

Town of Colma **Recreation Services Department**

2017 Day Camp Quick Payment Form - Resident

Payee:	Child(ren): Phone:						
Address:							
Free Lunch Program? YES ☐ NO							
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY		****
Early Morning Care - \$1 per day	6/12 □	6/13 □	6/14 □	6/15 □	6/16 □		AMOUNT
General Day Camp - \$5 per day						-	
Afternoon Care - \$1 per day						-	
, , , , . , . , . , . , . , . , . , . ,						Total:	
	6/19	6/20	6/21	6/22	6/23	·-	
Early Morning Care - \$1 per day General Care - \$5 (M,T,Th,F)						-	
6/21, Santa Cruz - \$20 (W)							
Afternoon Care - \$1 per day			X			-	
						Total:	
	6/26	6/27	6/28	6/29	6/30		
Early Morning Care - \$1 per day	□ □	□ □	□ □	□ □			
General Day Camp - \$5 per day		_	_			-	
Afternoon Care - \$1 per day						-	
, , ,						Total:	
	7/3	7/4	7/5	7/6	7/7		
Early Morning Care - \$1 per day		No					
General Care - \$5 (M,W,Th)						-	
7/7, Adventure Playground - \$11 (F)		Camp					
Afternoon Care - \$1 per day					X		
						Total:	
	7/10	7/11	7/12	7/13	7/14		
Early Morning Care - \$1 per day						_	
General Day Camp - \$5 per day						-	
Afternoon Care - \$1 per day						=	
						Total:	
	7/17	7/18	7/19	7/20	7/21		
Early Morning Care - \$1 per day							
General Care - \$5 (M,T,Th,F)						·-	
7/19, Aqua Adventure - \$14 (W)						-	
Afternoon Care - \$1 per day			X			Total:	
						iotai.	
	7/24	7/25	7/26	7/27	7/28		
Early Morning Care - \$1 per day						-	
General Day Camp - \$5 per day	_		_			-	
Afternoon Care - \$1 per day						Total:	
						iotai.	
	7/31	8/1	8/2	8/3	8/4		
Early Morning Care - \$1 per day						=	
General Care - \$5 (M, W, Th, F) 8/1, Lake Don Castro - \$11 (Tues)							
Afternoon Care - \$1 per day		×				-	
, 4 , por au	_		_	_	_	Total:	
						•	
Early Morning Caro \$4 manday	8/7	8/8 □	8/9	8/10 	8/11		
Early Morning Care - \$1 per day General Day Camp - \$5 per day						-	
Afternoon Care - \$1 per day						-	
vai o vi poi day	-	=	_	_	=	Total:	
						•	
Early Marning Care #4 day	8/14	8/15	8/16	8/17	8/18		
Early Morning Care - \$1 per day General Day Camp - \$5 per day						-	
Afternoon Care - \$1 per day						-	
- Y - P	_	_	_	_	_	Total:	
* Please complete Liabi	ility Release	e on reve	rse		GRAND	TOTAL:	

^{*} Please complete Liability Release on reverse



Liability Release Waiver

In consideration of the acceptance of my application for entry into each above activity, I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may have, or which hereafter accrue to me, against the Town of Colma as a result of my participation in the activity. This release is intended to discharge the Town of Colma, its officers, officials, employees and volunteers, any other involved municipalities or public agencies from and against any and all liability arising out of or connected in any way with my participation in the activity, even though that liability may arise out of the negligence or carelessness on the part of persons or Town of Colma. I further understand that accidents and injuries can arise out of the activity; knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all of the persons or agencies mentioned above who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I am aware of the cancellation policy and the penalties involved for activities for which I have registered myself and family. I realize that while participating in any Town sponsored activities myself or a family member may be photographed and that photo may be used for a future Town of Colma publication, report, flier and/or advertisement.

Signature:	Date:
Parental Consent: (To be con	pleted if participant is under 18 years of age). I give my consent for my
son/daughter	to participate in the above activity and I execute the above
liability release on his/her beh	lf.