# Fill Out On Desktop or Print & Scan Written Copy. Send file to acra@amadorgov.org or drop off at ACRA Office (10877 Conductor Blvd, Ste 100, Sutter Creek)



## **2018 Youth Summer Program Registration**

### Please circle the program(s) you are signing up for: Summer Fun Days @ Detert Park

Sutter Creek Adventure Crew Children's Theatre Workshop

#### **Participant Information**

37 (6 . 11 .)			
Name (first and last):		Grade entering in fall:	
Home Phone:	Cell Phone:		
Email:			
	,•		
Mother or Guardian Info			
Name:	Home #:	Cell #: _	
Address:		_City:	Zip:
Employer:	Work #:	E-mail:	
Father or Guardian Infor	mation:		
Name:	Home #:	Cell #: _	
Address:			
Employer:			
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Please initial:
No Yes, My child has permission to use personal electronic devices to contact parents and guardians only. Camp staff discourages the use of cell phones during the program for entertainment purposes and will ask that these devices be stored with the students' personal effects. Please note staff is not responsible for lost, misplaced, stolen, or damaged electronics.
No Yes, My child has permission to walk with Camp staff off site and to ride Amador County Rapid
Transit in order to participate in activities.
No Yes, ACRA has my permission to add my E-mail address to our group E-mail to provide important updates about ACRA upcoming activities and schedules.
No Yes, I hereby give ACRA permission to photograph my child and to use these photographs or
reproductions for promotional activities including ACRA owned websites and Facebook, brochures, flyers, newspapers articles and advertisements, displays, and reports. I waive the right of inspection or approval of such photographs or reproductions. I also release ACRA from all claims or demands that I may have or can have on account of the use or publication of the photographs or reproductions. I authorize ACRA to use the photographs and reproductions free of charge.
Camp Policies:
Participation Fees:
Summer Fun Days @ Detert Park- \$90 per week or \$20 per day plus a \$10 registration fee. This is a full day camp.
Children's Theater Workshop-\$100 for four weeks. This is a half day camp.
Sutter Creek Adventure Crew- \$50 for two weeks. This is a half day camp. Payments must be made in advance.
The camps provide one healthy snack for each child for half day camps and two snacks for the full day camp. Participants must provide their own healthy lunch and water bottle. Energy drinks, hot or iced coffee, and soft drinks are not allowed.  The hours for Summer Fun Days @ Detert Park are 8:00-5:00. Children's Theater Workshop and Sutter Creek Adventure Crew hours are 9:00-12:00. There will be a half hour grace period allowed for camp participants to be dropped off before camp and picked up after camp. Any participant who has not been picked up half an hour after camp ends will be charged an additional \$15 to cover staff cost.
Release of Liability:
In consideration of myself and/or the minor child being permitted by the Amador County Recreation Agency ("ACRA") to participate in the above described activity, I, the undersigned, hereby waive, release, and discharge in advance any and all claims for damages for personal injury, death, or property damage which I and/or said minor child may sustain or which may occur as a result of my and/or the minor child's participation in said activity. This release is intended to discharge in advance ACRA, its officers, employees, volunteers, or agents from and against any and all liability arising out of or connected in any way with the participation of myself and/or the minor in said activity, even though that liability may arise out of active or passive negligence or carelessness on the part of ACRA, its officers, employees, volunteers, or agents.
I understand that the described activity may be of a hazardous nature and/or include physical and/or strenuous exercise or activity; that serious accidents occasionally occur during the above-described activity; and that participants in the described activity occasionally sustain mortal or personal injuries and/or property damages as a consequence thereof. Knowing the risks involved, nevertheless I agree to assume all risks of injury and to release and hold harmless ACRA, its officers, employees, volunteers, or agents who through active or passive negligence or carelessness might otherwise be liable to me and/or said minor child. It is further understood that this waiver, release and assumption of risk is to be binding on the heirs and assigns of said minor and/or myself, the undersigned.
I do hereby fully release ACRA and its officers, agents and employees from any and all claims from injuries, damage or loss which I, or any minor child may have or which may occur to my minor child on account of his/her being transported by automobile.
I further agree to indemnify and to hold ACRA, its officers, employees, volunteers, and agents free and harmless from any loss, liability, damage, cost or expense, including attorneys' fees, associated with or arising from my and/or said minor's participation in the described activity.
I certify that if I am signing on behalf of a minor child, I have custody or am the legal guardian of said minor by court order. I hereby give my consent that in the event said minor requires medical or surgical treatment while under the supervision of said ACRA's recreation personnel in connection with the described activity, such supervisor may authorize treatment. I also agree to pay all medical, hospital, or other expenses which said minor may incur as a result of such treatment.
I have fully read this Waiver of Liability, Medical Release, and Indemnification Agreement, and fully understand its contents. I understand and agree that if I am signing this agreement on behalf of my minor child that I will be giving up the same rights for said minor as I would be giving up if I signed this document on my own behalf. I am aware that this is a release of liability and a contract between me and ACRA and I sign it at my own free will.
Name (print):
Signature:
ACRA USE ONLY

 Check #:\_\_\_\_\_ Check Amount:\_\_\_\_\_ Cash Amount: \_\_\_\_\_ Credit Card Amount: \_\_\_\_\_

Date Payment Received:



#### **Amador County Recreation Agency**

www.goacra.org 209-223-6349 E-mail: acra@amadorgov.org

# ACRA Summer Youth Programs Participant Code of Conduct Contract 2018

Participant Name (first and last):	Grade Entering in Fall:
All participants have the right to participate is and safe environment, free from disruptions. Participants that does not infringe upon the rights of others. Participants will be held accountable for their grams. They must conform to ACRA policies and revolunteers and other participants.	or interfere with the policies of the program. r conduct while participating in ACRA Pro-
Prohibited student condu	ct includes the following:
sion *No participant can leave the ACRA sponsored acti a participant choose to leave, he/she will not be allow *No outside food or drink is allowed unless provide drinks, coffee and energy drinks are prohibited.	causes or threatens violence or bodily harm ament language bacco, alcohol, or prohibited drugs rdings or other personal electronics without permistivity without parental permission in writing. Should
tract.	and agree to comply by signing this con
Signature of Parent:	Date:
Signature of Participant:	Date: