

2021 Roethke Day/Mini Camp Registration

(Please Complete Both Sides of this Form!)

Childs Name				Child's Age	
Address		City	State	Zip	Township
Home Phone		Work Phone		Cell	Emergency Phone #
Mother/Guardian's Name			Father/Guardian's Name		
Email Address					

If purchasing a Camp shirt, please circle size below. Camp shirt is same design for all summer camps.
 Youth Small (6/8) Youth Medium (10/12) Youth Large (12/14) Small Medium Large XLarge

Please check box to indicate your Day Camp choices. Add across each row and total down the last column to get a total cost.
Cash or Check ONLY - Checks payable to Thomas Township General Fund and return to 249 N. Miller Rd. Saginaw, MI 48609

Week/Theme	Resident	Resident 2nd Child Same Week	Non-Resident	Non-Resident 2nd Child Same Week	Before/ After Care	Camp Shirt indicate size	Total
June 14-18 Camp Roethke's Got Talent	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
June 21 - 25 Buggin' Out	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
June 28 - July 2 Space Is The Place	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
July 6-9 Mini Camp (4-6yrs only)	☐ \$85	☐ \$63.75	☐ \$95	☐ \$71.25	☐ N/A	☐ \$10	
July 12 - 16 Shark Week	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
July 19 - 23 Full STEM Ahead	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
July 26 - 30 Roethke Survivor	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
August 2 - 6 Dino Dayz	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
August 9 - 13 Zootopia	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
August 16 - 20 The Final Showdown	☐ \$120	☐ \$90	☐ \$130	☐ \$97.50	☐ \$30	☐ \$10	
						Total (add up last column)	

If you are registering more than 1 child in the same week the 1st child is full price. Any additional registrations in the same week will be 25% less

2021 Parent/Guardian Permissions

Transportation agreement:

Thomas Township and the Parks and Recreation Staff have my permission to transport my child from the Roethke Park Day Camp, to any and all off site activities. By signing this form, I am acknowledging that I understand that my child will be off site for activities during Day Camp Week.

MEDICAL Agreement:

Thomas Township and the Parks and Recreation Staff have my permission to seek medical treatment for my child, in the event that I cannot be reached for a medical emergency. I hereby give permission to the physician selected by the Director to hospitalize, secure proper treatment for, to order injections, anesthesia, or surgery for my child as named on page 1 of the Day Camp Registration Form.

****The following information is necessary to have on file in case of an emergency:****

Physician: _____ Phone: _____

Dentist: _____ Phone: _____

Allergies: _____

Does your child know how to handle their allergies? _____

Current Medications: _____

Does your child know when medications are needed? _____

VIDEO TAPING AND PICTURE TAKING:

I understand and give my permission to Thomas Township and the Parks and Recreation Staff to videotape, capture on camera, and use my child's image on the website or in brochures for the use of Thomas Township's Parks and Recreation advertising.

My signature on this form verifies that I understand Thomas Township, its employees and volunteers, shall not be responsible for any injury to my child while participating in this Day Camp Program. I waive and release Thomas Township, its employees and volunteers, from any and all claims.

Parent/Guardian signature

Date

Name of any other person(s) who my child can be released to besides Mother/Father. Your child **WILL NOT** be released to anyone unless so named on this form: