

MANALAPAN PARKS & RECREATION 2018

2018 SUMMER RECREATION PROGRAM REGISTRATION FORM

120 ROUTE 522, MANALAPAN, NJ. 07726



****NEW THIS YEAR: ALL KINDERGARTEN REGISTRATIONS MUST BE COMPLETED IN PERSON AND A BIRTH CERTIFICATE AND CURRENT REPORT CARD MUST BE PRESENTED AT THE TIME OF ENROLLMENT**

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: _____

Address: _____ Town _____ Zip: _____

Home Phone: _____ Emergency Phone: _____

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

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

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

REGISTRATION FEES

PROGRAM MAXIMUM IS 1100 PARTICIPANTS

Now through April 1st	\$605.00 each child, first two children in a family	\$303.00 each additional child	\$
April 2nd - May 13	\$615.00 each child, first two children in a family	\$308.00 each additional child	\$
May 14- June 1	\$675.00 each child, First two children in family	\$338.00 each additional child	\$
Transportation	\$180.00 each Child First two children in family	\$90.00 each additional child Available until 5/14	\$
	After 5/14, if available	Add \$25.00 late fee	\$
After Care	\$230.00 each child		\$

NO REGISTRATIONS WILL BE ACCEPTED AFTER JUNE 1!

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. *

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, Slate or Black
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 may 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 2018 Summer Recreation Program may be cancelled on days of inclement weather.

 Signature Parent/Guardian

REQUIRED PICK UP AUTHORIZATION FORM

The following individual(s) (must be at least 18 years of age) are authorized to pick up my child from the Manalapan Recreation Summer Recreation Program. I understand my child will be allowed to leave with these individuals only. **Government issued photo identification will be required at sign out. Parent's names must be listed for pick up.**

Authorized Person's Name (please print name as it appears on photo identification)	Relationship to Child	Phone Number

Name of person(s) **NOT** allowed to pick up child (appropriate custody papers must be attached if a parent is not allowed to pick up their own child).

Person's Name	Relationship to Child	Phone Number

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.

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

_____ Date _____ Fee _____ Cash Rec'd
 _____ Check By _____

Signature Parent/Guardian