Perez 212-254-3100 x 207
Name:			Age
Street Address:		Apt Number: _	
City:	State:	Zip Code:	
Camper Cell Phone: ()		Gender (Circle On	e): Male Female
Ethnicity			
Current School:	Grade as of 9/15:	OSIS #	
What languages are spoken in the camper	's home?		
Parent/Guardian Information Primary Guardian Please note that the person filling out this registration is co such changes be necessary, they are to be done in writing o		he only one authorized to ma	ake changes to the application. Should
Name:	Relationshi	p to Participant:	
Street Address:		Apt Number: _	
City:	State	e: Z	ip Code:
Home Phone: ()	Cell Phone: ()	<u> </u>
Email:			
Primary Language Spoken:	Employer (if unem	ployed, write "None	e"):
Job/Position:	Work Phone: () -	
Secondary Guardian Name:	Relationshi	p to Participant:	
Street Address:		Apt Number: _	
City:	State	e: Z	ip Code:
Home Phone: ()	Cell Phone: ()	<u> </u>
Email:			
Primary Language Spoken:			2"):
Job/Position:	Work Phone: () -	
Is the above person authorized to pick-up Yes No	my child at the end of each	day or in the event of	of an emergency:

Emergency Contact Information

The first attempt will be made to contact the camper's parents/guardians. Emergency Contacts listed below must be a **maximum of 20 minutes away** from the Henry Street Settlement and able to pick your child up in the event of an emergency. Please notify us immediately through writing if this information changes over the course of the summer regarding emergency contacts.

Emergency Contact 1

Name:	_ Relationship to Participant: _			
Home Phone: ()	Cell Phone: ()		
Work Phone: ()	Primary	Language Spoker	n:	
Is the Above Person Authorized to Sign in Emergency? Yes No	and Pick-Up My Child at the E	End of Each Day of	or in the Event of an	
Emergency Contact 2				
Name:	_Relationship to Participant: _			
Home Phone: ()	Cell Phone: ()	<u> </u>	
Work Phone: () -	Primary	Language Spoker	n:	
Is the Above Person Authorized to Sign in Emergency? Yes No	and Pick-Up My Child at the E	End of Each Day of	or in the Event of an	
Emergency Contact 3				
Name:	_Relationship to Participant: _			
Home Phone: ()	Cell Phone: ()		
Work Phone: () -	Primary	Language Spoker	n:	
Is the Above Person Authorized to Sign in Emergency? Yes No	and Pick-Up My Child at the E	End of Each Day of	or in the Event of an	
Additional Authorized Pick-up Anyone not listed on the application <u>will not</u> be allowed to pi	ck-up.			
1(Name)			(Relationship)	
2.				
(Name)	(Contact #)		(Relationship)	
Is the Above Person Authorized to Sign in Emergency? Yes No	and Pick-Up My Child at the E	End of Each Day of	or in the Event of an	
General Information How did you find out about Camp Henry?				
Has Camper Previously Participated in a H	enry Street Settlement Program	n? (Circle One):	Yes	No
If Yes, What Program(s)?:				

Camp Henry Day Camp Rules on Drop off and Pick Up

A camper 12 years of age and older will be able to be dismissed from Camp Henry on their own and escort any younger siblings home ONLY if Camp Henry is given written permission from the primary/custodial guardian. Campers 12 years and older will not be allowed to escort non family members home, nor will they be able to leave camp until the general camp dismissal time.

For all other children, only a parent or guardian or sibling that is 18 years of age or over may pick them up and escort them home.

If your child is under 12 years of age, they cannot be dropped off and expected to sign themselves in. The sign-in sheet is not allowed to be brought out to you. All campers must be signed in by a parent, guardian, or sibling that is listed on registration. You may add names, but only in writing via a Camp Director or Camp Registrar.

Please be advised that you will not be able to drop off your child after the designated check in time. The participants move throughout the neighborhood and the boroughs and we will be unable to accommodate those who arrive late because students will already be fully engaged in activities or travel.

Participants are not allowed to be picked up early except in the instances of emergencies. Even then, your child might not be in the 301 building or they may be involved in an activity that cannot be interrupted. Please be patient while we accommodate you.

Please Check Off One:

I Hereby <u>GIVE</u> my child, who is at least 12 years old, permission to go home unescorted: _____

I DO NOT GIVE my child, who is at least 12 years old, permission to go home unescorted: _____

I Hereby <u>GIVE</u> my child, who is at least 12 years old and is a camper at Camp Henry, permission to escort their younger sibling(s) home: _____

Younger Sibling 1 Name: _____Younger Sibling 2 Name: _____

I <u>DO NOT GIVE</u> my child, who is at least 12 years old and is a camper at Camp Henry, permission to escort their younger sibling(s) home: _____

Important Check-Off Items

• Please list ALL allergies your child may have, no matter how mild they may be.

• Please list any food restrictions your child may have for cultural, religious, or medical reasons.

- Check off your child's aquatic skill level (check all that apply) My child does not know how to swim at all ______
 My child is able to _____ Doggy Paddle ______ Float _____ Swim
- Check off your child's t-shirt size

Child: ____S ____M ____L ____XL or Adult: ____S ____ M ___L ____XL ____XXL

Please Initial Each Statement

	A deposit of \$100 must accompany this application. The deposit is for registration and is NON REFUNDABLE . The tuition payment is due in full no later than June 15, 2016. No child will be permitted to attend camp without payment in full by the above-mentioned date. Money Orders should be made out to Henry Street Settlement or we accept Visa, MasterCard, or Discover credit cards.
	 No child will be properly enrolled in Camp Henry for the 2016 summer without the following paperwork FULLY completed by JUNE 15, 2016: <u>I understand that my child(ren)</u> will not be able to attend camp unless the following items are on file: <u>Fully completed camp application</u> <u>Accurate and up to date medical form</u> <u>Copies of their signed immunization record</u> <u>Current insurance card</u>
	If child does not attend camp, the entire fee paid to date of this notice will be forfeited. <u>No</u> <u>refund</u> will be granted if the camper leaves on his/her own account or is removed from camp due to an inability to adjust or to comply with the camp rules or is unable to function adequately. <u>There is no reduction/refund based on missed days due to absence, illness</u> <u>or to early withdrawal</u> .
	I am aware that my child must follow the rules and regulations of the summer camp program and may be terminated from Camp Henry if he or she does not comply.
	I hereby consent to the taking of photographs, movies, Internet use, and videotapes, of my child by Henry Street Settlement or its designated representatives. I also grant the right to edit, use, and re-use said products for any and all educational, public service, or not for profit purposes selected by Henry Street Settlement and release any and all rights, title, and interest we or the child may have in said products. Photocopies and facsimiles of this Release and consent shall have the same legal effect as the original.
	I understand that I, or a designated family member, must attend a Camp Orientation in order to complete my registration process.
	Camp Henry is not responsible for any personal items (cell phones, hand-held devices, toys) that are lost, stolen and/or damaged while attending camp.
	If there is an emergency that requires me to pick my child up early from camp, I understand that I am expected to contact the Camp Office immediately to give them as much time as possible to accommodate us.
	If your child has a cell phone on them, it will not be activated during camp hours.
	I consent that in an emergency Henry Street Settlement may act in loco parentis and obtain medical treatment if necessary. I understand that if medical treatment is deemed necessary I will be informed as soon as possible
. .	

I reviewed the application and all the information provided is accurate and true. I agree to all the terms and conditions.

Parent/ Guardian Signature



Please return to: Attn: Camp Services Henry Street Settlement 301 Henry Street 4th Fl. New York, NY 10002



Date