

Registration begins Feb. 11

Summer 2012 Kid's Discovery Registration Form

KIDS IN GRADES K-5 IN FALL OF 2012- FULL AND HALF DAY CAMP

Child's Full Name: _____ Grade in FALL '12: _____

Child's Street Address (include town, state, zip code): _____

Child's Phone #: _____ Date of Birth: _____ Age: _____

Special Needs? Y or N. If yes, please list here or attach information. _____

Allergies or Limitations: _____

Please return a current immunization form from your child's pediatrician & our '12 First Aid & Emergency Consent Form by June 1.

Parent's Full Name: _____ Home Phone: _____ Cell Phone: _____

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Family E-mail address: (only if you are not already on our list): _____

Session Dates	FULL DAY COST	Extended Day	Half Day Cost	Early Bird Discount If Paid In Full by 4/30	Sibling Discount	Total Left - Right
Week 1: June 25—June 29	\$210	+\$50	\$110	-\$30 Full Day -\$20 Half Day	-\$30	
Week 2: July 2—6	\$190	+\$40	n/a	-\$30 Full Day	-\$30	
Week 3: July 9—13	\$210	+\$50	\$110	-\$30 Full Day -\$20 Half Day	-\$30	
Week 4: July 16—20	\$210	+\$50	\$110	-\$30 Full Day -\$20 Half Day	-\$30	
Week 5: July 23—27	\$210	+\$50	\$110	-\$30 Full Day -\$20 Half Day	-\$30	
Week 6: July 30—August 3	\$210	+\$50	\$110	-\$30 Full Day -\$20 Half Day	-\$30	
Week 7: August 6-10	\$210	+\$50	\$110	-\$30 Full Day -\$20 Half Day	-\$30	
Week 8: August 13-17	\$210	+\$50	\$110	-\$30 Full Day -\$20 Half Day	-\$30	

PAYMENT: Please make checks payable to Town of Northborough. For your convenience, we accept Visa, MasterCard, & Discover. Please refer to the camp registration information form, available at www.northboroughrecreation.com regarding the refund policy.

PAYMENT SCHEDULE: Registration forms must be completed in full at time of registration.

*Payment for 1 wk/child is due to reserve your child's spot.

*Early Bird discounts are valid only if all registrations are paid in full by April 30.

Any reserved spots will be cancelled if the balance is not paid by June 1.

QUESTIONS? Please contact Northborough Recreation directly at 393-5034 or visit our office at Town Hall, 63 Main Street.

WWW.NORTHBOROUGHRECREATION.COM

Waiver: In consideration of this application, I or my child, release the Town of Northborough, its employees, agents, representatives, and other persons or organizations for whose conduct it is responsible from any and all liability, loss, damage, costs, claims and/or causes of action, including but not limited to all bodily injuries and property damages resulting or arising from the use of premises, facilities, or equipment of the Town of Northborough, or caused in any way by the Town of Northborough, its employees, agents, representatives, and other persons or organizations for whose conduct it is responsible. I and/or my child upon the necessary physical condition to participate in the registered activity, I authorize the staff to seek emergency medical care on my behalf or child if needed. I will assume all costs. I have read the program policies and understand them and the code of conduct. I understand the refund policy. I understand my child may be photographed during the programs and may be put in the local papers.

Parent/Guardian/Adult over 18 Signature: _____ Date: _____