



SUMMER CAMP REGISTRATION 2020

Child Information	First Name	Middle Name	Last Name
Date of Birth(<i>month/day/year</i>)	Current Age	Gender <input type="radio"/> M <input type="radio"/> F	Start Date

Mother / Guardian Information	First Name	Last Name
Home Address		
Home Phone	Cell Phone	Work Phone
E-Mail	Driver's License #	

Father / Guardian Information	First Name	Last Name
Home Address <input type="checkbox"/> (<input checked="" type="checkbox"/> Check here if same as Mother/Guardian) City/Zip		
Home Phone	Cell Phone	Work Phone
E-Mail	Driver's License #	

Does your child reside with both parents? Yes ___ No ___ If no, who is the custodial parent/guardian? _____
 Is a **parent not** authorized to pick up this child? Yes No. If yes, please provide a **copy of the court order**.

Name/Address of Elementary School	Grade
Please check the box indicating that the school listed has a copy of current immunization records for your child.	<input type="radio"/> School has records Teacher

CHILD HEALTH HISTORY

Does your child have any allergies?	<input type="radio"/> Yes	<input type="radio"/> No	Please describe
How should we respond to an allergic reaction? (<i>provide physician's directive and EPI-PIN</i>)			
Does your child have any existing health conditions?	<input type="radio"/> Yes	<input type="radio"/> No	If yes, please describe
Does your child currently take any medication?	<input type="radio"/> Yes	<input type="radio"/> No	If yes, list medication
Will your child be taking any medication at Hatch House School?	<input type="radio"/> Yes	<input type="radio"/> No	If yes, please describe how it is administered

Child's Name: _____
(Please PRINT) First Middle Last

EMERGENCY & AUTHORIZED CONTACTS

I/we, understand that if the parents/legal guardians cannot be reached during an emergency, I/we authorize the release of my child to the individuals listed below. These individuals will also be authorized to pick your child up from the daycare center with valid identification.

Contact #1

First Name	Last Name	Relationship to Child
Home Address		City/Zip
Cell Phone:	Home Phone	Driver's License #

Contact #2

First Name	Last Name	Relationship to Child
Home Address		City/Zip
Cell Phone	Home Phone	Driver's License #

PHOTOGRAPHIC ACKNOWLEDGEMENT AND RELEASE

I _____ (parent/guardian name), am authorized to sign this release on behalf of the my child _____ (child's name) and thereby GRANT Hatch House School, it's staff and agents permission to use my child's photographic image in photography publications, promotional purposes, websites, media press releases and coverage's and any other such purposes on behalf of Hatch House School.

Parent/Guardian: _____ Date: _____

RELEASE FROM LIABILITY & PERMISSIONS

Please initial and sign below:

___ I hereby grant permission for my child to participate in water activities. *(Select all that apply)*

sprinkler play splashing/wading pools swimming pools water play tables

___ I hereby release Hatch House School from medical liability due to any illness or injury occurring during my child's attendance and participation in School activities.

___ I give permission for my child to go on field trips and release Hatch House School, its employees, and agents from any liability. *(Parents will be notified of field trips, and Field Trip Permission Form must be completed prior to participation).*











___ I hereby release Hatch House School, its employees and agents from all liabilities resulting from transporting my child from school and on field trips, and I also will not hold Hatch House School financially responsible for any emergency care.

Parent/Guardian: _____ Date: _____

Child's Name: _____
 (Please PRINT) First Middle Last

SUMMER CAMP SELECTION 2020
Hatch House School
CEDAR PARK

Please select the weeks that your child will be attending summer camp: **Full-Time ONLY***

Infinity and Beyond:	Academy Sports & Outdoors	Buggin' Out:	Movie & Film Workshop
<input type="radio"/> June 1 - June 5th 	<input type="radio"/> June 8 - 12th 	<input type="radio"/> June 15 - 19th 	<input type="radio"/> June 22 - 26th 
I Spy	Ninja Warrior	Musical Theater 101	Inventors Workshop
<input type="radio"/> June 29 - July 2, Closed July 3 rd	<input type="radio"/> July 6 - 10th 	<input type="radio"/> July 13 - 17th 	<input type="radio"/> July 20 - 24th 
Game Builder	Around the World in 5 Days	Lego & Robotics Short Week Rate \$125	Lego & Robotics Daily Rate \$45
<input type="radio"/> July 27 - July 31st 	<input type="radio"/> August 3 - 7th 	<input type="radio"/> August 10 - 12th 	<input type="radio"/> August 10  <input type="radio"/> August 11 <input type="radio"/> August 12

***Parents are financially responsible for Camp Selected.**
Tuition is DUE on the Friday prior to the week/weeks selected.