



100 N. Benson Road
Middlebury CT 06488

The Edgewood Summer Day Camp offers campers ages 4 to 11 a fun and exciting summer. Daily programs include swimming, tennis, games, crafts, playtime and theme specific activities. Camp runs from June 25th to August 17th.

Our camp director is Kate Cunningham. She is in her 11th year teaching and currently an 8th grade teacher at Swift Middle School in Watertown. Kate became a teacher because she loves seeing children grow, develop and experience new things. During past summers she worked at Edgewood in the office and is therefore a familiar face around the Club. She lives in Watertown with her husband and two children who are 6 and 3 years old. Kate, as well as, all of her staff is CPR/AED and first aid certified.

Camp Specifics:

Ages 4 to 11

Monday through Friday rain or shine

5% sibling discount

10% multi-week discount (must sign-up and pay for at same time)

Drop-off time begins at 8:45 am

Pick-up time 4:00 pm

Before and after camp care is available

Children on the Edgewood Swim Team will be moved to camp after practice

Lunch can be brought or purchased for \$25 per week

14 day cancellation policy for full refund

Please refer to the Edgewoodbtc.com for further details and forms. Camp information is found on the Recreation tab on the top of the page.



Parent Authorization for Administration of
Non-Prescription Bug Repellent and Sunscreen Bug Repellent

_____ I give the employees of Edgewood Day Camp permission to assist my child with the application of Off bug repellent to my child in accordance with the instructions of the manufacturer's recommendations to prevent against mosquitoes and ticks.

_____ I do not wish for my child receive bug repellent

SUNSCREEN ADMINISTRATION

_____ I give the employees of Edgewood Day Camp permission to apply Coppertone Kids Continuous Spray or similar Sunscreen to my child.

_____ I do not wish for my child to receive sunscreen.

Child's Name

Sessions Attending

Parent Signature/Date



Code of Conduct Guidelines

The Edgewood Summer Day Camp staff is looking forward to providing every child with a fun, memorable, and safe summer camp experience. Each camper has a responsibility to act in a way that assures a positive experience for all. All campers are required to follow these guidelines.

Behavior Guidelines

Campers shall be responsible for their words and actions.
Campers shall be respectful of others.
Campers shall follow directions from staff members.
Campers shall leave all electronic devices at home. (A parent/guardian must seek permission from the camp director in order for the camper to be able to carry a cell phone for emergencies).

Prohibited Behaviors

Endangering the health and safety of themselves, other campers, and/or staff or volunteers.
Stealing, damaging, or failing to care for facility or personal property.
Continual disruption of the program.
Refusal to follow the behavior guidelines.
Inappropriate physical contact.
Using profanity or inappropriate language or displaying clothing or other personal items with offensive content.
Bullying or acts of aggression or violence.
Possession or use of illegal substances, tobacco, or alcohol.

Possession of weapons - any object that may cause harm to another, or place another person in fear of his/her safety, may be considered a weapon.

Failure to comply with the Code of Conduct may result in the removal from the program and/or additional fees. There will be no refunds given for campers who are removed from the program due to violations of the Code of Conduct.

**YOUTH CAMP HEALTH EXAM/RECORD
FOR CAMPERS AND STAFF**
Physical Exams Are Valid For 3 Years
From Date of Last Examination

- Camper
 Staff

Please Return Completed Form to the Camp

Name _____ Date of Birth _____ Phone _____
Guardian _____ Address _____
Emergency Contact _____ Telephone _____
Date of Arrival at Camp: _____ Departure Date: _____

TO BE COMPLETED BY THE SPECIFIED MEDICAL PRACTITIONER:

Date of Exam ____/____/____

_____ May participate in all camp activities
_____ May participate except for: _____

Medical information pertinent to routine care and emergencies: _____

Is this individual taking prescription or over the counter medication(s)? YES NO If yes, indicate names of medication(s): _____

Does the individual have allergies? YES NO Explain: _____

Is the individual on a special diet? YES NO Explain: _____

Does the individual have special needs? YES NO Explain: _____

This camper/staff is up-to-date on all the following routine childhood immunizations currently recommended by the American Academy of Pediatrics and National Advisory Committee on Immunization Practices:

	Yes	No		Yes	No
Measles			Hepatitis B		
Mumps			Diphtheria		
Rubella			Pertussis		
Chickenpox			Pneumococcal conjugate		
Tetanus			Polio		

Comments: _____

Print name of medical care provider: _____

Medical care provider's address: _____

Medical care provider's: City/Town _____ ST _____ Zip Code _____

Signature of Physician, PA, APRN or RN

DATE Signed



100 N. Benson Road
Middlebury CT 06762
203-528-0234
www.edgewoodbtc.com

MINOR RELEASE

I, THE PARENT AND/OR LEGAL GUARDIAN OF _____, UNDERSTAND THE NATURE OF TENNIS, SWIMMING EXERCISE ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EDGEWOOD BATH & TENNIS CLUB FROM ALL LIABILITY CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATION AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, IF, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

Printed Name of Parent/Guardian: _____

Address: _____
(Street)

(City)

(State) (Zip)

Phone: _____

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18):

Date: _____



EDGEWOOD SUMMER DAY CAMP CHECK LISTS

Registration:

Registration Form and Payment Submitted

Physical Form Submitted

Minor Release Form Submitted

Code of Conduct Reviewed with Camper

Sunscreen/Bug Application Authorization Form Submitted (if needed)

Daily Camp Check List:(child should bring everyday)

Put child's name on all items

Swimsuit and flip flops

Towel

Floaties (if necessary)

Bag or backpack

Sneakers and socks

Sunscreen and bug spray

Hat – sunglasses are optional

Lunch – bring your own or purchase for the week

Water Bottle

Snack (please no nut products)



Day Camp Registration Form - 2018

Participant Information

Full name	Nickname
Birthday (MM/DD/YYYY)	

Parent Information

Parent's Name(s)	
Address	
Parent E-mail Address	Cell

	Session	Member Cost \$195 per session (plus tax)	Non Member Cost \$260 per session (plus tax)	Total
5% Discount for each sibling 10% Discount for multiple weeks Must enroll and pay at same time				

Summer Camp				
Session 1 - Under the Sea	June 25 - 29			
Session 2 - Mad Scientists	July 2 - 6 (no 4th)	\$146.25	\$195	
Session 3 - Kings and Queens	July 9 - 13			
Session 4 - Splish Splash	July 16 - 20			
Session 5 - Animal Adventures	July 23 - 27			
Session 6 - Sports Spectacular	July 30 - Aug. 3			
Session 7 - Carnival Week	Aug. 6 - 10			
Session 8 - Amazing Race	Aug. 13 - 17			
<i>(themes subject to change)</i>				
EXTRAS	Number of Weeks			
Lunch \$25 per week				
Before/After Camp Care 8am-5pm \$50 per week				

Payment

<input type="checkbox"/> Charge my account for activity cost	<input type="checkbox"/> Check enclosed for total cost (Check # _____)	<input type="checkbox"/> Charge Credit Card
Name on Card: _____	Type of Card: _____	
Card Number: _____	Expiration Date: _____	CVV Code: _____

Authorization

Edgewood Bath and Tennis, the Town of Middlebury and any other associated groups, their officers, members or associates, appointed or volunteer, do not accept any liability for loss of life or property, personal injury or damage caused or rising out of any activity engaged in during the Sports Camps/Activities for any reason whatsoever. By Participating in this Edgewood Bath and Tennis program, I as parent or legal guardian of the above named participant am knowledgeable of the inherent risk in the sport of the participant. I grant my child permission to engage in these activities with full knowledge that there is an element of danger involved. I also agree to assume the risks for myself and my child and agree to hold Edgewood Bath and Tennis and its officers, employees and volunteers harmless and free of any liability for damage or injury my child may incur arising from these activities.

I hereby give Traverse Edgewood Bath and Tennis the irrevocable right to use my picture or photography in all forms and media and in all manners, including composite or manipulated representations, for advertising, promotion, or any other lawful purposes, and I waive any right to inspect or approve the finished version(s) including written copy that may be created and appear in connection therewith.

Signature: _____	Date: _____
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