



Spring Camp Registration Form For children in 1st – 5th grade

Please: One child per form

Child's Name _____ Birth Date _____ Age _____

Circle: Male or Female

Parent's or Guardian Name _____

Address _____ City _____ Zip _____

1st phone # _____ 2nd phone # _____

School: _____ Grade _____ School Phone _____

Session A: 4 April 7,8,9,10,11

\$110 for one 5-day session _____
Pre-camp begins 8:15 a.m. add \$11 for one 5-day session _____
Post-camp until 5:15 p.m. add \$11 for one 5day session _____
Total \$ _____

Payment is due in FULL

Payment options: ___ Check – payable to **WCPARC**
___ Cash – In person only – Do Not Mail Cash
___ Credit Card, MasterCard Visa

(Needed for mail in only) Card Number _____

Exp date ____/____/____ Signature _____

Cancellation Policy: Written notice must be received five business days prior to the 1st day of your camp session(s).
A \$20.00 fee, per week, per child will be assessed to all refund requests.

Waiver: I attest that my child is physically capable of participating and give my permission to participate in all activities in the above programs for which I have registered and hereby release Washtenaw County Parks and Recreation Commission from any responsibility whatsoever for personal injuries, damages, or loss of equipment resulting from participation.

Signature _____ **Date** _____

**Washtenaw County Parks and Recreation Commission Tax I.D. #38-6004894
Meri Lou Murray Recreation Center, (734) 971-6355, x202**

Office use only:

Date: _____ Paid: _____ Staff: _____ Check #: _____ Receipt #: _____

*CC #: _____ *Expiration Date: _____ (*If mailing and using Credit Card, write number and expiration date.)