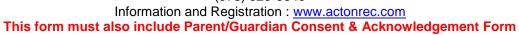


TOWN OF ACTON RECREATION DEPARTMENT

50 Audubon Drive, Acton, MA 01720 (978) 929-6640





2024 N	ARA SUMMER CA	MP CIT REGISTRA	ATION FORM (Ages 14	l-15)		
CAMPER INFORMATION	(one child per form)						
Last:	First:		MI:				
Nickname				Grade (Fall 2024):			
Birthday (MM/DD/YYYY)			Please circle:	Male, Fem	ale, Non-b	inary	
Prior NARA Camp participa	nt?: Yes No		·				
Allergies							
Special							
Accommodations							
PARENT/GUARDIAN INI	ORMATION						
Name(s)							
Mailing Address							
City, State, Zip							
Home Phone		C	Cell Phone:				
E-mail address							
List anyone authorized who including yourself.	may pick up your child						
ID required must match d	esignated pick-up						
Every participant will receive	a free t-shirt at camp. C	amners should wear their	t-shirt on field trin (lavs for gro	un identifi	ration	
Every participant will receive a free t-shirt at camp. Campers should wear their t-shirt on field trip days for group identification.							
Please circle your child's size	: Adult Small	Adult Medium Adult	Large				
			1	T _			
Cassian #	Datas	Cassian Thomas		<u>Pre-</u> Care	Post Care	Tatal	
Session #	Dates	Session Theme	Session Fee	7:30-	4:00-	Total	
1	June 24 – 28	Disney	\$150	\$20	5:30 \$65		
2	July 1 – 5	Celebrate our Country!	\$150	\$20	\$65		
	(no camp 7/4)						
3	July 8 – 12	Pirate	\$150	\$20	\$65		
4	July 15 – 19	Superhero	\$150	\$20	\$65		
5	July 22 – 26	Camp Olympics	\$150	\$20	\$65		
6	July 29 – Aug. 2	NARA's Got Talent	\$150	\$20	\$65		
7	August 5 – 9	Pokémon	\$150	\$20	\$65		
8	August 12 – 16	Under the Sea	\$150	\$20	\$65		
9	August 19 – 23	Harry Potter	\$150	\$20	\$65		
		riany rollei	φισυ	ΨΖΟ	ΨΟΟ		
Please note: All meals, snacks, and beverages are	Total Paid:						
						I	
provided by parent.	\$		<u> </u>				



NARA Summer Camp Parent / Guardian Consent and Acknowledgement

MUST BE SUBMITTED WITH EACH CAMP REGISTRATION

<u>Field Trips</u>: Field trip costs are included in the registration fee. By signing this form, you are consenting to send your child on the field trips without an additional field trip permission slip. If you send you child to Camp on Thursday, they will be attending the field trip on that day. The only way for your child to skip the field trip is to not come to Camp that day. No refunds are given for missed days.

Sunscreen: I give permission for my camper to use sunscreen and receive administering help from staff. Initial____

Hand Sanitizer: I give permission for my camper to use hand sanitizer. Initial_

session week participation. These records must be submitted on CampDoc.com prior to the first day of camp, or you not be admitted due to Board of Health regulations. Refund Policy: You may withdraw up to seven (7) business days prior to the start of a session. A \$50 non-refundable applied for each session. Pre-Camp and Post-Camp: A fee of \$10 is applied for each session. Exception to politimeframe: a written letter from a licensed physician excusing participant from a program prior to the first day of sessidate. In the event of physician's letter the non-refundable registration fee still applies. Refunds will not be issued du conditions or any water closure. All refund requests must be submitted in writing to the Recreation Office. Refund renot accepted by NARA Summer Staff. Behavior: We take great pride in the outstanding respect that our participants have exhibited over the years with o For the enjoyment and safety of all participants and staff, inappropriate behavior will not be permitted. Our program tolerance policy. Grounds for dismissal include: disrespect for others or property, foul language, fighting, bullying, s	oths of the ur child will ble fee will cy sion start the to weather equests are ur program.
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For the enjoyment and safety of all participants and staff, inappropriate behavior will not be permitted. Our program tolerance policy. Grounds for dismissal include: disrespect for others or property, foul language, fighting, bullying, s	
behavioral issues.	exual
Switching Session Fee: A fee of \$25 per session fee is applied (per person) pending availability of session opening Camp and Post-Camp: A fee of \$10 per session is applied.	ıgs. Pre-
Scholarships: Scholarships are available for qualifying Acton or Boxborough residents through the Doli Atamian C Program: https://www.doliatamiancampership.com/ .	ampership
Flexible Spending: Town of Acton Tax ID #046-001-062. We are happy to provide a receipt for Flexible Spending reimbursement to parent/guardian listed on the account. Receipt requests must be in writing to recreation@actonm	
Photographs: Please initial if you wish for your child to NOT be included in photographs	
Email: Recreation uses email to communicate Recreation information and will not give out your address for other p	urposes.
<u>Proxy Registrations, Program Confirmation & Disclaimer</u> : A person may submit another's registration form proform is properly completed and signed. The Recreation Department reserves the right to correct errors or adjust profond activities in any of its publications at the time of release by print or internet, and reserves the right to cancel any	ogram fees
Release of Liability: The Town of Acton and any other associated groups, their officers, members or associates, a volunteer, do not accept any liability for loss of life or property, personal injury or damage caused or rising out of any engaged in during the NARA Summer Camp for any reason whatsoever. I also agree to assume the risks for mysel child and agree to hold the Town of Acton and its officers, employees and volunteers harmless and free of any liabil damage or injury my child may incur arising from participating in NARA Summer Camp.	activity f and my
Registrations must be completed in full and signed by parent/guardian. Registrations will not be processed incomplete. I acknowledge the above policies and Release of Liability.	if
Child's Name (Printed):	
Parent/Guardian Signature:	
Parent/Guardian Name (Printed): Date:	
Office Use Only:	
Total Received \$ Payment Type: Cash MO Visa MC Check #	
Date Received: By:	