

2017 Wastahi Registration Form
REGISTRATION FEES:

Please select what program you are enrolling in:

- | | | | |
|--|---|-------|--------------------------------|
| <input type="checkbox"/> Young Camper | (Ages 6-10) | \$560 | Age as of July 23, 2017 |
| <input type="checkbox"/> Camper | (Ages 11-16) | \$590 | |
| <input type="checkbox"/> Junior Counselor* | (9 th & 10 th grade in fall) | \$580 | |
| <input type="checkbox"/> Counselor in Training* | (11 th & 12 th grade in fall) | \$570 | |

*Junior Counselors and Counselors in Training must complete a separate application and an interview prior to registration. They will be contacted by the Junior Staff Director for interview within 2 weeks of receiving the application.

PAYMENT WORKSHEET:

Camper price: (6-10yrs = \$560; 11-15yrs = \$590; JC = \$580; CIT = \$570): _____
 Gluten-free diet (unless 6 days of food is provided) = + \$60 _____

Discounts: (All discounts applied must be approved by camp office.)

Early File Discount = -\$40 (All forms RECEIVED & COMPLETE by April 30, 2017): _____

Early Payment Discount = -\$10 (Camp tuition paid in full by April 30, 2017): _____

Young Camper Referral discount = -\$20 (Referred camper age 6-9, must attend camp 2017): _____

Non-Sibling. Referred camper must pay full price.

Sibling discount = -\$20 (One sibling pays full rate, discount applicable to each additional sibling): _____

Dishie discount = -\$50 (Child agrees to help with dishwashing for every meal at camp): _____

TOTAL DISCOUNT APPLIED: - _____

Additional Donation: All donations help fund camperships and program supplies: + _____
 Thank you for your support! All donations are tax deductible, receipt available upon request.

TOTAL PAYMENT: _____

CAMP APPAREL: One (1) Camp Wastahi T-shirt is provided for each camper

T-shirt Size: (Please circle) Youth S Youth M Youth L Youth XL
 Adult S Adult M Adult L Adult XL Adult XXL

TRAVEL INFORMATION:

Bus travel departs from/returns to the San Jose Municipal Rose Garden on Naglee Rd. For camper safety, the camper's guardian **must** sign in/out camper with director at bus site or campsite sign in area. ID may be required. Further information will be provided in the camp information package in June.

TRAVEL PREFERENCE - TO CAMP BUS **space limited** PREFER TO DRIVE
TRAVEL PREFERENCE - FROM CAMP BUS **space limited** PREFER TO DRIVE

NOTE: If the camper will be transported to/from camp other than by a guardian, please supply identification information here. Should the information change, please inform us prior to the camp session:

Name: _____ will Drop Off Pick up this registered camper

Relationship: _____ **Phone:** (_____) _____ **Email:** _____

Camper's Code of Conduct

Camp Wastahi strives to create a safe and caring community. We want all campers to feel welcome and accepted.

1. I will be respectful to everyone at camp. I will not swear or speak disrespectfully of/to other campers or staff.
2. I will be respectful of Camp Wastahi by keeping my personal area and cabin clean. I will participate in camp clean up and understand that I will be asked to perform chores around camp. I will not litter!
3. I will respect the property of the camp and of others.
4. I will ask for permission before leaving my cabin or an activity and will always travel with a buddy for my safety.
5. I will dress in appropriate clothing for camp. Logos depicting violence, foul language, alcohol, etc. are not permitted.

Closed-toed shoes will be worn during camp.

6. I will not bring electronic equipment to camp (iPods, cell phones, etc.) *If these items are brought to camp, they will be held by the Camp Director and returned at the end of camp. Camp Wastahi is not responsible for the damage, destruction or loss of such items.*
7. I will not bring alcohol, drugs, tobacco, weapons or fire-producing devices to camp. *Possession or use of these items is cause for immediate dismissal with NO refund of camp tuition.*
8. I will follow safety instructions and remain in areas designated by staff.
9. I will inform my counselor of any personal conflicts that may jeopardize my enjoyment or safety at Camp Wastahi. I will voice my concerns for others as well.
10. I understand my behavior can affect the experience of others campers. If I do not follow these guidelines or my behavior is considered to be inappropriate, I may be asked to leave camp with NO refund of camp tuition.

Please review the above guidelines with your child before attending camp. Campers who disregard these guidelines will be asked to leave camp. In the event of dismissal/removal from camp, it will be the responsibility of the parent/guardian to make transportation arrangements for their child from camp and there shall be no refund of any part of the camp fee.

Camper's name (please print)

Camper's Signature

Date

Talent / Media Release

I hereby assign and grant Camp Wastahi, Inc. the right and permission to use and publish the photographs, film, video, electronic representations and/or sound recordings made of the Camper by Camp Wastahi. I hereby release Camp Wastahi, Inc. from any and all liability from such use and publication. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of Camp Wastahi, Inc., and I specifically waive any right to any compensation I may have for any of the foregoing.

I agree I do not agree

Parent/Guardian Signature

Date

Parental/Guardian Informed Consent and Hold Harmless/Release Agreement

I understand that participation in Camp Wastahi activities involves a certain degree of risk. I have carefully considered the risk involved. The health history submitted is correct, to the best of my knowledge, and the Camper in this Registration Form is in good health, is willing and able, and has permission to engage in all camp activities, unless otherwise listed below. I understand that participation in these activities is entirely voluntary and requires Campers to abide by applicable rules, standards of conduct and follow directions of camp staff.

- Without restrictions.
- With special considerations or restrictions (list)

I approve the sharing of the information on this form with Camp Wastahi volunteers and professionals who need to know of medical situations that might require special consideration for the safe conduct of camp activities. In case of an emergency involving the Camper, I understand that every effort will be made to contact the individuals listed as the Guardians or Emergency Contact. In the event that none of these persons can be reached, permission is hereby given to the medical provider selected by the adult leader in charge to secure treatment, including, but not limited to, hospitalization, anesthesia, surgery, or injections of medication for the Camper. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the Camper, follow-up and communication with the Camper's Guardians, and/or determination of the Camper's ability to continue in the program activities. I agree to be financially responsible for all treatment. I further authorize Camp Wastahi staff to provide routine non-emergency medical care.

I release Camp Wastahi, Inc., including its board members and officers ("Camp Wastahi, Inc."), and I further release the Camp Wastahi staff, employees, volunteers, any party contracting with Camp Wastahi, or other organizations associated with Camp Wastahi ("Camp Wastahi Affiliates") from any and all claims or liability arising out the Camper's participation in Camp Wastahi. Furthermore, I individually as parent or legal guardian of the Camper and, to the extent permitted by law, on behalf of the Camper, expressly assume all risks of injury and/or death associated with, arising out of or related to Camper's participation in Camp Wastahi. I understand that Camp Wastahi, Inc. and Camp Wastahi Affiliates assume no responsibility for the Camper's negligence or willful misconduct, or that of others, and I fully accept responsibility for the Camper's negligence or willful misconduct. I individually, as parent or legal guardian of Camper and, to the extent permitted by law on behalf of Camper, agree not to sue and to defend, indemnify and hold harmless Camp Wastahi, Inc. and Camp Wastahi Affiliates for any loss, damage or injury of Camper arising out of or related to the Camper's participation in Camp Wastahi.

All persons with legal responsibility for Camper agree to this Informed Consent and Hold Harmless/Release Agreement by executing below:

Parent/guardian's name (please print)

Parent/guardian's name (please print)

Parent/guardian's signature

Parent/guardian's signature

Date

Date

PLEASE RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS