



For Office Use Only Date _____ Cpr # _____
Ck/Ap# _____ Amt _____

2013 Registration Form - (Day Camp, Jr. Camp & Sports Camp)

Family Information

1st Parent or Guardian/Mother's Full Name _____ Work Phone (____) _____ Cell (____) _____
2nd Parent or Guardian/Father's Full Name _____ Work Phone (____) _____ Cell (____) _____
Home Address _____ City _____ State _____ Zip _____
Home Phone (____) _____ Fax (____) _____ Email _____
Emergency Contact _____ Relationship _____ Phone (____) _____
Family Doctor _____ Phone (____) _____
How did you hear about us? _____ Referred By _____

Camper 1 Information

Last Name _____ First _____ Sex _____ Age on June 17, 2013 _____
Years at Camp Keystone _____ School in Sept. 2013 _____ Grade in Sept. 2013 _____ Birthdate _____
Please list any special problems/allergies or physical limitations we should be aware of: _____

Please place my child in the same group as: 1. _____ 2. _____ 3. _____

Transportation Provided by Camp Keystone ____ Yes ____ No (I will be arranging my own transportation) My child requires a car seat ____ Yes ____ No
Route _____ Location _____ (LIMITED TRANSPORTATION AVAILABLE WEEK 1, 9, 10)

Sign me up for: Extended Day Care ____ AM 7:30-9:00 ____ PM 4:15-5:30 (Cannot be used in conjunction with transportation)

Camper 2 Information

Last Name _____ First _____ Sex _____ Age on June 17, 2013 _____
Years at Camp Keystone _____ School in Sept. 2013 _____ Grade in Sept. 2013 _____ Birthdate _____
Please list any special problems/allergies or physical limitations we should be aware of: _____

Please place my child in the same group as: 1. _____ 2. _____ 3. _____

Transportation Provided by Camp Keystone ____ Yes ____ No (I will be arranging my own transportation) My child requires a car seat ____ Yes ____ No
Route _____ Location _____ (LIMITED TRANSPORTATION AVAILABLE WEEK 1, 9, 10)

Sign me up for: Extended Day Care ____ AM 7:30-9:00 ____ PM 4:15-5:30 (Cannot be used in conjunction with transportation)

Pick-up Authorization

Please list the name(s) of anyone who is authorized to pick-up your child (ren) from camp or the bus stop. All campers must be signed in and out daily by an authorized, responsible adult: _____

Please list the name(s) of anyone who is not allowed to pick up your child (ren) from camp or the bus stop: _____

Camper Schedule

Select camper schedule by circling the week and days you would like to attend. 2 days schedule must be Tuesday/Thursday.
Please note: we will be closed on July 4. Transportation will be limited weeks 1, 9, and 10

Camper 1 Schedule

Camper 2 Schedule

Session		Dates	Day Camp Days	Sports Camp Days			Dates	Day Camp Days	Sports Camp Days
1	Week 1	June 17-June 21	M T W T H F			Week 1	June 17-June 21	M T W T H F	
2	Week 2	June 24-June 28	M T W T H F	M T W T H F		Week 2	June 24-June 28	M T W T H F	M T W T H F
	Week 3	July 1-July 5	M T W --- F	M T W --- F		Week 3	July 1-July 5	M T W --- F	M T W --- F
	Week 4	July 8-July 12	M T W T H F	M T W T H F		Week 4	July 8-July 12	M T W T H F	M T W T H F
	Week 5	July 15-July 19	M T W T H F	M T W T H F		Week 5	July 15-July 19	M T W T H F	M T W T H F
3	Week 6	July 22-July 26	M T W T H F	M T W T H F		Week 6	July 22-July 26	M T W T H F	M T W T H F
	Week 7	July 29-August 2	M T W T H F	M T W T H F		Week 7	July 29-August 2	M T W T H F	M T W T H F
4	Week 8	August 5-August 9	M T W T H F			Week 8	August 5-August 9	M T W T H F	
5	Week 9	August 12-August 16	M T W T H F			Week 9	August 12-August 16	M T W T H F	
6	Week 10	August 19-August 23	M T W T H F			Week 10	August 19-August 23	M T W T H F	

Signature Required on Reverse Side

Conditions for Enrollment

1. Campers must be in good health: Allergies and other conditions, which might affect the health, safety or welfare of the camper, must be noted on the health history form. Health history forms, which can be downloaded from the Camp Keystone website, **MUST** be on file seven (7) days prior to camper's first day at camp. Health forms do **NOT** need to be filled out by a doctor. I agree to allow Camp Keystone to select a physician should my child be confronted with a medical emergency and I cannot be reached.
2. Absences and Make-up Days: **Campers will be entitled to 2 make-up days.** The office must be notified by 9:00 a.m. on the day of the absence, otherwise the make-up day will be forfeited. If you miss a make-up day, the day will be forfeited. Due to high enrollment, **make-up days cannot be scheduled during weeks 2-7. Make-up days are not guaranteed and are subject to space availability.** Make-up days for camp closure dictated by rain or other natural occurrences of more than two days will be made up. No refunds or credits will be made in lieu of a make-up day. Overnights may not be substituted for make-up days.
3. Deposit and Payment: A \$200 deposit, which includes a \$25 non-refundable registration fee, is required per child enrolled. The balance of all non-discounted fees is due June 1, 2013, regardless of when your child begins camp. See fee chart for discount deadlines. There is a 3% discount for payment by cash or check. Please make checks payable to Camp Keystone. Mastercard and Visa credit cards are accepted, however the rates are 3% higher than the discounted cash/check rate.
4. Withdrawals and Refunds: For families who enroll during priority enrollment (paid in full by Feb. 7), all fees, excluding registration fee, are fully refundable if you notify us by April 1. If you cancel between April 1 and May 1, your \$200 deposit is non-refundable. For all other families registering after Feb. 7, the camp office must be notified by May 1 to receive a refund on all fees, excluding registration fee. After May 1, your \$200 deposit is non-refundable. **After June 1 there are absolutely NO REFUNDS - NO EXCEPTIONS.** We do not offer refunds for camper's time off, missed days, family vacations, partially missed days, any medical reasons, or anything else that requires time off from camp. The exception is for first time Jr. Campers entering preschool and pre-K who may not be ready for camp. Such first time campers will receive on the unused portion of tuition a 50% refund and a 50% credit towards enrollment for year 2014. While Camp Keystone strives to make Camp enjoyable for all campers, satisfaction with the experience is subjective on the part of the child and the parent. Therefore, it is understood and agreed that Camp Keystone cannot and does not guarantee or warrant any campers' satisfaction. It is also understood and agreed that there are no other agreements, expressed or implied, between Camp Keystone and me or my child regarding Camp Keystone's programs, activities, events or field trips.
5. Dismissal from Camp: Should your child be dismissed from camp for unsatisfactory behavior or conduct, 50% of the unused tuition shall be refunded.
6. Transportation: Camp fees include transportation, but for your convenience we have provided a chart that highlights the discount available for providing your own transportation to camp. If your child requires a car seat please be sure to indicate it on the front of your registration form. **Transportation will be limited during weeks 1, 9, and 10 (June 17-21 and August 12-23).**
7. Schedule Changes/Other Charges: There is no charge for schedule changes prior to June 1. **Each schedule change after June 1 will be charged a \$10 administrative fee.** We will absolutely not allow any schedule changes without credit card or cash payment at the time of the change. Late payments will be subject to a \$20 re-billing/late fee. There will be a \$35 charge for each returned check from the bank. Additionally, camp parent agrees to pay collection, attorney's fees and all other fees associated with the collection of any money owed.
8. Program Changes: Boating and fishing are activities that are subject to drought conditions. We reserve the right to add/substitute program activities.
9. Lunch/Beverage: Lunch may be purchased daily or in advance for \$5.00. Lunch, if brought from home, must not contain perishables. We do not provide refrigeration. Juice/punch and water are provided at lunch as well as an afternoon snacks to all campers. Please be sure to label all lunch boxes with your child's name.

Payment Method

Payment Method Promotional Code (if applicable) _____

Check amount enclosed \$_____ or Please charge my:

Deposit _____ Full Tuition _____ to Visa/MC _____

Cardholder Name _____

Account # _____

Expiration Date _____

Cardholder Signature _____

Cost Calculation	Amount/Qty	Total
Tuition Camper 1		
Tuition Camper 2		
Discount (5% for 2nd Child, PromoCode)		
\$25 Registration Fee per child		
Optional items (t-shirts etc.)		
Extended Day AM \$10		
Extended Day PM \$10		
Prepaid Lunches \$5/day		
Total		\$

I understand the use of a credit card will result in tuition being 3% higher than the discounted cash/check rates provided.

Registration and camp enrollment cannot take place without a signature, date and deposit.

I have read, understand and agree to the Camp Keystone policies and enrollment conditions listed above and on the reverse side. I further agree to:

1. Allow Camp Keystone to select a physician should my child be confronted with a medical emergency and I cannot be reached.
2. Allow my child's image to be used in any and all promotional photographs, videos or web sites.
3. Not hold Camp Keystone responsible for any articles of clothing, personal belongings, personal athletic equipment that are lost or damaged by theft, fire, natural disaster or other occurrence.
4. I understand that Camp Keystone provides limited excess accident medical protection for campers. Parents insurance is primary. Camp protection will pay only those covered medical expenses, which are not paid by parents.

5. Release Agreement: I understand that accidents and injuries can happen when my child attends Camp Keystone or participates in its recreational programs. I also understand that my child's enrollment at Camp Keystone is voluntary and my signing of this release agreement is in exchange for my child being permitted to attend Camp Keystone. I agree, for myself, my child, and heirs, to assume the risks of any injury or death my child might suffer as a result of my child's conduct or Camp Keystone's negligence while attending Camp Keystone. Furthermore, I agree, for myself and my child, to release and discharge Camp Keystone and its employees and agents from, and expressly waive any and all claims (known or unknown) for, any negligence on their part that might result in personal injury, property damage, death, costs or attorney's fees. This release of liability waives all claims arising from Camp Keystone's negligence, whether known or unknown by me at this time, and I waive the provisions of Civil Code Section 1542, which says, "A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor." I agree that this Release Agreement is to be interpreted in a way to maximize its enforceability, and that if any portion of this agreement is found to be invalid, the remainder of the Release Agreement remains in effect.



Parent/Guardian Signature _____ Printed Name _____ Date _____

SIGNATURE REQUIRED