



Safekey Summer Camp 2016

Drivers Lic or ID# / St. / Exp.

This Safekey Registration form along with proof of payment, must be submitted to the Safekey Staff prior to attendance.

School Site:	Grade:	Date of Birth:			
Participant First & Last Name:				Age:	Sex:
Address:	Apt.#	City:	Zip:	Phone: ()	

Note: ONLY one registration form is permitted for each child (In joint custody situations BOTH GUARDIANS MUST BE LISTED ON THIS FORM)

PARENT/GUARDIAN #1	Cell Phone: ()
Employer Name & Address:	Work Phone: ()
PARENT/GUARDIAN #2	Cell Phone: ()
Employer Name & Address:	Work Phone: ()
E-mail Address(es):	

EMERGENCY CONTACT / AUTHORIZED TO PICK UP PARTICIPANT (Someone other than parent/guardian):

I understand that it is my responsibility to provide current contact information for all authorized persons.

Name: _____ Relationship: _____ Phone #1: _____ Phone #2: _____

Name: _____ Relationship: _____ Phone #1: _____ Phone #2: _____

Name: _____ Relationship: _____ Phone #1: _____ Phone #2: _____

Name: _____ Relationship: _____ Phone #1: _____ Phone #2: _____

MEDICATION: _____ NO _____ YES (If yes, please complete additional form at the school site.)

DOES PARTICIPANT REQUIRE ANY ACCOMMODATIONS : _____

(If special accommodations are needed, contact the Safekey Office 2 weeks prior to attendance.)

ALLERGIES: _____

Fees: - I understand that Safekey Summer Camp is a **PRE-PAY** program for youth ages 6-12 and proof of payment **MUST** be received prior to participation in the program. Payments may be made via mail, online at www.clarkcountynv.gov/parks, or at the Safekey Administration Office.

_____ (Parent Initials) _____ (Staff Initials)

Proof Of Payments: I understand that I must provide proof of payment to the Safekey staff **BEFORE** my child can participate in the Safekey Summer Camp Program.

_____ (Parent Initials) _____ (Staff Initials)

I Understand **Refunds/Credit On Account** requests **MUST** be submitted and will only be issued if notice is given to Safekey staff in writing or via email at safekeyrefunds@clarkcountynv.gov by Wednesday of the week prior; these guidelines will be strictly enforced. **NO EXCEPTIONS.**

_____ (Parent Initials) _____ (Staff Initials)

Late Pick-Up Fee: I understand that a \$5 late fee will be assessed for every ten (10) minute increment beginning @ 6:01pm until the participant is picked up. For example: 6:01pm =\$5, 6:11pm =\$10, 6:21pm = \$15, etc. Late fee payments must be paid within 3 business days after the incident.

_____ (Parent Initials) _____ (Staff Initials)

Sign-In/Out: I understand that each child must be signed in and/or out daily. The only person(s) authorized to pick up the participant are those individuals listed on this form, and a **photo ID** must be shown. If any person who is not on the pick-up list attempts to take a child from the program, Metro will be called and it may be considered a kidnapping.

_____ (Parent Initials) _____ (Staff Initials)

Parent Guidelines: I must read and understand ALL the policies and procedures as outlined in the Parent/Participant Guidelines and the Summer Camp Brochure.

_____ (Parent Initials) _____ (Staff Initials)

Custody Issues: I understand that Safekey staff cannot resolve custody issues or act as mediators. If custodial issues are in dispute, causing any uncertainty or disruption to our staff or

_____ (Parent Initials) _____ (Staff Initials)

I, Print Parent Name, acting on behalf of myself or my minor child do expressly and forever waive and release Clark County, Nevada, Department of Parks and Recreation and all their respective officers, employees, agents, or representatives from any and all liability for personal injuries or damages sustained, incurred, or arising from participation in any Parks and Recreation activity.

PHOTO/VIDEO RELEASE: By registering for any Clark County Parks and Recreation program, I agree to allow publication of photos or video taken of my child/children or myself at any program, event or facility associated with the Clark County Parks and Recreation Department.

Signature of Parent/Guardian

Date

Safekey

Clark County Parks and Recreation

Summer Camp



SUMMER CAMP CALENDAR 2016

Please complete the bottom portion of this page before mailing:

Camp Site: (Circle one)

Diskin

Silvestri

Participant First & Last Name: _____

Please Note: This Calendar will be used to assist with the planning for adequate staffing needs, and to ensure that a safe and fun environment is maintained for your child.

Reminders:

- 1) The first two weeks of specified days must be paid in full with your initial registration.
- 2) Payment is due by 6 PM each Wednesday to reserve your spot for the upcoming week.
- 3) For periodic attendance, payment in full is required for each anticipated day of attendance.

	<u>Mon</u>	<u>Tue</u>	<u>Wed</u>	<u>Thu</u>	<u>Fri</u>	<u>TOTAL COST</u> <u>\$18 per Day / \$85 per Week</u>
June 6 - 10	Mon	Tue	Wed	Thu	Fri	_____
June 13 - 17	Mon	Tue	Wed	Thu	Fri	_____
June 20 - 24	Mon	Tue	Wed	Thu	Fri	_____
June 27 - July 1	Mon	Tue	Wed	Thu	Fri	_____
July 4 - 8	CLOSED	Tue	Wed	Thu	Fri	_____
July 11 - 15	Mon	Tue	Wed	Thu	Fri	_____
July 18 - 22	Mon	Tue	Wed	Thu	Fri	_____
July 25 - 29	Mon	Tue	Wed	Thu	Fri	_____
August 1 - 5	Mon	Tue	Wed	Thu	Fri	_____
August 8 - 12	Mon	Tue	Wed	Thu	Fri	_____

TOTAL fees for Days Selected: _____

* T-Shirt size: _____ \$5

TOTAL FEES + \$5 T-SHIRT (optional) : _____



* Camp T-shirts are available in Youth sizes S, M, L, and Adult sizes S, M, L, XL

NOTE: T-shirts are required for participation in field trips.

