

CAMP RICHARDS/INCLUSIVE CAMP RICHARDS REGISTRATION FORM - PAGE 1

Grades 1 thru 8 as of 2018/2019 school year

Monday thru Friday - Mornings only

9:00am to 12:00pm

Course code for Camp Richards: 140101

Course code for Inclusive Camp Richards: 140107

Course code for Field Trips: 140104

Please check off all that apply:

Please drop off your camper (s) at the Richards School Great Room.	Camp Richards	Inclusive Camp Richards	Field Trip Optional Space is limited. Inclusive Campers must contact Carin Keland at 963-3888.	Total Weekly Fee
Section A1 Friends of Summer June 18 - June 22	<input type="checkbox"/> R \$40	<input type="checkbox"/> R \$40	<input type="checkbox"/> \$15.00 North Shore Cinemas Thursday, June 21	
	<input type="checkbox"/> NR \$50	<input type="checkbox"/> NR \$50		
Section A2 Adventure Land June 25 - June 29	<input type="checkbox"/> R \$40	<input type="checkbox"/> R \$40	<input type="checkbox"/> \$18.00 Brown Deer Lanes Thursday, June 28	
	<input type="checkbox"/> NR \$50	<input type="checkbox"/> NR \$50		
Section A3 Party in the USA July 2 - July 6 Skip July 4	<input type="checkbox"/> R \$32	<input type="checkbox"/> R \$32	<input type="checkbox"/> \$18.00 Little Americka Thursday, July 5	
	<input type="checkbox"/> NR \$42	<input type="checkbox"/> NR \$42		
Section A4 Goin' Green July 9 - July 13	<input type="checkbox"/> R \$40	<input type="checkbox"/> R \$40	<input type="checkbox"/> \$16.00 Rockin' Jumping Thursday, July 12	
	<input type="checkbox"/> NR \$50	<input type="checkbox"/> NR \$50		
Section A5 Fun and Fitness July 16 - July 20	<input type="checkbox"/> R \$40	<input type="checkbox"/> R \$40	<input type="checkbox"/> \$17.00 Rec Plex Thursday, July 19	
	<input type="checkbox"/> NR \$50	<input type="checkbox"/> NR \$50		
Section A6 Animal Planet July 23 - July 27	<input type="checkbox"/> R \$40	<input type="checkbox"/> R \$40	<input type="checkbox"/> \$12.00 Milwaukee County Zoo Thursday, July 26	
	<input type="checkbox"/> NR \$50	<input type="checkbox"/> NR \$50		
Section A7 Beach Days July 30 - Aug 3	<input type="checkbox"/> R \$40	<input type="checkbox"/> R \$40	<input type="checkbox"/> \$14.00 Regner Park Thursday, Aug 2	
	<input type="checkbox"/> NR \$50	<input type="checkbox"/> NR \$50		
Section A8 Outdoor Discovery Aug 6 - Aug 10	<input type="checkbox"/> R \$40	<input type="checkbox"/> R \$40	<input type="checkbox"/> \$12.00 State Fair Thursday, Aug 9	
	<input type="checkbox"/> NR \$50	<input type="checkbox"/> NR \$50		

All camp registrations
MUST be received by noon
on the Friday BEFORE the
start date.

Parents should check their
children in every day in the
Richards Elementary
School
Great Room.

Total Amount Due

IMPORTANT PARENT INFORMATION REGARDING INCLUSIVE CAMP RICHARDS

This program is created for students with special needs and provides an Inclusive Facilitator to assist campers in enjoying all aspects of this traditional summer camp. Due to the nature of this camp, one-on-one support cannot be provided. To best meet the needs of each camper, an Inclusive Intake Form needs to be completed and returned along with this camp registration. The Intake Form can be found online at www.wfbschools or at the Lydell Community Center. Participation in field trips for Inclusive campers will be determined on a case-by-case basis. Please contact Carin Keland at 963-3888.

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Camper Information

Child's Last Name _____ Child's First Name _____

Grade as of 2018/2019 school year _____ Child's Birthdate _____ M _____ F _____

Address _____ City _____ Zip code _____

Does your child have any health concerns, allergies or special needs? If so, please list _____

Parent/Guardian Information - Unless otherwise stated, mother's cell phone number will be the first emergency contact number followed by alternative emergency contact.

Mother's Last Name _____ Mother's First Name _____

Mother's Cell Phone Number _____ Email Address _____

Father's Last Name _____ Father's First Name _____

Father's Cell Phone Number _____ Email Address _____

Address _____ City _____ Zip code _____

(If different than camper's address)

In case of emergency, mother's cell phone number will be called first. Please list an alternative emergency contact.

Alternative Emergency Contact _____ Cell Phone _____

Payment Information

Make sure that the fee totals are correct. Complete the payment information below. Return both completed registration forms, along with payment, to:

Whitefish Bay Recreation Department
5205 North Lydell Avenue
Whitefish Bay, Wisconsin 53217

Fee enclosed \$ _____ Checks payable to the Whitefish Bay Recreation Department.

If paying by credit card, please fill out the credit card information below, making sure to include the expiration date. We accept Visa, Mastercard and Discover.

Credit Card Number _____ Expiration Date _____

Credit Card Holder Signature _____

I hereby understand that my child has registered to participate in a program sponsored by the School District of Whitefish Bay Recreation Department. I acknowledge and will adhere to department policies described in the Recreation Department seasonal brochure. I understand that participating in this activity, like all activities, has some inherent risk. Furthermore, I certify that my child is in good physical condition and assume full responsibility for any injuries incurred. If not, I have noted limitations. No accident insurance is provided. Participants must obtain insurance prior to and for the duration of the activity.

Parent/Guardian Signature _____ Date _____