Dimension Foundation Center, Inc.

6701 Clinton Manor Drive, Clinton Maryland 20735 301-856-1183x205 Web Site: outreachlifecenter.com

"OFF THE HOOK" BOYS & GIRLS SUMMER CAMP

Monday, June 15 - Friday, August 28, 2020 Ages: 6-9 & 10-13

\$\$25.00 OFF Registration from 1/12 – 3/29/2020 (\$30.00 OFF with valid Military ID) \$15.00 OFF Registration from 4/1- 5/31/2020 (\$20.00 OFF with valid Military ID)

\$155.00 per week (Breakfast, Lunch, Morning/Afternoon Snacks) Registration Fee: \$45.00 T-Shirt Fee \$12.00 Hours: 6:30am - 6:00pm Monday - Friday

PLEASE PRINT LEGIBI	LY		CAMP	ER REGIST	RATION	FORM							
Last Name		First Name			Middle Name			DOB		Age	Gender:	M□	F□
Child Home Address				Cit	y	State	, 2	Zip Code	Home Phoi		one		
Name of School		Present Grade							•				
List medical treated food	-												
Does your child use Nebu	ılizer, EPI Pen, İnsul	lin, etc)					criptio	n treatment	(Prescription	treatment mus	t remain at camp	until camp	er last day)
(1) Parant/Guardian Last N	Nama	E	irst Name	arent/Guard	ian Infor	MI		Relationshi	n to Chil	d			
(1)Parent/Guardian Last Name			riist Name			IVII		Keiauoiisiii	p to Cili	u			
Address (if different from child resident)			City			State		Zip Code					
(22 22222222222222222222222222222222222													
Work Phone			Home Phone					Cell Phone					
Email Address:	•					l.							
(2)Parent/Guardian Last Name			First Name					Relationshi	n to Chil	to Child			
(2)1 areni/Guardian Last Ivanie			1 HSt Ivanic			MI		Treatment to Child					
Address (if different from child resident)		City				State		Zip Code					
Work Phone		Home Phone						Cell Phone					
Email Address:													
 EMERGENCY INFORMATION	ON: Person(s) listed be	low is aut	thorized by	the parent/gua	ardian to p	oick up ch	ild at a	any time and/o	or to subst	itute for the	e parent/gua	rdian in t	he event
of an emergency. (To add addi	tional parent/substitute	turn shee	et over and l										
Last Name I		First Name				MI		Relatio		ionship to Child			
Address		City					Sta	State Zip		de			
Wada Dhana		II DI				CILD	N1						
Work Phone		Home Phone				Cell Phone							
Last Name F		Eirst Nama				MI			Relationship to Child				
Last Name		First Name				IVII		Relationship to Child					
Address		City						State Zip C		de			
Audress		Спу					Sia	tate Zip Code					
						a un							
Work Phone		Home Phone				Cell Phone							
				-				-					

Camp Weeks Available:

Wk#25 June 15-19 Wk#26 June 22-26 Wk#27 June 29-July 2 Wk# 28 July 6-10 Wk#29 July 13-17 Wk#30 July 20-24

Wk# 32August 3-7 Wk# 33 August 10 -14 Wk #34 August 17-21 Wk# 35 August 24-28 Wk#31 July 27-31

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"Off the Hook" Boys & Girls Summer Camp Policy 2020

Camp General Policy:

No camper will be allowed to enter leave OTHBGSC with anyone other than those persons authorized on the registration form or otherwise authorized in writing by the parent/guardian. Parent/Guardian must sign their child in and out daily. Campers must wear OTHBGSC T-Shirt daily (No Exception).

Camp Medical Treatment Authorization:

Parents are responsible for administering any medication. The staff will not administer medication that is taking daily. Camper with asthma must bring in nebulizer or inhaler for emergency situation. If my child becomes ill or involved in an accident and I or another adult whom I have authorized in writing to act in my absence cannot be contacted immediately, I authorized OTHBGSC staff to seek any necessary medical treatment from any hospital or licensed physician. I authorized OTHBGSC to take my child for treatment and authorize the treating hospital/physician to prove my child with any emergency medical treatment they deem necessary or appropriate (including anesthesia). I accept responsibility for any expenses incurred in medical treatment of my child, to the extent that such expenses are not covered by my health insurance.

Camp Release Statement:

I hereby release and hold harmless OTHBGSC, (collectively the ("Off The Hook" Boys & Girls Summer Camp") from any claims, obligations and liability of any kind its officers, employees and agents from any and all liability arising out of or connected in any way with my child's participation in activities with OTHBGSC program even though that liability may arise out of negligence or carelessness on the part of those parties. I hereby grant my child's use and participation in the facilities, program and activities of the center including, but not limited to: transportation to and from, participation in outdoor and off premises activities. I hereby agree to indemnify and hold harmless the OTHBGSC from and against any claims, injury, loss and liability arising from the acts of my child. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost or expense that they may incur as result of the death or any injury or property damage that said participant may sustain while participating in activities with OTHBGSC. I hereby grant OTHBGSC to use camper's likeness in photographs in any publication. I will not make no monetary claims against the camp for the use of these photographs.

Camp Payment:

Weekly camp payment is due upon arrival of camper on Monday or the first day of attendance for the week. Student will be unable to gain entrance to camp if payment is not received as stated above. All payment should state camper name to ensure proper credit and made payable to:

Outreach Christian Center or O.C.C. There is no refund for unexcused absence, inclement weather, unexpected vacation.

Acceptable payment method: heck, cash or money order.

Field Trips:

Filed trips are cash payment only and non-refundable. Field trips payments are required by organization to be paid by OTHBGSC prior to scheduled field trips event.

Camp Late Pick-up Charge:

Late pick starts at 6:01pm at the rate of \$15.00 every minute thereafter. Constant lateness may jeopardize camper's attendance at the OTHBGSC.

Personal Property:

OTHBGSC assumes no liability for damage or loss of personal property.

No Bully Zone:

If at any time it is proven that a child is being verbally or physically bullied. The person bullying that child will be dismissed immediately and band from returning to OTHBGSC for the duration of the summer camp.

Camp Discipline Policy:

In the event a child's behavior is a repeated behavior and cannot be corrected by the OTHBGSC Staff with a verbal warning or other form of behavior modification, a first incident report will be written to document and correct behavior. A copy of the report will be given to the parent/guardian the same day as the incident. 2. A second incident report will be written if the behavior is repeated by or new behavior problems occur with the same child. This report will follow the same process as the first, but a one or two day suspension could accompany this report, and no refund will be provided for suspended days. A copy of the report will be given to the parent/guardian the same day as the second incident. 3. A third incident report will be completed using the same process as the first two. The OTHBGSC staff will write this report. Staff will provide this report to the parent/guardian. Incident reports will be discussed privately with a parent/guardian by OTHBGSC staff and Director. Dismissal from a program can occur at this time. NOTE: Immediate dismissal from the program can occur at any time given severe circumstances.

I have read and agree to adhered to the policy and procedure governing the "Off The Hook" Boys & Girls Summer Camp.

Camper's Name:		
Parent/Guardian Name:	Date:	