

Town of Colma Recreation Services Department



2023 Day Camp Quick Payment Form - Resident

Payee:			Child(ren):				
Address:			Phone:				
			Email:				
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY		
Week 1: Spring into Summer	6/12	6/13	6/14	6/15	6/16		AMOUNT
Early Morning Care - \$1 per day							
General Day Camp - \$25 per session							
Afternoon Care - \$1 per day						_	
						Total:	
Week 2: Once Upon a Camp	6/19	6/20	6/21	6/22	6/23		
Early Morning Care - \$1 per day			X			_	
General Care - \$20 per session (M, T, Th, F)							
6/21 Children's Fairy Land \$16 (W)	Ш	Ц	П	Ш	ш		
Afternoon Care - \$1 per day			X			_	
						Total:	
						_	
Week 3: Happy Holidays!	6/26	6/27	6/28	6/29	6/30		
Early Morning Care - \$1 per day General Care - \$20 per session (M,			X			_	
T, Th, F)							
6/28 Santa Cruz Beach Boardwalk \$20	_	_	П	_	_		
(W) Afternoon Care - \$1 per day			X			_	
Alternoon care - \$1 per day	П	Ц	^	Ц	Ц	Total:	
						-	
Week 4: Culinary Creators	7/3	7/4	7/5	7/6	7/7		
Early Morning Care - \$1 per day						_	
General Day Camp - \$15 per session	No Camp	No Camp				_	
Afternoon Care - \$1 per day						_	
						Total:	
Week 5: Jurassic World	7/10	7/11	7/12	7/13	7/14		
Early Morning Care - \$1 per day			×				
General Care - \$20 per session (M,	_	_		_	_	_	
T, Th, F)							
7/12 Palo Alto Junior Farm & Zoo - \$12 (W)					_		
Afternoon Care - \$1 per day			×			-	
The second care is a second care in the second care in the second care is a second care in the second care i	_	_	•	_	_	Total:	
						_	
Week 6: Splish Splash	7/17	7/18	7/19	7/20	7/21		
Early Morning Care - \$1 per day General Care - \$20 per session (M,		×				_	
General Care - \$20 per session (M, T, Th, F)							
7/18 Adventure Playground - \$16 (T)		_					
Afternoon Care - \$1 per day		X					
						Total:	
Week 7: All Around the World	7/04	7/05	7/06	7/07	7/00		
Early Morning Care - \$1 per day	7/2 4 □	7/25 □	7/26 □	7/27 □	7/28 □		
General Day Camp - \$25 per session						_	
Afternoon Care - \$1 per day						_	
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						_	
Week 8: Mini Picassos	7/31	8/1	8/2	8/3	8/4		
Early Morning Care - \$1 per day						_	
General Day Camp - \$25 per session Afternoon Care - \$1 per day						_	
Alto noon oale - et per uay	Ц	Ц	Ц	Ц	Ц	Total:	
Week 9: Lab Rats	8/7	8/8	8/9	8/10	8/11		
Early Morning Care - \$1 per day			X			_	
General Care - \$20 per session (M,							
T, Th, F) 8/9 Bay Area Discovery Museum - \$16							
(W)							
Afternoon Care - \$1 per day			X			_	
						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 completed if partic	cipant 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 behalf.	