

Redding Park & Recreation DECEMBER VACATION CAMP



Child's Name: _____ Grade: _____ Home Phone: _____

Parent's Daytime phone numbers/names: _____

Additional people authorized to pick up your child and phone number: _____

Comments / Allergies: _____

I understand that the Town of Redding does not have accident insurance and that costs incurred due to injury for the student listed above are my responsibility. Up to December 19th a 50% refund will be given. On December 20th and there after no refund will be given.

The Park and Recreation Office is CLOSED on Friday's. You must sign up the day before. No day of registrations. **We must have at least 10 campers to run vacation camp.** If by December 15 we do not have 10 kids it will be cancelled. I understand that I must pick up by 3:30pm or pay a late pickup fee of \$20 for every 15 minutes or part of 15 minutes that I am late. The same policy applies to the after hours program.

Parent's Signature: _____

Is there any special information that you would like to share that would enable us to serve your child better?

No Yes* The Appropriate person from the department will call you or you may attach a note to this form.

PLEASE NOTE:

CAMP IS BEING HELD AT THE REDDING COMMUNITY CENTER ON MONDAY AND TUESDAY AND REDDING ELEMENTARY SCHOOL WEDNESDAY – FRIDAY

You will receive a camp letter TO PARENTS as we get closer!!!

This camp is for children in grades K-6

Circle prices for appropriate days & times. Fill-in totals in right-hand columns.

	Time	12/26	12/27	12/28	12/29	12/30	Total
Activity #	12200-	1	2	3	4	5	
		MON	TUES	WEDS	THURS	FRI	
Early Drop	8:00 am - 9:00 am	\$4.00	\$4.00	\$4.00	\$4.00	\$4.00	
Regular Day drop	9:00am - 3:30 pm	\$34.00	\$34.00	\$34.00	\$34.00	\$34.00	
After hour	Until 5:00 pm	\$6.00	\$6.00	\$6.00	\$6.00	\$6.00	

I authorized the use of this credit card for the above payments. (Circle one) Master Card Visa Am Ex Discover

Signature _____ CVV _____

Credit Card Number _____ Expiration Date _____