



Discover. Connect. Belong.

Dear Parents/Guardians,

The age groups of campers will be organized by grade completed. Please look at the registration paper attached to determine what group your camper will be in after the 2018-2019 school year. This year we are piloting a new program, "Trainers". **Trainers will be Day Camp counselors-in-training for the younger groups, offered full-time (4-5 days per week)**. Trainers will help Mondays, Wednesdays and Fridays and will be with Group F on Tuesdays and Thursdays. Trainers will have 10 field trips covered by Day Camp as a thank you for their help with younger groups. Group F will be open to full or part time campers who finish 6<sup>th</sup> and 7<sup>th</sup> grade.

**Summer Day Camp 2019 is scheduled to begin June 10<sup>th</sup>, 2019 and will end August 14<sup>th</sup>, 2019. The only day that Day Camp will be closed will be Thursday, July 4<sup>th</sup>, 2019.**

**Please indicate your e-mail address on the form.** Day Camp Handbook and Information regarding tuition and field trips will be e-mailed to REGISTERED PARTICIPANTS AFTER REGISTRATION. **You will not receive any type of Day Camp information if you do not register.** First tuition payment is due by Friday, May 24<sup>th</sup>, 2019. Field Trip registration is first come/first served. Payment will be done by credit card every Friday. Late charges and fees for insufficient funds may be applied. After you have made your first tuition payment, you are committing to participate and be responsible for payments for the full summer. Some age groups may reach maximum size; submit as soon as possible. Tuition and Pool membership details are on the attached document.

**If you are interested in enrolling your child/ren in Summer Day Camp for 2019, please complete and sign the registration form and return it along with the non-refundable \$60 registration fee per family.**

If you have any questions, please contact Amanda Witherow at 717-898-3102, ext. 133 in the SAC Office or at [awitherow@hempfieldrec.com](mailto:awitherow@hempfieldrec.com).

Sincerely,

Michelle Califf  
Director of Day Camp  
717-898-3102, ext. 134 (please note: voicemails to this extension are not checked during the school year)  
[daycamp@hempfieldrec.com](mailto:daycamp@hempfieldrec.com)

## 2019 SUMMER DAY CAMP REGISTRATION

**Dates:** Monday–Friday, June 10, 2019 –August 14, 2019 (Except 7/4)

Full Time is 4-5 days during the week.

**Please note: 7<sup>th</sup> grade campers choose between “main” camp and “Trainer” and 8<sup>th</sup> graders can only do “Trainers”**

CHILD’S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ MALE/FEMALE

Day Camp provided **T-Shirt Size** (Youth Small to Adult XL) \_\_\_\_\_ Current Grade (18-19 school year) \_\_\_\_\_

**We plan to use the following type of care (circle one):** Full Time    2-Day Pt Time (limited)    3-Day Pt Time (limited)

*Please Circle the Group you child will be in: (based on the grade your child is **CURRENTLY** in; finished June '19)*

**“A1”** (Kindergarten, at least 5 years old at **start of camp**)                      **“A2” (1<sup>st</sup> grade) Full**                      **“B” (2<sup>nd</sup> grade) Full**

**“C” (3<sup>rd</sup> grade) Full**                      **“D” (4<sup>th</sup> grade)**                      **“E” (5<sup>th</sup> grade)**                      **“F” (6<sup>th</sup> – 7<sup>th</sup> grade)**

**“Trainer”** (7<sup>th</sup> – 8<sup>th</sup> grade; Counselors in Training will help with younger groups MWF and will be with “F” T and H)

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**“Trainer”** (7<sup>th</sup> – 8<sup>th</sup> grade; Counselors in Training will help with younger groups MWF and will be with “F” T and H)

**\*Preferred E-MAIL ADDRESS:** \_\_\_\_\_

*Please Note: Most Day Camp contact is conducted via e-mail (reminders, notes, and confirmations). If you don't provide an e-mail address, you may not receive all Day Camp information. You may provide more than one address if needed for family contacts.*

CAMPER NAME(S) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_ FATHER'S NAME: \_\_\_\_\_

MOTHER'S HOME PHONE: \_\_\_\_\_ FATHER'S HOME PHONE: \_\_\_\_\_

MOTHER'S WORK PHONE: \_\_\_\_\_ FATHER'S WORK PHONE: \_\_\_\_\_

MOTHER'S CELL PHONE: \_\_\_\_\_ FATHER'S CELL PHONE: \_\_\_\_\_

EXTENUATING FAMILY SITUATIONS (includes, but not limited to: camper with a TSS, mental or emotional disorders, notes about custody, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

**Please Note:** Campers who sign-up for the Mini Camp MUST be potty trained when they begin camp.

**Registration Fee: \$60 per family**  
**Non-refundable No Cash Accepted**

**PLEASE NOTE: Registration is not complete until the Emergency Contact Form is also turned in.**

**Make checks payable and mail to:** Hempfield recCenter  
950 Church Street  
Landisville, PA 17538

**Credit Card: VISA Discover MasterCard**

**Card Number:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

\*Please note, Day Camp only accepts payment by credit card and will be determined Fridays. There is a sibling discount.

Contact [daycamp@hempfieldrec.com](mailto:daycamp@hempfieldrec.com) if Day Camp trip and tuition information is not received via e-mail by 5/1/2019. Registration fee and first week's tuition must be paid prior to trip registration.

**I have read, understand and will comply with the tuition payment process for Summer Day Camp 2019.**

**Signature:** \_\_\_\_\_ **Date Submitted:** \_\_\_\_\_

**\*Registrations will no longer be accepted for Summer Day Camp after June 1, 2019.**

**\*All paperwork MUST be submitted by the first day of Day Camp.**

**Tuition Rates for 2019:**

Full/Part-time	Price	Additional Notes
"Minis" (4-5 days)	\$115	No Field Trips, Must be potty trained 7 am - 1 pm
2-day Part Time	\$100	*Flexibility to adjust days from week to week based on need
3-day Part Time	\$140	*Vacation discounts do not apply to part-time campers
Full-Time (4-5 days)	\$180	*Full Time campers receive one vacation week that is pro-rated at 50% *New for 2019 Full Time campers can take two vacation weeks that are pro-rated at 60% each
"Trainers"	\$160	Full-Time (4-5 days), plus 10 field trips included

There is a 15% sibling discount on the lesser amount(s)

**By signing above, you agree to the following. If you disagree, please attach a separate paper stating what you disagree with, sign and date it. Thanks!**

- Minis will watch G movies ONLY.
- A1-D campers will watch G and PG movies that are developmentally appropriate.
- E-F and Trainer Campers will watch G, PG and PG-13 movies that are developmentally appropriate.
- E-F and Trainer Campers have the option of "Technology Hour" and walking to Turkey Hill as rewards for positive behavior.

ONE FORM PER CHILD (registration isn't complete without this form on file)  
**2019 EMERGENCY CONTACT/PARENTAL CONSENT FORM**

<b>Child's Name</b>	<b>Registered Group for 2019 (circle one)</b> Minis   A1   A2   B   C   D   E   F   Trainer	<b>Birthdate</b>
<b>Address</b>		
<b>Primary Contact Name</b>	<b>Relationship to Child</b>	
<b>Home Address (if different from child)</b>		
<b>Primary Contact Preferred Phone Number</b>	<b>Primary Email Address</b>	
<b>Secondary Contact Name</b>	<b>Relationship to Child</b>	
<b>Home Address (if different from child)</b>		
<b>Secondary Contact Preferred Phone Number:</b>	<b>Secondary Email Address</b>	

**Additional Person(s) To Whom Child May Be Released**

<b>Name</b>	<b>Relationship to Child</b>	<b>Phone Number</b>
<b>Name</b>	<b>Relationship to Child</b>	<b>Phone Number</b>
<b>Name</b>	<b>Relationship to Child</b>	<b>Phone Number</b>
<b>Name</b>	<b>Relationship to Child</b>	<b>Phone Number</b>

**Medical Needs/Concerns**

<b>Name of Child's Physician/Medical Care Provider</b>	<b>Phone Number</b>
<b>Health Insurance Coverage or Medical's Assistance Benefits</b>	<b>Policy Number (Required)</b>
<b>Special Instructions for Staff:</b> <ul style="list-style-type: none"> <li>• Medical or Dietary Information Necessary in an Emergency Situation (if any)</li> <li>• Special Disabilities (if any)</li> <li>• Allergies (including medication &amp; reaction) (if any)</li> <li>• Medication, Special Conditions (if any)</li> </ul>	<b>Additional Information on Special Needs of Child</b> (includes, but not limited to: TSS for camper, extenuating family situations, medical diagnosis that staff should be aware of):

\_\_\_\_\_  
 Signature of Parent or Guardian

\_\_\_\_\_  
 Date

\*A PARENT SIGNATURE GIVES PERMISSION FOR HEMPFIELD RECCENTER TO APPLY FIRST AID/CPR TO YOUR CHILD IN CASE OF EMERGENCY.