

## Spring Camp 2018

Please fill out one application per child.

Child's name \_\_\_\_\_ Nickname: \_\_\_\_\_ M/F \_\_\_\_\_

Child's birth date \_\_\_/\_\_\_/\_\_\_ Age as of April 1 \_\_\_ (yrs.) \_\_\_ (mos.) Grade level (Fall 2017) \_\_\_\_\_

Parent's/Guardian's names \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Work phone \_\_\_\_\_ E-mail \_\_\_\_\_

Street address \_\_\_\_\_ City, state, zip \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Primary doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Does your child have any allergies/special needs? \_\_\_\_\_

How did you hear about Camp Windy Hill? \_\_\_\_\_

### Please indicate the camp you are registering for.

**Early Bird Registration:** Submit your application and fee by **March 1** and pay **\$130.00** per camp. After March 1, the fee is **\$140.00** per camp. Fee includes all materials and snacks.

\_\_\_\_\_ **Butterflies, Blossoms, Birds, and Bees**  
**April 2-5 (Mon-Thurs) 9:30 am-2:00 pm, ages 5-11**

**Extended Care? (please check)**  
A.M. \_\_\_ P.M. \_\_\_ Maybe \_\_\_

**Total Fee Enclosed:** \_\_\_\_\_ (The full fee is due at time of registration.)

**Extended Care:** Optional for all camps from 8:30-9:30 a.m. and 2-3 p.m. **\$5/hour per child payable the week of camp.**

**Payment:** Please mail completed application and check (**made to Camp Windy Hill**) to:  
Camp Windy Hill, Attn: Kathy Marty, P.O. Box 491, Washougal, WA 98671

**Withdrawals & Refunds:** A non-refundable deposit of \$40.00 is included in each camp fee. Cancellations made eight or more days before a session starts will be reimbursed the full fee less the \$40.00 deposit. No refunds will be made for cancellations made seven days or less before a session starts, unless the canceled spot can be filled before the start of a session.

**Please Note:** Applications will be accepted on a first-come first-served basis. Enrollment is limited to twelve children per camp. If a camp becomes full, a wait list will be available. If a camp does not reach a minimum enrollment of six children, we reserve the right to cancel the camp and refund all fees.

**Confirmation Mailing:** E-mail confirmation and directions to Camp Windy Hill will be sent upon receipt of application and fee.

**Questions?** Call Kathy at **(360) 977-8032** or email **kathy(at)campwindyhill.com**.

**\* Agreement to Hold Harmless/Image Release Form on next page \***

# Agreement to Hold Harmless/Image Release Form

## Camp Windy Hill

P.O. Box 491

Washougal, WA 98671

Kathleen M. Marty

kathy@campwindyhill.com

## Agreement to Hold Harmless:

**Camp Windy Hill** provides an art- and nature-focused camp for children, in both an indoor and outdoor setting. Activities in this program can include: drawing, painting, and other arts and crafts activities, woodworking, nature crafts, gardening, nature exploration, creative drama, running games, climbing trees, water play, and other physical activity, exploring the woods, and others.

Risks inherent in these activities include, but are not limited to:

- exposure to bees and mosquitoes
- risk from walking, running and playing
- falling from trees, slipping or tripping on branches or stones, and playing on uneven terrain
- falling into a small, shallow goldfish pond (maximum 2 feet deep)
- injuries from use of scissors, hand tools, or glue guns, and allergic reaction from exposure to paints and other art materials during arts and crafts activities (care is taken to use non-toxic materials)
- allergic reaction to food provided for snacks
- injuries from travel in, or proximity to, a car carrying other campers.

I, \_\_\_\_\_ of \_\_\_\_\_ (address), City of \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_ have legal custody of \_\_\_\_\_ and \_\_\_\_\_, minor(s) age (s) \_\_\_\_\_ and \_\_\_\_\_. I authorize Kathleen M. Marty of Camp Windy Hill, as well as the paid and volunteer camp instructors and counselors in whose care the minor child/children have been entrusted, to lead the above named children in activities of the type listed above. I understand that there are possible risks inherent with the activities at Camp Windy Hill. I nevertheless voluntarily assume all risks of loss, damage or injury that may be sustained through my child's participation in activities at Camp Windy Hill. I agree to hold Camp Windy Hill, Kathleen M. Marty, and other staff and volunteers, and landowners harmless for injuries which may occur during such activities or while being transported to and from such activity.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\* \* \* \* \*

## Image Release:

I give permission for my/my child's image to be used for advertising, on the Camp Windy Hill website, and on our Camp Windy Hill Facebook page.

PLEASE NOTE: For security reasons, names are not used with children's pictures in any of these places.

Signature \_\_\_\_\_ Date \_\_\_\_\_