

Belmont Parks & Recreation Summer camp is authorized to release my child to only the individuals listed below. I understand each authorized person must be at least 16 years of age and that my child will not be permitted to leave the camp with anyone else not listed below, unless we are otherwise notified prior to release. All authorized individuals will be required to show identification, which MUST match the information given below, and sign out the child on each occurrence. The above named child may be released to the following individuals (Please limit to 3)

Name of Authorized Person	Relationship to Camper
1)	
2)	
3)	

**Release of Liability & Emergency Medical Information**

Participation in this sport/activity may involve risk of injury. As a parent, guardian, or participant, I am aware of these hazards and whether I or the minor participant named below have the ability to participate. In consideration for participation in the program(s) listed above, I hereby for myself or the minor participant named below, waive and release all rights and claims against the Town of Belmont, its officers, employees, agents, volunteers, and supervisors, except in the case of their sole negligence, from all losses, injury, damages, fees and other expenses, arising out of or in connection with participation in the activity.

I give my permission for myself to be treated by qualified medical personnel if I am injured, or for the minor child participant named below to be treated by qualified medical personnel in the event that the above named parent/guardian cannot be reached at the phone numbers provided; I understand that in an emergency an attempt will be made to communicate with me prior to use of this waiver.

Parent/Guardian Signature	Printed Name	Date
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The swim ability on this form must be filled in along with your signature. The other permission slips are optional so ONLY sign for the ones that you are granting permission. DO NOT sign the sunscreen or bug spray permission slip if your child is allergic to the common brands including bug spray containing DEET!

Campers Last Name:	Campers First Name
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**SWIM ABILITY**

We are often at the beach and other water attractions. Please indicate your campers swim ability. Please underestimate if a category does not exactly match his/her ability.  
Level #1 – cannot swim at all without a flotation device - will be permitted to swim up to child's waist  
Level #2 – can swim a little mostly underwater above and not for long distance - will be permitted to swim up to child's arm pits  
Level #3 – can swim well and for a distance above and below water - will be permitted to swim in all designated swimming areas

My child is a Level # \_\_\_\_\_ swimmer (MUST BE FILLED IN)

While at a water/amusement park I would like my child to wear a lifejacket while in the wavepool:  No

Parent/Guardian Signature	Printed Name	Date
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**SUNSCREEN PERMISSION SLIP**

Belmont Parks & Recreation Summer Day Camp has permission to apply sunscreen to my child in the event he/she forgets to bring their own from home. We reserve the right to charge \$10 for any child who continually forgets to provide their own sunscreen.

Parent/Guardian Signature	Printed Name	Date
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**BUG SPRAY PERMISSION SLIP**

Belmont Parks & Recreation has permission to apply bug spray that contains DEET to my child as needed for outdoor activities.

Parent/Guardian Signature	Printed Name	Date
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**WALKING/BIKING TO OR FROM CAMP PERMISSION SLIP**

I, the parent/guardian grant permission for our daughter/son to walk or bike to/from the camp as noted below. Camper should arrive and depart at the same time daily unless staff has been notified of a change. Belmont Parks & Recreation is not responsible for any bikes that are left outside of the school during our program. We recommend bike locks be used for security.

Permission to walk or bike to the camp: YES [ ] NO [ ]

Permission to walk or bike home from camp: YES [ ] NO [ ] If yes what is the departure time: \_\_\_\_\_

The following are days that my child **WILL NOT** walk or bike to/from camp: M T W TH F

Parent/Guardian Signature	Printed Name	Date
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**PHOTO RELEASE**

I the parents/guardian grant permission for Belmont Summer Camp employees to photograph my child's image, likeness, or depiction while attending summer camp. As a parent, guardian, or participant, I allow the Belmont Parks & Recreation Department to take my picture or the picture of my child(ren) and use it for advertising and promotional purposes.

Parent/Guardian Signature	Printed Name	Date
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**CANCELLATION POLICY**

I understand the cancellation/refund policy is strictly enforced. If the program is cancelled by the Department, I will be notified and a full refund given. I also understand that if I miss any of the activities/classes, I will not be able to get a refund.

Parent/Guardian Signature	Printed Name	Date
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**ACKNOWLEDGMENT OF HOURS OF OPERATION**

I understand the hours of operation of the Belmont Parks & Recreation Summer Camp program are 8:00AM - 4:30PM. Early Drop off is available for drop offs between 7:30AM-8:00AM for a charge of \$25/week. It is expected that campers are picked up on time each day. We reserve the right to charge a late fee of \$25.00 per child/per day for pickups later than 4:30 PM. In the case of an emergency, please call the Camp Director.

Parent/Guardian Signature	Printed Name	Date
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<b>FOR OFFICIAL USE ONLY</b>		
Belmont Resident: Yes [ ] No [ ]	Proof of residency presented: Yes [ ] No [ ]	
Permission Granted: (per waiver)	Swim Ability # 1 2 3	Sunscreen: Y N Bug Spray: Y N Bike or Walk: Y N AM [ ] PM [ ]