



Camp Registration Form

Please print and use this form for all camps listed below. Please use a separate camp registration form for each participant. If you would like to register for a program that is not a camp, please use the registration form found on page 2 of the Spring/Summer Activity Guide. All camps receive a free t-shirt.

Basketball Camp (Girls) Camp Tot Lot Extreme Sports Camp Horse Camp KCC Extra
Kids Count Camp (KCC) KCC 1/2 Day Camp LaCrosse Camp Pom Camp Soccer Camp
Swim Camp Tennis Camp Volleyball Camp

Camper Name: _____ Nickname: _____ Age: _____

Address: _____ City & State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Parents/Guardians Names: _____

Emergency Contact Name and Phone: _____

E-Mail (optional): _____ (We will distribute list for cancellation and make-up information)

T-shirt size (if applicable): Child: S M L XL Adult: S M L (Child must be enrolled at least one week prior to start of camp to receive a t-shirt.)

Grade entering this fall: _____ Name of School: _____

Is the child in custody of both parents? Yes No Please list others authorized to pick up your child:

If not, can the non-custodial parent pick up? Yes No _____

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KCC 1/2 Day only: Bus Service? Yes No If Yes, Bus Stop Location: Adams, Kennedy, Lincoln or Washington

Medical conditions: _____ Doctor: _____ Phone: _____

Swimming ability (where applicable) _____

Camp Name	Dates or Session Number	Time	Site	Camp Cost per session
1.				
2.				
3.				
4.				

Check here if applying for a scholarship. If applying, camp fees are not due until your application has been processed. Scholarship applications are available by calling 755-3030. TOTAL DUE \$ _____
Make checks payable to Leisure Services unless otherwise noted.

Check No.: _____   MC/ Visa No.: _____ Expiration Date: _____

Waiver for Participation

In consideration of the CITY'S acceptance of my/our use of its premises and equipment and upon payment of fee, if any, for participation in this event/activity, I hereby, for myself, and any minor for whom I am signing for, and for my/our heirs, executors, assigns and administrators waive and release any and all rights, claims and causes of action for damages, injuries, and payments whatsoever that I may have against the CITY OF JANESVILLE, a Wisconsin municipal corporation located in the County of Rock, and each and every of the CITY'S elected and appointed officials, employees, representatives, agents, heirs and assigns, jointly and severally, from and suffered by me and/or the minor (if any) named herein at any activity, event, or place sponsored by the CITY OF JANESVILLE or other organizations or persons utilizing CITY OF JANESVILLE properties or equipment. This waiver and release applies to any and all activities, including arrival and departure from CITY, public or private property. I/we agree to hold harmless the CITY OF JANESVILLE, and each and every of its elected officials, employees, representatives, agents, and their executors, administrators, heirs, and assigns, for any and all injuries incurred upon CITY OF JANESVILLE property, or events related to such participation once I have entered upon the CITY'S property, or the activity or event. I am assuming any and all responsibility for any and all injuries, damages, risks and claims.

By signing below I acknowledge reading the above waiver statement.

(Circle one) Parent/Guardian/Adult Participant: Signature: _____ Date: _____