

# Hockessin Athletic Club

## Summer Camp Registration Form

Child's Name: \_\_\_\_\_

Age when attending: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

T-Shirt Size:     Youth S                       Youth M                       Youth L  
                          Adult S                       Adult M                       Adult L

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name & Phone: \_\_\_\_\_

*\*We will contact you via automated phone for HAC Camp Messages\**

Contact Email: \_\_\_\_\_

*\*We will contact you via email weekly with our HAC Camp Weekly Newsletter\**

### Payment Information

Total Due: \$ \_\_\_\_\_ Deposit: \$ \_\_\_\_\_ Balance:  
\$ \_\_\_\_\_

### Initial Payment Method

Cash             Check # \_\_\_\_\_             Card on File  
 MC             Visa             Discover             Amex

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_

**Balance and Final Payment due by May 11th, 2012.  
No Refunds After May 11th.**

Charge the payment above for my final payment on May 11, 2012  
 Use the Method below to charge my Final Payment.

### Final Payment Method

Cash             Check # \_\_\_\_\_             Card on File  
 MC  Visa             Discover  Amex

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_

I have read and understand the Hockessin Athletic Club's Camp policies and procedures on the back of this form. I agree to have the remaining balance charged to the form of payment above by May 11, 2012.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## HAC PAC II - 3 to 5 Years Old

Camp Weeks	6/11	6/18	6/25	7/2	7/9	7/16	7/23	7/30	8/6	8/13	8/20
4 & 5 Full Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Full Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Full Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 & 5 Half Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Half Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Half Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extended Morning Day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extended Afternoon Day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monday Meal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pizza Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Please indicate which days your child will be attending.</b>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>
	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>
	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>
	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>
	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>

## HAC PAC III - 6-12 Years Old

*For HAC PAC III Selections, you must mark either sports or exploration per week. See pages 6-9 for theme descriptions.*

Camp Weeks	6/11	6/18	6/25	7/2	7/9	7/16	7/23	7/30	8/6	8/13	8/20
Sports Camp	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exploration Camp	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 & 5 Full Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Full Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Full Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 & 5 Half Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Half Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Half Days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monday Meal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pizza Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Please indicate which days your child will be attending.</b>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>
	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>	T <input type="checkbox"/>
	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>	W <input type="checkbox"/>
	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>	R <input type="checkbox"/>
	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>	F <input type="checkbox"/>

## HAC Specialty Camps

Camp Weeks	Attending	Before Care	After Care	Before & After Care
May 31: All Star Sports Camp (Ages 3-5)	<input type="checkbox"/>			
June 6: All Star Sports Camp (Ages 3-5)	<input type="checkbox"/>			
June 11: Gymnastics (Ages 6-13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
June 11: Martial Arts (Ages 5-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
June 18: Dance Princess (Ages 3-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
June 18: Dance Diva (Ages 6-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
June 25: Dance Carnival (Ages 6-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
June 25: Cheer Jazz Dance (Ages 3-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
June 25: Gymnastics (Ages 4-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 9: Dance Carnival (Ages 3-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 9: Broadway Camp (Ages 9-13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 16: HipHop Dance (Ages 9-13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 16: Broadway Dance (Ages 6-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 23: Cheer Camp (Ages 6-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 23: Pirate/Princess Camp (Ages 3-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 30: Acro Dance Camp (Ages 8-13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 30: Gymnastics (Ages 4-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July 30: Martial Arts (Ages 8-12)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
August 6: Gymnastics (Ages 6-13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
August 13: Gymnastics (Ages 4-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
August 20: Gymnastics (Ages 6-13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# HAC Summer Camp Student Data Form

Child's Full Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ School Name: \_\_\_\_\_ Grade: \_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

## PARENT/GUARDIAN CONTACT & RELEASE INFORMATION

Primary Guardian: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
Work Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

Secondary Guardian: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
Work Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

*Would you like to receive email updates, news, and information about our programs?*

Yes  No

Is there a custody or visitation arrangement?  Yes  No

If so, please explain and attach supporting documentation.

## CHILD RELEASE

The following people are authorized to pick up my child from the HAC Camp:

Name	Relationship
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

## IF NOT AVAILABLE IN AN EMERGENCY, NOTIFY:

1. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
First Name Last Name Home or Cell Work #

2. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
First Name Last Name Home or Cell Work #

## PERSONAL GROWTH

Is there any information about your child the HAC staff could benefit from knowing?

\_\_\_\_\_  
\_\_\_\_\_

Swimming Ability:  Afraid of water  Enjoys water  Other: \_\_\_\_\_

## CHILD'S PHYSICIAN/MEDICAL CARE PROVIDER

In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the program director to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child as named above.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Family Physician: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Family Dentist: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Family Insurance: \_\_\_\_\_ Primary Person: \_\_\_\_\_  
Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_  
Allergies (food, medicine, bee sting): \_\_\_\_\_  
Special information or restrictions we should know about your child: \_\_\_\_\_  
\_\_\_\_\_

**GUARDIAN SIGNED RELEASES**

FIELD TRIPS: I hereby give my permission for my child to take field trips with Hockessin Athletic Club. Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

SWIMMING: I hereby give my permission for my child to swim with the HAC under lifeguard supervision. Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

PHOTO RELEASE: I hereby give my permission for photographs of my child to be used in HAC publicity. Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

MEDICAL RELEASE: I hereby give my permission for HAC to administer emergency medical care/first aid. Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

SUNSCREEN RELEASE: I hereby give my permission for HAC to apply sunscreen, which I provide, to my child. Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

TRANSPORTATION RELEASE: I hereby give my permission for my child to be transported in the HAC vans. Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

VIDEO VIEWING/COMPUTER USAGE: I hereby give my permission for my child to view videos and play on the classrooms computers.  
Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

I, Parent/Guardian \_\_\_\_\_, have read and understand the information in this packet and the parent handbook and will be responsible for the information therein. Any changes or cancellations must be made in writing prior to May 11, 2012.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Copy of Medical Physical Form to verify child is seen regularly by a physician.

**Please Remember: All payments, schedule changes, and cancellations must take place before May 11, 2012. No refunds will be issued after May 11th.**

