

SAMBICA 2017 · SUMMER CAMP REGISTRATION FORM

4114 W Lake Sammamish Pkwy SE • Bellevue, WA 98008 • Ph: (425) 746-9110 • Fax: (425) 746-7082 • www.sambica.com

- Complete **one form per camper** and mail or fax, along with payment in full or a **\$100 non-refundable deposit** per camper, per session.
- **PAYMENT IS DUE IN FULL BY MAY 1st.** If registering after MAY 1st, payment in full will be due at time of registration.
- Registration Acknowledgement and Parent Handbook will be mailed within two weeks after registration is processed.
- Scholarships may be available based on financial need. Please contact our main office for more details.
- Transfers may be allowed based on availability for a \$15 processing fee. Please see the Parent Handbook for other important information.

CAMPER INFORMATION

Camper First Name: _____ Camper Last Name: _____
Camper Address: _____ City: _____ State: _____ Zip: _____
Male: Date of Birth: _____ Grade Next Fall: _____ Cabin buddy requests: (Buddies must be of the same gender and grade, and **must** be mutual. Only 2 requests will be honored.)
Female: School: _____ & _____

PARENT/GUARDIAN INFORMATION

Primary Parent/Guardian First Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Home phone: _____ Work phone: _____ Cell phone: _____
Email: _____ Relationship To Camper: _____
Secondary Parent/Guardian First Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Home phone: _____ Work phone: _____ Cell phone: _____
Email: _____ Relationship To Camper: _____

EMERGENCY CONTACTS' INFORMATION (In the event that parent/guardians listed above cannot be reached)

Name: _____ Home #: _____ Cell #: _____
Name: _____ Home #: _____ Cell #: _____

CARPOOL INFORMATION (In addition to parents/guardians only people listed will be able to pick up your child. Photo ID required)

1. _____ 2. _____
3. _____ 4. _____

HEALTH INFORMATION (Please use additional paper if necessary)

Allergies: _____
List all medications & instructions: _____
Special needs/concerns: _____
Tetanus booster: Yes No (If unsure, was it within the last 5 years? ___) Are all immunizations up to date? Yes No
Health insurance carrier: _____ Policy holder's name/Date of birth: _____
Family physician name: _____ Family physician phone: _____

WAIVER AND RELEASE FROM LIABILITY

1. The undersigned parents or legal guardians ("Parent") grants permission for their son or daughter ("Camper") to participate in SAMBICA camp programs and all its associated activities, unless stated otherwise in writing to SAMBICA. This may include but is not limited to, boat activities, water activities and high ropes course.
2. The Parent agrees that health information is correct to the best of his or her knowledge. The Parent gives permission to SAMBICA and its designated medical staff to give the Camper over-the-counter medications, such as Tylenol, Pepto-Bismol, etc. unless otherwise stated in writing to SAMBICA. In an emergency, the Parent grants permission to hospitalize, to secure proper treatment for, and to order injection, anesthesia or surgery for the Camper in the event that SAMBICA is unable to contact the Parent. The Parent agrees to assume the responsibility for any charges incurred in the event that the Camper should need any medical attention; this includes all costs associated with transportation, rescue and other related expenses incurred on behalf of the Camper.
3. The Parent consents for the Camper to be transported in a vehicle and/or boat, with the understanding that the vehicle/vessel will be driven by a trained and qualified SAMBICA staff member for the purpose of some camp activities. (SAMBICA staff members will use their best efforts to ensure that Camper's wear seat belts or life jackets at all times while being transported in SAMBICA vehicles or boats.)
4. The Parent recognizes that photographs, video and interviews of the Camper may be taken during the camp session. The Parent gives permission for SAMBICA to use the recorded sounds and images of the Camper in any media publication for the purpose of advertising, promotion and marketing of SAMBICA. The Parent agrees that all rights to the recordings and images belong to SAMBICA. The Parent also consents for the Camper to be included in the weekly camp picture and camp DVD, unless stated otherwise in writing to SAMBICA.
5. The Parent releases the corporation of SAMBICA and its directors, officers, employees, agents and volunteers from and against any and all claims for personal injury, property damage and any other losses and damages that the Camper or Parent may suffer as a result of the Camper's participation and/or enrollment in SAMBICA programs.
6. The Parent, for themselves and for the Camper, will defend, indemnify and hold SAMBICA, its directors, officers, employees, agents, and volunteers harmless from any and all third party claims, injuries, damages, losses or suits, including all legal costs and attorney fees, arising out of or in connection with the Camper's participation in SAMBICA's programs, unless caused by SAMBICA's sole negligence. In any claim or lawsuit for damages arising from the Camper's participation in SAMBICA's programs, each party shall pay all its legal costs and attorney's fees incurred in defending or bringing that claim or lawsuit, including all appeals.

I have read, completed, and fully understand the above information.

Parent / Guardian Sign Here **X** _____ Date _____

How did you hear about SAMBICA? I am a Returning Camper Friend/Family Mailing Website Radio Other

How many years has this camper been attending SAMBICA summer camps? 1st year 2 years 3 4 5 More: _____

CAMP SELECTION

DAY

- Day Camp** (entering grades 2 - 6)
- June 19 - 23 \$438
 - June 26 - 30 \$553
 - July 3 - 7* \$438
 - July 17 - 21 \$574
 - Aug 7 - 11 \$574
 - Aug 21 - 25 \$553
 - Aug 29 - Sep 1 \$553
- JR High DC** (entering grades 6 - 9)
- July 10 - 14 \$592
 - July 24 - 28 \$592
 - July 31 - Aug 4 \$592
- H₂O Extreme DC** (entering grades 4 - 8)
- Aug 14 - 18 \$592
- Wake-Up Wakeboard School**
(entering grades 4 - 12, 7am to 9am)
- July 24 - 28 \$300

****There is no camp on July 4th!***

OVERNIGHT

- JR High Overnight Camp** (entering grades 4 - 6)
- June 25 - 30 \$556
 - July 16 - 21 \$599
 - Aug 6 - 11 \$599
- Overnight Camp** (entering grades 6 - 9)
- July 9 - 14 \$556
 - July 23 - 28 \$599
 - July 30 - Aug 4 \$599

Early Bird Discount
Save \$20 by paying in full
before MAY 1st.

HS Leadership

- Adventure** (entering grades 9 - 12)
- June 25 - 30 \$468
 - July 9 - 14 \$468
 - July 16 - 21 \$468
 - July 23 - 28 \$468
 - July 30 - Aug 4 \$468
 - Aug 6 - 11 \$468
- Serve** (entering grades 9 - 12)
- July 2 - 7 \$209
 - July 9 - 14 \$209
 - July 16 - 21 \$209
 - July 23 - 28 \$209
 - July 30 - Aug 4 \$209
 - Aug 6 - 11 \$209
 - Aug 13 - 18 \$209
- Lead** (entering grades 9 - 12)
- July 9 - 14 \$209
 - July 16 - 21 \$209
 - July 23 - 28 \$209
 - July 30 - Aug 4 \$209
 - Aug 6 - 11 \$209
 - Aug 13 - 18 \$209
 - Aug 20 - 25 \$209

PAYMENT INFORMATION

C A M P	Total Tuition Due (For all camps selected above):	\$
	Minus Early Bird Discount (Account must be paid in full by MAY 1 st):	-\$20.00 x _____ (# of camps) = \$
	Minus Applicable Discounts or Gift Certificates (See sambica.com for more details):	-\$ _____ Discount Name:
E X T R A S	T-Shirt Size (Summer camps only):	<input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL <input type="checkbox"/> AS <input type="checkbox"/> AM <input type="checkbox"/> AL <input type="checkbox"/> AXL
	Camp Store Funds (All funds available during first camp attending; Average: \$25 per camp):	\$
	Extended Care (Day/H2O/Jr High AM \$25 Day PM \$15):	\$
	Picture Order (5x7 print of camper's cabin, suitable for framing) (\$7):	\$7.00 x _____ (# of camps) = \$
	Photo CD (All pictures taken during camp, including an individual picture with counselor) (\$13):	\$13.00 x _____ (# of camps) = \$
	Care Package (A pack of goodies and toys to thrill your camper—enough to share) (\$25):	\$25.00 x _____ (# of camps) = \$
	Essentials Backpack (The basics—water bottle, towel, Bible, flashlight & backpack) (\$50):	\$50.00
	Pin Trading Kit (Pin lanyard plus 12 trading pins) (\$10):	\$10.00
Scholarship Donation (Help us bring kids to camp. Donations are tax deductible.):		\$
TOTAL:		\$
TOTAL PAYING TODAY (Minimum \$100 Deposit PER CAMP SESSION, Balance Due MAY 1 st):		\$

PAYMENTS VISA, MasterCard or Discover are the preferred credit cards. Please make checks payable to SAMBICA.

Credit Card # / Check #		Exp Date	
Name on Card	Authorized Signature		