

MANALAPAN PARKS & RECREATION 2020

2020 SUMMER RECREATION PROGRAM REGISTRATION FORM



ALL KINDERGARTEN REGISTRATIONS MUST INCLUDE A BIRTH CERTIFICATE AND CURRENT REPORT CARD IN ORDER FOR ENROLLMENT TO BE FINALIZED AND ACCEPTED

All camp information, including trip registration notification and weekly camp updates will be e-mailed. Please provide your current e-mail address below.

PLEASE PRINT ALL INFORMATION CLEARLY

Parent Name: Last _____ First _____

Child's Name: Last _____ First _____

Present Grade: _____ D.O.B. ___/___/___ Gender: M F Age: _____

House # _____ Address: _____ Town _____

Home Phone: _____ Emergency Phone: _____

T-Shirt Size: Youth: YS ___ YM ___ YL ___ YXL ___ *Adult: S ___ M ___ L ___ XL ___ XXL ___

Birth Certificate for 1st time campers: [] Report Card for all Kindergarteners []

****E-Mail Required:** _____



REGISTRATION FEES



PROGRAM MAXIMUM IS 1100 PARTICIPANTS

Now thru May 11	\$650.00 each child, first two children in a family	\$325.00 each additional child	\$
May 12 - June 1	\$675.00 each child, First two children in family	\$338.00 each additional child	\$
Transportation	\$190.00 each Child First two children in family	\$95.00 each additional child Available until 5/11	\$
	After 5/11, if available	Add \$25.00 late fee	\$
After Care	\$250.00 each child or \$11.00 Daily		\$
			\$

Grades K-5, Group T-Shirt color choices located on back of form

Combine all fees and make one check payable to: **Manalapan Recreation** Total Fee: \$ _____

There will be a 2.95% convenience fee added for registering with a Credit Card.

*Allergies or Medical Issues: _____

*Special Needs, Limitations, Restrictions: _____

- If your child has any special needs, please complete a Special Needs Form. *
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Special Request: _____

ALL FEES ARE NON-REFUNDABLE:

NO SWITCHES, NO CREDITS, NO EXCHANGES, NO TRANSFERS

Group Assignment: Children can choose a group color of their **present grade**. Please write in your 1st and 2nd choices. If no group is indicated, Manalapan Parks & Recreation will assign a group based on availability.

Color choices are as follows:

Kindergarten: Kiwi or Silver

1st Grade: Gold, Charcoal or Green

2nd Grade: Plum, Tan or Teal

3rd Grade: Light Blue, Minion or Navy

4th Grade: Red, Orange or Slate

5th Grade: Forest, Maroon, Grape or Royal

6th Grade: No Color Choice

7th Grade: No Color Choice

Choice: 1 _____

Choice 2 _____

Choice 3 (optional) _____

***Color change requests will incur a Switching Fee.**

**Transportation and
After Care Information:**

Emergency contact: _____
and phone number for any related issues: _____

REQUIRED INCLEMENT WEATHER PROCEDURE

I understand and agree that the 2020 Summer Recreation Program may be cancelled on days of inclement weather.

Signature Parent/Guardian

Swim Permission Form

_____ I give my permission for my child to take part in all swimming trips in the 2020 Summer Recreation Program.

_____ I do NOT give my permission for my child to take part in the 2020 Summer Recreation Program swim trips.

ACCIDENT INSURANCE: In order to additionally protect participants in our Recreation programs, Manalapan Township maintains a "LIMITED FORM OF CONTRACT" accident insurance for youth sponsored programs (with the exception of skiing, boxing, lacrosse and ice hockey), which is intended to be only supplemental to your own personal health insurance. This coverage has restrictions and limitations and does not include individuals over the age of 18. All participants are encouraged to carry their own personal health insurance to adequately be protected in case of emergency. Manalapan Township carries **NO** health insurance coverage for personal injury while participating on sponsored ski trips or any of the excluded categories.

PROGRAM ACCIDENT INSURANCE/DISCLOSURE STATEMENT: Programs sponsored by Manalapan Parks and Recreation offer an opportunity for participants to explore and test the limits of their abilities. Every effort is made by staff and volunteers to protect the safety of all participants. Your participation in the Manalapan Recreation Program is voluntary and we assume no responsibility for any injuries or accidents that may occur.

MEDICAL ATTENTION: I hereby authorize the attending physician to administer treatment on behalf of the above minor participant in the event of an emergency. I also assume financial responsibility for any medical treatment for my child not covered under the Township's accident insurance policy.

Please Initial:

_____ I hereby consent to allow my child to participate in Manalapan Recreation sponsored activities.

_____ I have read and reviewed with my camper, and understand the Parent Manual and accept the Summer Program Camper Behavioral Agreement

Signature Parent/Guardian Date _____ Fee _____ Cash Rec'd
 Check By _____

Manalapan Recreation mailing address: 120 Route 522, Manalapan, NJ. 07726
physical address: 93 Freehold Road, Manalapan

NO REGISTRATIONS WILL BE ACCEPTED AFTER JUNE 1