



# DANBURY PARKS & REC 2015

## SAFE SUMMER XXII



SUMMER PROGRAM FOR GRADES 6<sup>TH</sup> – 12<sup>TH</sup> (GRADE IN FALL 2015)

June 29<sup>th</sup> – July 24<sup>th</sup>, 2015 8:30 AM – 2:30 PM

### REGISTRATION:

**DATE:** SATURDAY, MAY 30, 2015

**TIME:** 9:00 AM - 12 NOON

**LOCATION:** HATTERS PARK BANQUET HALL, 7 EAST HAYESTOWN RD. DANBURY

**COST:** \$185.00 FOR 4 WEEK PROGRAM or \$100.00 PER WEEK

*Note: Preference will be given to those that sign up for all four weeks*

**\*\*DANBURY RESIDENTS ONLY – MUST SHOW PROOF OF RESIDENCY\*\***

**3<sup>rd</sup> QUARTER REPORT CARD OR PROGRESS REPORT MUST BE PRESENTED AT REGISTRATION**

**\*\*REGISTRATION WILL CONTINUE AT PARK AND REC OFFICE, M-F, 9 AM - 3:00 PM.\*\***

We will not accept mail-in registrations

**\*\*DEADLINE FOR REGISTRATION IS FRIDAY, JUNE 19, 2015 OR UNTIL FULL\*\***

**PROGRAM SITE:** DANBURY HIGH SCHOOL SITE WILL BE CLOSED FRIDAY, JULY 3<sup>rd</sup>  
SPORTS, ARTS & CRAFTS, PERSONAL DEVELOPMENT & WEEKLY TRIPS TO CANDLEWOOD LAKE  
BREAKFAST AND LUNCH PROVIDED

**\*ADDTN'L CHARGES FOR FIELD TRIPS: LAKE COMPOUNCE & SPLASHDOWN PARK TRIP DUE AT REGISTRATION**

\*These will be extended days. **\*LAKE COMPOUNCE, July, 8<sup>th</sup>, \$36. (5:00 PM)\* \*SPLASHDOWN PARK, July 14<sup>th</sup>, \$32. (3:00 PM)**  
ALL OTHER FIELD TRIP FEES COLLECTED 2 DAYS PRIOR TO TRIP

Trips are to be paid separately by check or cash. If you elect not to participate in out of town trips, please be advised, the site will be closed for the day.

**\*\*PLEASE CONTACT THE PARKS & RECREATION OFFICE @ 203-797-4632 WITH ANY QUESTIONS\*\***

**\*REGISTRATION AND TRIP FEES ARE NON-REFUNDABLE AS OF JUNE 26, 2015\* NO EXCEPTIONS**

**\*\*\*VISIT OUR WEBSITE, [www.danbury-ct.gov/parkrec](http://www.danbury-ct.gov/parkrec), TO DOWNLOAD REGISTRATION FORM\*\*\***

**COME TO PARKS & RECREATION FREE MOVIE NIGHTS AT CANDLEWOOD LAKE  
THURSDAY'S, JULY 9, 16, 23, 30, RAIN DATE JULY 31<sup>st</sup> MOVIES BEGIN AT DUSK**

**FOR OFFICE USE ONLY:**  
**REGISTRATION TIME:**

**PAID WITH CHECK: AMOUNT AND NUMBER**  
**PAID WITH CASH: AMOUNT**

**2015 SAFE SUMMER XXII**  
**Registration Form**

Child's Name \_\_\_\_\_  
Last First Middle

Home Address \_\_\_\_\_  
Street Zip Code

Parent/Guardian Name \_\_\_\_\_ Phone (H) \_\_\_\_\_  
Phone (W) \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone (H) \_\_\_\_\_  
Phone (W) \_\_\_\_\_

Email Address \_\_\_\_\_

Person having custody of child \_\_\_\_\_ Custody restraints Y \_\_\_\_\_ N \_\_\_\_\_

Person with permission to pick up child other than parents:

1) \_\_\_\_\_ Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_

2) \_\_\_\_\_ Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_

Who may NOT pick up child:

1) \_\_\_\_\_ Relationship to child \_\_\_\_\_

2) \_\_\_\_\_ Relationship to child \_\_\_\_\_

\* \* \* \* \*

Please check off the sessions that your child will be attending:

Week 1: June 29 - July 2	_____	(Closed Friday July 3 <sup>rd</sup> )	_____	<b>** PLEASE NOTE:</b>
Week 2: July 6 -10	_____	Lake Compounce Field Trip (5 PM)	_____	<b>EXTENDED HOURS</b>
Week 3: July 34 - 17	_____	Splashdown Park Field Trip (3 PM)	_____	<b>FOR THESE TWO</b>
Week 4: July 20 - 24	_____			<b>FIELD TRIPS**</b>

**\*\*Field Trips must be prepaid at Registration. 7/8 Lake Compounce, \$36.00 7/14 Splashdown - \$32.00**  
**Trips are to be paid separately by cash or check.**  
**\*\* If you elect not to participate in out of town field trips, please be advised the site will be closed for the day**

**FOR OFFICE USE ONLY:**

Child's Birth date \_\_\_\_\_ Grade entering next year \_\_\_\_\_ Age as of June 1, 2015 \_\_\_\_\_

\* School attending Fall 2015 \_\_\_\_\_ Grade this year \_\_\_\_\_

T-Shirt Size \_\_\_\_\_

## EMERGENCY / MEDICAL INFORMATION

Parent/Guardian Name: \_\_\_\_\_ Phone (H): \_\_\_\_\_  
Phone (C): \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_ Phone (H): \_\_\_\_\_  
Phone (C): \_\_\_\_\_

Emergency contact person(s) who are authorized to give consent in the event a parent/guardian cannot be reached:

- 1) \_\_\_\_\_ Relationship to Child: \_\_\_\_\_ Phone #: \_\_\_\_\_
- 2) \_\_\_\_\_ Relationship to Child \_\_\_\_\_ Phone #: \_\_\_\_\_

Allergies, Nosebleeds, Bites, etc.:     yes     no

If yes, please explain: \_\_\_\_\_

Does your child have any special needs or receive care for any special needs that we need to be made aware of?     yes     no

I certify that, to the best of my knowledge, my child is in good health and able to participate in the 2015 Safe Summer XXII Program. In the event of an emergency, I understand that every effort will be made to contact the parent/guardian. In the event he/she cannot be reached, I hereby give permission to the physician selected by the adult in charge to hospitalize, secure proper treatment for and order injection, anesthesia, or surgery as deemed necessary for the child named above.

Insurance Coverage \_\_\_\_\_ Policy # \_\_\_\_\_

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### PARENT/LEGAL GUARDIAN AGREEMENT

I give full permission for \_\_\_\_\_ to attend the 2015 Safe Summer XXII Program and participate in all activities including any off site trips. I have read the 2015 Safe Summer XXII flyer and agree to abide by its rules. I authorize the use of photographs of my child for the use of promoting the 2015 Safe Summer XXII Program. I understand that 2015 Safe Summer XXII Program is not responsible for the personal property. 2015 Safe Summer XXII Program reserves the right to cancel or modify any session.

**NO REFUNDS WILL BE GIVEN AFTER JUNE 26<sup>th</sup>**

I, the undersigned, understand and agree to adhere to the policy that in the event that disciplinary action must be taken it will at the discretion of the Site Director and the Office of Danbury Parks and Recreation. Actions will be in congruence with the Danbury Public Schools Disciplinary Procedures, a copy of which may be obtained upon request. In the event that your child is suspended or expelled from the program:

**THERE WILL BE NO REFUNDS, INCLUDING ANY PREPAID TRIP FEES.**

I have read all the information including the Emergency Medical Policy as well as the Parent/Guardian Agreement and agree to adhere to the above stated procedures.

Name of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_