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Wolfeboro Parks and Recreation

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## **2017 Summer Day Camp Emergency Form**

Participant's Name: \_\_\_\_\_ Age: \_\_\_\_\_

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

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

Parent/Guardian Email (This will be primary form of communication): \_\_\_\_\_

\*\*\*\*Emergency Contact: This is the person we will contact if we cannot reach parents/guardians\*\*\*\*

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

People allowed to pick up my child (not including parents/emergency contact) Phone Number: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\*\*Anyone picking up a camper will be asked to show an ID\*\*\*\*

( ) I give my child permission to sign in/out and walk/ride their bike to/from Summer Day Camp.

\_\_\_\_\_

Parent/Guardian Signature

Date

Allergies, Disabilities, or illness that would affect participation (PLEASE INCLUDE FOOD ALLERGIES): Yes ( ) No ( )

Please explain:

\_\_\_\_\_

Is your child currently on any medication: Yes ( ) No ( )

If yes, what and when does it need to be taken:

\_\_\_\_\_

The Wolfeboro Parks & Recreation Department has permission to use photos in which my child appears: Yes ( ) No ( )

Your child (ren) will be in the sun most of the day while they are at camp and on field trips. By signing below you are recognizing that the staff of Wolfeboro Parks & Recreation will not apply sun block for your child. Each child should be taught how to apply sun block correctly and will bring sun block to camp with them to apply throughout the day. We will however, remind/monitor the campers roughly every two hours to re-apply the sun block.

\_\_\_\_\_

Parent/Guardian signature

\_\_\_\_\_

Date