

# CAMP PONEMAH REGISTRATION FORM 2022

## CAMP PONEMAH

Entering Kindergarten (Age 5 By 9/2022) - 7th Grade

Hampshire Hills Member  Non-Member



HH FRONT DESK ONLY

Date: \_\_\_\_\_

Time: \_\_\_\_\_ am/pm

Initials: \_\_\_\_\_

Camper's Name \_\_\_\_\_ Age \_\_\_\_\_ Sex: M F

Date of Birth \_\_\_\_\_ Grade Entering Fall 2022 \_\_\_\_\_

Home Address \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Best Phone \_\_\_\_\_

Parent /Guardian Name \_\_\_\_\_ Best Phone \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_ Best Phone \_\_\_\_\_  
(Not Guardian)

Email \_\_\_\_\_

2021 Camper? Yes \_\_\_ No \_\_\_ T shirt size: (Circle One) Youth : XS S M L Adult : S M L XL

**Would you like a 2022 Camp Ponemah Welcome bag?** Includes a water bottle, sunglasses, limited edition T shirt and a cinch sack.

**Only \$39!** Yes \_\_\_ No \_\_\_

Does your child have special needs? (explain) \_\_\_\_\_

Does child require an aid or special assistance during the school day? \_\_\_\_\_

**Allergies/Medical problems we should be aware of:** \_\_\_\_\_

Child's swimming ability \_\_\_\_\_

Alternate Pickup Person \_\_\_\_\_ Best Phone \_\_\_\_\_

### CAMP PONEMAH K-7<sup>th</sup> Grade

Monday-Friday

#### Extended Care

Yes  No

**4:00 -5:30 pm \$5/day/advance  
\$7/day/per diem**

#### Check Days Attending

#### Extended Care

Mon  Tue  Wed  Thu

*No Ext. Care On Friday*

### Check Sessions

**Week 1** 6/13-17

**Week 2** 6/20-24

**Week 3** 6/27-7/1

**Week 4** 7/5-8 *No Camp 7/4*

**Week 5** 7/11-15

**Week 6** 7/18-22

**Week 7** 7/25-29

**Week 8** 8/1-5

**Week 9** 8/8-12

**Week 10** 8/15-19

**Week 11** 8/22-26

### Offering Red Cross Certified Swim Lessons

3 Afternoons A Week  
\$15/Week

Do You Want Your Child To Attend  
Swim Lessons?

Yes  No

*Morning Free Swim Included In Camp Ponemah*

**\$50 per child per week deposit and  
\$35 registration fee required  
with registration form to reserve your spot.**

\$50 deposit applied to weeks your child will attend.  
All deposits and payments are non-refundable and  
non-transferable.

**FULL BALANCE FOR ALL WEEKS/PROGRAMS  
DUE JUNE 1, 2022**

Cash, Credit Card or

Check Payable to Hampshire Hills Athletic Club  
P.O. Box 404, 50 Emerson Rd, Milford, NH 03055

Lauren Desmarais, Director

lauren@hampshirehills.com | 603.673.7123, x272

# CAMP PONEMAH 2022

## Enrollment Agreement/General Permission Slip/Waiver

We/I have enclosed a \$35 registration fee along with a \$50 per week nonrefundable/nontransferable deposit that will be credited toward each week my child is registered for. We/I agree to pay all fees on or before June 1, 2022. We/I understand there is a \$25.00 fee for checks returned by the bank.

We/I understand to participate at Camp Ponemah, our child MUST be 100% toilet trained. If repeated mishaps occur, we will be asked to withdraw our child from camp. *Initial:* \_\_\_\_\_

Children's safety is paramount; therefore, anyone with special physical or sensory needs may be enrolled only after consultation with the Camp Director. We/I understand it is our responsibility to bring any special concerns about our child to the Director's attention at the time of registration. *Initial:* \_\_\_\_\_

Dismissals: We/I understand the Director reserves the right to withdraw any camper when in his/her judgment the camper's behavior interferes with the rights and safety of others, the smooth functioning of the group or activity, or violates the camp's principles of conduct. In such cases, no refunds will be given. *Initial:* \_\_\_\_\_

When/if discipline issues arise; steps are taken to remove campers from groups and to inform parents of subsequent actions and plans. *Initial:* \_\_\_\_\_

Withdrawal/Refund Policy: We/I understand that once Camp Ponemah accepts our registration, no refunds or transfers will be made for withdrawal, dismissal, illness, quarantine, failure to attend or incomplete attendance. *Initial:* \_\_\_\_\_

We/I give my child permission to participate in the Camp Ponemah Summer Camp program at Hampshire Hills Athletic club in Milford NH. In the event that none of the named emergency contact persons, parent or guardian can be reached, I hereby give permission to the staff of Hampshire Hills to administer whatever care he/she deems necessary for the safety and well being of my child. *Initial:* \_\_\_\_\_

We/I give my child permission to participate in all activities at Camp Ponemah including Field Trips and Inflatable Days to various locations. A list of dates and field trip locations are listed in the Parent Packet. Please note: field trip schedule is subject to change. Transportation is provided via school bus or passenger van, with a NH licensed and insured driver. *Initial:* \_\_\_\_\_

We/I authorize Camp Ponemah permission for our child's photo to appear in Camp brochures, videos, public and private advertising or any other promotional literature. *Initial:* \_\_\_\_\_

We/I understand that we are responsible for all the weeks we registered for and that we/I are responsible for the full balance due on or before June 1, 2022 based on our original registration form. *Initial:* \_\_\_\_\_

We/I understand that our camper's health form/immunizations are due with final payment. *Initial:* \_\_\_\_\_

### **Waiver and Release of Liability (Important ~ Read before signing)**

In consideration of being allowed to participate at the Facility known as the Hampshire Hills Athletic Club and Hampshire Dome, I do hereby assume full responsibility for any and all damages, injuries or losses that I may sustain or incur while attending or participating in any Facility exercise program, sport or physical activity.

For allowing me to use the Facility I agree, to the fullest extent permitted by law, as follows:

1. To waive all claims that I have or may have against the Licensors, Hampshire Hills Athletic Club, Eastern Olympic Sports, LLC, and Danielson Realty Trust, its shareholders, officers, directors, trustees, beneficiaries, employees, agents, servants, members, and volunteers arising out of my use of the Facility.
2. To release the Licensors Hampshire Hills Athletic Club, Eastern Olympic Sports, LLC, and Danielson Realty Trust, its shareholders, officers, directors, trustees, beneficiaries, employees, agents, servants, members, and volunteers from all liability for any loss, damage, injury or expense that I (or my child(ren)/ward(s)) may suffer, arising out of my use of the Facility, from any cause whatsoever, including negligence or breach of contract on the part of the Licensors, Hampshire Hills Athletic Club, Eastern Olympic Sports, LLC, and Danielson Realty Trust, its shareholders, officers, directors, trustees, beneficiaries, employees, agents, servants, members, and volunteers in the operation, supervision, design or maintenance of the Facility.

*Signature Parent/Guardian:* \_\_\_\_\_

*Date:* \_\_\_\_\_

# CAMP PONEMAH 2022

## Emergency Contact and Medical Information

Child's Name	Date of Birth	M	F
Parent's/Guardian's Name	Parent's/Guardian's Name	Sex	
( ) Home Phone	( ) Work Phone	( ) Home Phone	( ) Work Phone
Address	Address		
City, ST ZIP Code	City, ST ZIP Code		

## Alternative Emergency Contacts

Primary Emergency Contact (Not Guardian)	Secondary Emergency Contact (Not Guardian)
( ) Home Phone	( ) Home Phone
( ) Work Phone	( ) Work Phone
Address	Address
City, ST ZIP Code	City, ST ZIP Code

## Medical Information

Hospital/Clinic Preference

Physician's Name	Phone Number
Insurance Company	Policy Number

## Allergies/Special Health Considerations

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

I release Hampshire Hills & The Hampshire Dome and individuals from liability in case of accident during activities related to Camp Ponemah, as long as normal safety procedures have been taken.

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

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