SHIRT SIZE:			
Youth	6-8	10-12	14-16
Adult	34-36	38-40	42-44	46+
	S	M	L	XL

City of Bellaire Parks and Recreation

Resident Day Camp Registration Form

For Office Use Only				
Session	1	2	3
	4	5	6
	7	8	9
Post	10		

CAMPERS NAME _____ AGE _____ BIRTHDATE _____ SEX _____

ADDRESS _____ ZIP _____ CELL MOM/DAD _____

PARENT / GUARDIAN'S NAME(S) _____ PHONE _____

NAME/WORK# _____ NAME/WORK# _____

PARENT'S EMAIL: _____

If Not Available In An Emergency, Notify: _____

ADDRESS _____ PHONE (C) _____ (W) _____

Other Persons Authorized To Pick Up My Child:

1. _____ PHONE(C) _____ (W) _____

2. _____ PHONE(C) _____ (W) _____

PARENTAL CONSENT

I (we) the undersigned, am (are) the natural parent(s) or guardian(s) of the minor child or children, "minor(s) as herein named, and as such, do hereby consent to the minor(s) named herein participating in the City of Bellaire sanctioned or sponsored activities as described in the application to which this consent is attached. I (we) acknowledge on behalf of the minor(s) named that:

1. I (we) have made a full inquiry with the sponsors, teachers and/or instructors as to the nature and type of program; and
2. I (we) have permitted and authorized the named minor(s) to participate in the activity or program to which this consent is attached; and
3. I (we) acknowledge on behalf of the minor(s) that the participation in the program and activity necessarily involves risk, including risk or injury, and believe and understand that the participation of the minor(s) as named herein is justified and proper.
4. I give my permission for the City of Bellaire to photograph my child during camp and to use the photograph in promoting the City of Bellaire Day Camp Program.
5. **Would you like your child to participate in swim lessons? Yes / No** **(Swim Lessons offered for ages 5-7. Max swim level lessons is level 3.)**

Signed this, the _____ day of _____ , 20 ____ . Signature _____

For Office Use Only **Payment Schedule** ***For Office Use Only***

$25.00 (*Non Refundable and Non Transferable*) Deposit Required Per Child Per Session

Session balance will be automatically charged one full month before the first day of each session. Late fees are $25.00.

$10.00 Discount Per Additional Child Within The Same Family

Auto-Bill Date:		May 4th Session 1	May 11th Session 2	May 18th Session 3	May 25th Session 4	June 1st Session 5	June 8th Session 6	June 15th Session 7	June 22nd Session 8	June 29th Session 9	Due Now Limited to 80 campers Session 10 Post Camp
Camp Fee		$150	$150	$150	$150	$120	$150	$150	$150	$150	$150
Before Camp	$10										$10
After Camp	$20										$20
Amount Due	$										$
Minus Deposit	-$	$25	$25	$25	$25	$25	$25	$25	$25	$25	$0.00
Adjustments	-$										$
Total Balance Due	$										$
Late Fee	$25										$
(For Balance Due) Date											
Balance Payment Amt.											
Balance Payment Trans. #											
Deposit Trans. #											

STOP