



# Two Rivers Day Camp 2018 Registration July 30 – August 3, 2018



\*One form per family

Last Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Primary/Parent's Email: \_\_\_\_\_

**\* We will be contacting you multiple times through this email. Please check it often!**

Youth Staff Email: \_\_\_\_\_ Youth Staff Cell Phone: \_\_\_\_\_

Youth Staff Email: \_\_\_\_\_ Youth Staff Cell Phone: \_\_\_\_\_

**\*\* All mailings, including confirmation and packing list, will be sent via email unless checked below \*\***

\_\_\_\_\_ I don't have email access, please mail info to me

Emergency (Non-parent) Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Please fill in chart for EVERY person attending Day Camp (including adults & siblings)			Grade in Fall 2018 (for sibling care, list age)	I am a:		GSUSA Registered (check for yes)	Over-night (5 <sup>th</sup> grade or older) (check for yes)	T-Shirt Size <sup>**</sup> (select "none" for no shirt)
Service Unit:				Camper (going into 1-6 grade)	Youth Staff (going into 7-12 grade)			
First Name	Last Name	Troop #		Adult (18+ as of 10/1/17) <sup>***</sup>	Sibling (must be potty trained)			

**\*\*T-shirts come in Youth Small, Youth Medium, Youth Large, Adult Small, Adult Medium, Adult Large, Adult X-Large, Adult XX-Large (\$2.00 more for Adult XX-Large), Adult 3X-Large (\$3.00 more for Adult 3X-Large)**

**\*\*\* ALL adults volunteering at Day Camp MUST be registered and have completed a free online background check (link on website). There is no charge for adult volunteers to attend camp.**

Campers will be placed in units based on age, if you need special considerations, please list on back of this form.

<b>Adults: Days Available:</b> ___ Mon ___ Tues ___ Wed ___ Thurs ___ Fri ___ Overnight
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## Release & Busing Authorization

**Section 1: Transportation to/from camp:** Please complete for each day of the week. If taking a bus, also fill out section 2, otherwise skip to section 3. \*\*\* Every child picked up at camp must be signed out daily. Please bring a picture ID.

Monday	Tuesday	Wednesday	Thursday	Friday

If someone in the family is arriving/leaving differently, please make note in the lines below: (ex: camper taking bus, mom driving separately on Tuesday, no sibling coming Wednesday)

**Section 2: Drop off/Pick up from bus stop arrangements:** Complete for every day riding the bus

Monday	Tuesday	Wednesday	Thursday	Friday

**Section 3: Release Authorization:** This release is valid for all children who are attending Day Camp as Campers, Youth Staff or siblings

My Girl Scout &/or other children may be released to emergency contact I have listed on page 1 or any of the following besides custodial parent(s)/guardians(s) listed on this registration form:

Name	Home Phone	Cell Phone	Relation

**Do NOT release my child(ren) to the following:**

Name	Relation

**Campers – Please buddy my camper(s) with the following girl in the same grade (1 buddy per camper):**

\*Both buddies must list each other & be in same grade to guarantee placement in same unit.

Camper Name	Camper Troop #	Buddy Name	Buddy Troop #

### Adults, Caddies and Assistants:

**What levels do you prefer to work with? (Daisy, Brownie, Junior)** (Although we will consider your preferences, we cannot guarantee you will be with your preferred unit)

Adult/Youth Staff Name	Camp Nickname – ex: “Boo-Boo”	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice	Please specify for “Other”

Adults: Please check below all you have completed & current. <b>All adults MUST complete a GSUSA background check.</b>					Youth Staff: Please fill in dates you have completed the following:					
Adult's Name	GSUSA back-ground check	Girls Cook Out	First Aid & Exp. date	CPR & Exp. date	Youth Staff's Name	Program Aid	Junior Caddie	Caddie	Senior Caddie	Cadoodles

<b>Camp &amp; Registration Fees</b> (must be included with registration to be processed)			
	Quantity	Price Each	Total
<b>Camper Fee</b> (Includes T-Shirt) Youth Staff don't need to pay this		\$105.00	\$
<b>Youth Staff Fee</b> (Includes T-shirt) This is only for Youth Staff		\$25.00	\$
<b>Adult Volunteer</b> (no T-shirt included)		\$0.00	Free
<b>Overnight Fee</b> (5 <sup>th</sup> grade & older only) Cost applies for Campers & Youth Staff		\$25.00	\$
<b>Adult Overnight</b> (No fee)		\$0.00	Free
<b>Adult/Sibling T-Shirt Fee</b> (For adult volunteers or siblings who wish a T-shirt)		\$11.00 (\$13 for 2XL, \$14 for 3XL)	\$
<b>Late Fee</b> (for any registrations received after June 15, 2018)		\$25.00	\$
<b>Subtotal</b>			\$
<b>Juliette Credits/Fall FUNds/Cookie Credits/Cookie Bonus Used</b>			- \$
<b>Discount for 2017 Registration</b>	<b>Discount Code(s):</b>	Participants who registered by the deadline for 2017 received an email with their discount code & amount	-\$
<b>Discount for Adult Volunteer</b>	<b>Discount Code(s):</b>	All adults that pre-register by the deadline will receive an email with their discount code & amount.	-\$
<b>Campership Applied For</b> (Online grant application must be filled out & submitted. You MUST include non-refundable \$25.00 application fee as stated in online grant info – include in the TOTAL DUE listed below)			- \$
<b>TOTAL DUE (make check out to TWO RIVERS DAY CAMP)</b>			\$

**Parent or Guardian, please complete the following:**

I give my full permission for my Camper(s)/Youth Staff(s)/sibling(s) to attend Day Camp and to participate in the activities. I have read and understand the Day Camp information and agree to cooperate with all of the regulations. I also give my permission for my child(ren) to be photographed for Girl Scout purposes. I understand that I am responsible for getting my child(ren) to and from the bus stop unless otherwise arranged in advance and in writing with the Day Camp staff. I will not allow her/them to attend if she/they becomes exposed to any contagious disease (this includes head lice), or if for any reason, I do not consider her/them to be in good physical condition. I give my permission for my child(ren) to receive necessary medical attention at a hospital or from the Camp Health Supervisor or designee.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Adult volunteers, please complete the following:**

I have read and understand the Day Camp information and agree to cooperate with all the regulations. I give permission to be photographed for Girl Scout purposes. I give permission to receive necessary medical attention at a hospital or from the Camp Health Supervisor or designee. **Every adult listed on the form must sign.**

**Mail Registrations, Health Forms,  
Medication Forms & payment to:  
Two Rivers Day Camp  
341 – 218<sup>th</sup> Ave NE  
Cedar, MN 55011**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_