

**Returning Camper or FCC member
Killam's Point Day Camp 2024 Camper Registration
(please attach health form)**

_____ is enrolled in week(s):
(please print child's first and last names)

- Week 1 – July 8 - 12**
- Week 2 - July 15 - 19**
- Week 3 - July 29 - August 2**
- Week 4 – August 5 - August 9**

Allergies _____

Parent's Name _____

Phone Number (cell) _____ (home) _____

Address _____

Email _____

Emergency Contact _____ Phone _____

Grade child will **complete** in 2024 Is Health Form on File? **Y N**

Transportation (choose one): Bus pick up at commuter lot _____ bike _____

Tuition is \$250 for hours 9-3. There is a \$25 sibling discount.

Please make checks out to First Congregational Church Branford

No refunds will be given for cancellations made less than 2 weeks prior to camp or in case of emergency

_____ **for office use only** _____

Check number _____ Check Amount _____

A **late fee** of \$10 for the first 15 minutes, or any part thereof, and \$15 for every 15 minutes thereafter that the child remains at the bus stop beyond the pick-up time will be applied. Habitual late pick up (2 times) will result in the child's dismissal from camp.

Child Pick-Up Authorization

In case I cannot pick up my child _____ D.O.B _____

Please release my child to one of the following people:

Name _____ Relationship _____

Phone _____

Name _____ Relationship _____

Phone _____

Parent/Guardian Authorization for Application of Non-Prescription Topical Medications by Camp Nurse

I request that the below-mentioned non-prescription topical medications be administered to my child by the Camp Nurse. **I understand that I am responsible for supplying the camp the non-prescription topical medication in the original container clearly labeled with my child's name.** (Please sign.)

Name of non-prescription topical medication _____

Dates non-prescription topical medications shall be administered _____

Name of Parent or Guardian _____ Relationship _____

Signature

If my child forgets their sunscreen or bug spray, I get permission to KPDC staff to provide sunscreen or bug spray.

I give KPDC permission to call 911 in case of an emergency. I, the parent/guardian of minor participant, recognize the possibility of physical injury, associated with the activities at camp. I hereby release, discharge and/or otherwise indemnify Killam's Point Day Camp, Killam's Point Conference Center, all personnel, against claims by or on behalf of the registrants as a result of the registrant's participation in camp programs.

If my child is ill or has a fever, I will not send my child to camp nor if he/ she is exhibiting any known symptoms of or has recently been in contact with anyone who I reasonably believe has, COVID-19. I agree that my child will follow reasonable precautions set up by staff, including, frequent handwashing, proper social distancing, and the like.

Currently, masks are required on buses and I will provide my child with a mask for transportation.

Killam's Point Day Camp is located outdoors in a woodsy area on the ocean. During inclement weather, camp may be moved to the First Congregational Church or may have to be cancelled for the day to ensure everyone's safety.

I fully understand that there are known and potentially unknown risks of utilizing the programs. Accordingly, I will not hold Killam's Point Day Camp or its affiliates liable for any loss or damage relating to or resulting from an illness even if such loss or damage results from attendance at camp

I HAVE READ AND VOLUNTARILY SIGN THIS ASSUMPTION OF RISK AND WAIVER OF LIABILITY. I understand the information above, and acknowledge that it is my responsibility to abide by Killam's Point Day Camp Policies.

By signing here, I also agree to all the above permissions, billing and waiver

Signature _____

Date _____

If you **do not** authorize the use of participant photos on Killam's Point's website, flyers, social media, brochures and advertising initial here _____

Our goal at Killam's Point camp is to provide a fun and safe experience for all campers. If your child has emotional, behavior, health, social, or learning needs please contact Dawn at kpoincamp@gmail.com so we can plan and provide the best experience for your camper. Additionally, we offer scholarships for anyone in need. No camper will be turned away due to financial hardship. Please contact Dawn Perrotti, Camp Director at Kpoincamp@gmail.com for scholarship information. All information will be kept confidential.

