

HEALTH HISTORY

Camper Name: _____

Emergency Contacts (non-parent) REQUIRED:

1. Name: _____ Relationship: _____ Preferred Phone: _____

2. Name: _____ Relationship: _____ Preferred Phone: _____

Is there any reason to restrict the camper from any camp activity? Yes No

If yes, please explain: _____

Does the camper have any health concerns or special needs? Yes No

If yes, please explain: _____

Are all immunizations up to date? Yes No Date of last Tetanus shot: _____

Please list all known allergies (*food, medication, other*): _____

Does the camper have any dietary restrictions? Yes No

If yes, please explain: _____

Does the camper take any medications on a regular basis, either prescribed or over-the-counter? Yes No

If yes, please explain: _____

We stock a wide variety of over-the-counter (*OTC*) medications. Please list any OTC medication the camper CANNOT have: _____

Insurance Information

(Nashville Shores does not carry accident or sickness insurance for participants. Camper must have current health insurance and provide health insurance card).

Insurance Company & Address: _____

Policy Number: _____ Group Number: _____

Name of Insured: _____ Policy Holder Insurance ID Number: _____

Preferred Hospital: _____

Name of Primary Physician: _____ Phone: _____

Dentist Name: _____ Phone: _____

Parent/Guardian Authorization:

As the parent or guardian of the camper whose name appears above, I approve this registration and give my permission for the camper to participate in all planned camp activities (except as may be noted on this registration). In consideration of the camper named above being allowed to participate in the activities and programs of Nashville Shores and to use its facilities (whether owned or leased), equipment and machinery, I do hereby waive, release and forever discharge Nashville Shores and its officers, agents, employees, volunteers, representatives, directors and all others from any and all responsibility or liability for injuries or damages resulting from the camper's participation in such activities or programs or use of such facilities, equipment or machinery, even if such damage or injury results from a negligent act or omission, and I have completed the attached Health History Form.

I agree that Nashville Shores may photograph or videotape the camper, and Nashville Shores may use these photographs or video footage for print materials, commercials, social media, advertisements, and other marketing purposes. I release Nashville Shores from any claim or liability related to that use, and waive all claims against the individual staff persons and Nashville Shores. I understand Nashville Shores is not responsible for lost, stolen, or damaged personal items. I agree to follow camp's policy on camp payments, the cancellation policy and the camper discipline policy.

In case of accident or illness, I authorize Nashville Shores to secure emergency medical treatment for the camper named above. I understand that Nashville Shores will attempt to contact me as promptly as possible during such an emergency. I hereby give my permission to the medical personnel selected by Nashville Shores to order X-rays, routine tests and treatment, and to release my records necessary for insurance purposes; and to provide or arrange necessary related transportation for my child. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by Nashville Shores to secure and administer treatment, including hospitalization of the camper named above. I understand the related expenses for this medical attention will be my responsibility.

The health history is correct and complete as far as I know, and the camper named above has my permission to engage in all camp activities except as noted.

This completed form may be photocopied.

Signed: _____ Printed: _____ Date: _____

DAY CAMP REGISTRATION INFORMATION/FAQ

Camp Hours

Camp runs from 8:15 a.m. to 4:45 p.m., Monday – Friday. There will not be camp on Memorial Day or July 4. Before-care will be available from 7:30 a.m. – 8:15 a.m. for \$25 a week per camper. After-care will be available from 4:45 p.m. – 5:30 p.m. for \$25 a week per camper. There will be a \$1 charge per minute per child for drop-off prior to 7:30 a.m. or after 5:30 p.m. pick up.

Ages Served

Nashville Shores Summer Adventure Camp is available for children 5 – 12 years old. The child must be 5 – 12 years old on May 1, 2012.

Family Rate

Have a brother or sister who is also attending Nashville Shores Summer Adventure Camp? Sign up together, and each will save \$20 per session! Please note that a separate registration form needs to be completed for each sibling.

Multi-Session Fee Reduction

Want to come to Nashville Shores for more than one week? Any camper enrolled for multiple sessions is not required to pay the \$25 registration fee for any additional sessions.

Camp Scholarships

Thanks to generous donors and sponsors, Nashville Shores is able to offer Summer Adventure Camp Scholarships on a first-come basis. To apply for a Summer Adventure Camp Scholarship, please download a scholarship application at www.NashvilleShores.com. Applications for scholarships will be accepted beginning April 1, 2012. If you would like to help send a deserving child to camp, please contact summercamp@nashvilleshores.com.

Registration Fee

There is a non-refundable \$25 registration fee per camper which covers t-shirt, water bottle, camp processing and award. This registration fee is not applied to the camp fee. Camp fee for sessions 1 - 5 must be paid in full by April 15, 2012. Camp fees for sessions 6 – 9 must be paid in full by May 15, 2012.

Your camp fee provides:

- ♦ Attendance at camp for one week
- ♦ Two snacks with drink (juice) per day
- ♦ Crafts, sports, games and other activities
- ♦ Swim lessons or junior lifeguard classes

Lunch can be provided for the entire week for an additional \$25 per camper. Lunch menu items will include hot dogs, chicken tenders, pizza, salads, etc. Please note any dietary restrictions. All reasonable accommodations will be made, but we cannot guarantee we will be able to accommodate every camper.

Camper Health Form

The health form is located on this Registration Form. This form is vital to the health and safety of your child while at Nashville Shores Summer Adventure Camp and is required to complete your child's enrollment. Your camper will be unable to attend without a completed health form.

Cancellation Policy

All cancellations must be submitted in writing 3 weeks prior to registered camp week. Cancellation requests submitted 3 weeks prior to registered camp week will receive a 75% refund of original amount paid. Refunds will be paid in the form of a check. Cancellation requests received within 3 weeks of registered camp week will not receive a refund.



2012 SUMMER ADVENTURE CAMP

REGISTRATION

Camper Name:		Birthdate: / /	Gender: M F	Age:
Grade (Fall 2012):	School:	Family E-mail:		T-shirt Size:
Camper Home Address:		City:	State:	Zip:

Father's Information:

Name: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Employer: _____

Mother's Information:

Name: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Employer: _____

Please indicate (√) with whom the camper lives:

Mother Father Guardian

Please indicate (√) parents are:

Married Separated

Divorced Single

Re-married Widowed

Pick-Up Information : (Please list adults authorized to pick up your child in your absence).

1. _____ 2. _____

3. _____ 4. _____

DAY CAMP REGISTRATION

Please indicate (√) which session your child will be attending:

Camp Dates <i>(Multiple sessions require only one registration fee)</i>	Registration Fee	Camp Fee	Family Rate <i>(Save \$20 if sibling attends)</i>	Weekly Lunches <i>(\$25 per person)</i>	Early Care <i>(7:30-8:15)</i>	Late Care <i>(4:45-5:30)</i>	Total
<input type="checkbox"/> Session 1 <i>(No Camp on Memorial Day)</i> May 29 – June 1	\$25	\$160	\$20	\$25	\$25	\$25	
<input type="checkbox"/> Session 2 June 4 – June 8	\$25	\$200	\$20	\$25	\$25	\$25	
<input type="checkbox"/> Session 3 June 11 – June 15	\$25	\$200	\$20	\$25	\$25	\$25	
<input type="checkbox"/> Session 4 June 18 – June 22	\$25	\$200	\$20	\$25	\$25	\$25	
<input type="checkbox"/> Session 5 June 25 – June 29	\$25	\$200	\$20	\$25	\$25	\$25	
<input type="checkbox"/> Session 6 <i>(No Camp on July 4)</i> July 2 – July 6	\$25	\$160	\$20	\$25	\$25	\$25	
<input type="checkbox"/> Session 7 July 9 – July 13	\$25	\$200	\$20	\$25	\$25	\$25	
<input type="checkbox"/> Session 8 July 16 – July 20	\$25	\$200	\$20	\$25	\$25	\$25	
<input type="checkbox"/> Session 9 July 23 – July 27	\$25	\$200	\$20	\$25	\$25	\$25	
	+	–	+	+	+	=	

Payment for Sessions 1 – 5 are due in full by April 15, 2012.
Payment for Sessions 6 – 9 are due in full by May 15, 2012.

If payment is not received by the above dates, you forfeit your spot at the day camp.

Payment Options:

Pay by Debit/Credit Card – Camp staff will contact you for card information once registration is received

Check enclosed – Make checks payable to Nashville Shores and mail to:
 Nashville Shores | 4001 Bell Road | Hermitage, TN | 37076

PLEASE COMPLETE BOTH SIDES OF THE REGISTRATION FORM.

Mail form to Nashville Shores | 4001 Bell Road | Hermitage, TN | 37076; fax to (615) 885-3248; or email completed forms to summercamp@nashvilleshores.com.

Be sure to keep a copy for your records.