

2022 Enrollment Agreement 1436 Long Pond Road, Brewster, MA 02631 • 508-896-4934 • 508-632-6555 fax MUST BE COMPLETED BY PARENT/LEGAL GUARDIAN . SEPARATE APPLICATION REQUIRED FOR EACH CHILD

AFTER FAMILIES HAVE SUBMITTED AN APPLICATION AND RECEIVED AN EMAIL REGARDING ACCEPTANCE, FAMILIES ARE REQUIRED TO SUBMIT THIS AGREEMENT. REGISTRATION IS COMPLETE AFTER THE CAMP OFFICE RECEIVES THIS ENROLLMENT AGREEMENT AND FINANCIAL OBLIGATION.

Child's full name:						
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GENERAL AND HEALTH INFORMATION						
Are there any health/pertinent information you need us to know about your child?						
Does your child have any allergies?						
Does your child have any fears you need us to know about?						
Is there any special custody or guardian arrangement? If YES, please explain and/or attach legal						
documents.						
☐ Yes ☐ No						
REGULAR PICKUP AUTHORIZATION (OTHER THAN PARENTS/LEGAL GUARDIANS)						
Full name:	Relationship:			ct phone:		
	·		,			
Full name:	Relationship:	Contact phone:				
IN CASE OF EMERGENCY (IF PARENTS/LEGAL GUARDIANS CANNOT BE REACHED)						
Full name:	Relationship:	Cell phone: Other pho		Other phone:		
Full name:	Relationship:	Cell phone: Other phone:				
PERMISSIONS FOR HEALTH/MEDICAL PURPOSES						
I give permission to the Laurel Day Camp to obtain or administer emergency medical treatment to my						
child. This is with the understanding that I will be notified as soon as possible: \square Yes \square No						
I give permission (in case of emergency), for my child to be taken to a local medical center or						
hospital: U Yes U No						
I give permission, for my child to						
I give permission for the following ointments and first aid products to be applied to my child:						
Sunscreen (provided by parents) □ Yes □ No	Insect repellent (provided by parents) Bacitracin Vec D No.					
Calamine/Cortisone Lotion	Yes □ No □ Yes □ No Benadryl (IN EMERGENCY ONLY) □ Yes			1 765 110		
☐ Yes ☐ No	□ No					
~ PLEASE COMPLETE BACK-SIDE OF AGREEMENT BEFORE SUBMITTING ~						
Denot 12						

PERMISSIONS FOR PHOTOGRAPH	HS/VIDEOS & TRANSPORTATION
I give permission for photos/videos to be take may be used for advertising/camp related publi posted on our Camp/School website and/or our Parent/Guardian Signature	
I give permission for my child <u>(Upper Campers</u> by a hired school bus or Laurel Day Camp van. Parent/Guardian Signature	/CIT ONLY) to be taken on off-site field trips
TERMS AND CONDITIONS OF APPLICA	ATION AND ENROLLMENT AGREEMENT
This Agreement is entered into between the un Camp. I have received copies or have access to documents required to be distributed to parent documents contain policies, procedures, and rule	dersigned parent(s)/guardians and Laurel Day the Tuition Schedule, and any state licensing s/guardians. I understand that these
I understand that my child's application, enrolln must be completed and immunization records pr that these records must be kept current at all	rovided before my child may attend camp, and
I agree to notify Laurel Day Camp in the event Application and/or the Enrollment Agreement c any medical or immunization updates and will inf allergies, or other special needs that may requi	hanges. I will provide Laurel Day Camo with orm the camp of any conditions, illnesses,
	undable, and there are no refunds or itions to a camper's schedule after July 1 must July 1. A daily rate will apply to all added days re are no refunds or credits for cancellations, s. There are no refunds or credits for
I accept and agree to the conditions of this Ag policies may be revised as necessary without pr	, , , , , , , , , , , , , , , , , , ,
Parent/Guardian's Signature	Print Parent/Guardian Name
Print Camper Name	Date
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