

# Beyond Camp

## End of Summer Camp Registration

Date of Birth: \_\_\_\_\_  Boy  Girl

Grade: \_\_\_\_\_ School Attending: \_\_\_\_\_

Participants Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Person Paying: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Do you have any medical concerns for your child? No\_\_ Yes\_\_ Please Describe: \_\_\_\_\_

If yes, does your child have an Emergency or Asthma Care Plan on file at school? Yes\_\_ No\_\_

If student attends WAWM School District, checking "yes" will allow staff to access paperwork already on file at child's school

Does your child have any severe allergies? No\_\_ Yes\_\_ Please List: \_\_\_\_\_

If yes, has an Epi Pen been prescribed to your child? No\_\_ Yes\_\_

**Please note that an Epi Pen must be provided to staff while attending camp. Staff will not have access to emergency medications kept at child's school.**

Will your child need to take any medication while attending Camp? No\_\_ Yes\_\_

If yes, is this medication regularly taken at school? No\_\_ Yes\_\_

If student attends WAWM School District, checking "yes" will allow staff to access paperwork already on file at child's school.

If no, both a physician order form and parent consent form must be filled out in order for staff to administer medication.

All prescription medication must be provided in a pharmacy-labeled container with the student's name, medication name and dosage. Over-the-counter medication must be provided in the original packaging. Please contact the District Nursing Office at 604-4000 x 1107 with questions or if your student has medical needs and does not attend WAWM School District.

**EMERGENCY INFORMATION:** Person to notify in event of an emergency:

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Child will be picked up by : \_\_\_\_\_

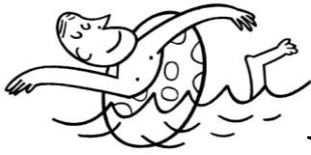
I give my permission for my child to participate in this program, including any fieldtrips offered. I understand that my child will take a school bus to all fieldtrips offered. If a medical emergency arises, the program staff will take all steps necessary. I give my consent for emergency medical care and treatment. I understand that 911 may be called for assistance and transportation of my child to an emergency facility. I have read and agree to the camp policies and procedures.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_



For Further information contact:  
Bobby Foreman 414-604-4968  
Trip Details on Reverse Side





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**LOCATION:** Horace Mann Elementary School 6213 W Lapham St, West Allis, WI 53214  
414-651-7104

**DATE:** August 13, 14, 15, 16 & 17  
(Weather appropriate clothes are needed for any onsite outdoor activities.)

**CAMP HOURS:** 7:00 am to 5:30 pm (There is a \$10 fee for late pickups.)

**CAMP FEES:** \$29.00 Resident / \$58.00 Non-Resident per day Fees will include any fieldtrip admission, transportation, on site activities and a snack.  
**CAMP FEES MUST BE PAID AT REGISTRATION**  
Make check payable to: WA-WM Recreation Department

\*No refunds will be available, if absent due to illness please call ahead and partial credit may be offered.\*

**REGISTRATION:** Registration is based on a first come, first served basis. Register in person at the WA-WM RCS Department located at 1205 S 70<sup>th</sup> St, 1<sup>st</sup> floor, over the phone 414-604-4900, online at [www.wawmrec.com](http://www.wawmrec.com), or by using the drop box located on the south side of the building. Hours of in person and over the phone registration are 8:00 am-5:00 pm Monday through Friday.

PLEASE DO NOT TAKE MONEY TO CAMP.

**FIELDTRIP:**

**If your child attends camp Monday - Thursday they should wear tennis shoes and their swimming suit under their clothes, bring a backpack, disposable bag lunch with a drink, water bottle, towel and dry clothes to change into at the end of the day. Don't forget sunscreen, bug spray and underwear!**

- Monday, August 13, 2018 Picnic and Swimming at David Schulz Aquatic Center  
Reg. # 210000.01 Bus leaves at 8:45 am and returns at 5:00 pm.
- Tuesday, August 14, 2018 Picnic Swimming at Wiberg Aquatic Center  
Reg. # 210000.02 Bus leaves at 8:45 am and returns at 5:00 pm.
- Wednesday, August 15, 2018 Swimming at Country Springs Water Park  
Reg. # 210000.03 Bus leaves at 8:45 am and returns at 5:00 pm.
- Thursday, August 16, 2018 Picnic and Swimming at Hoyt Park  
Reg. # 210000.04 Bus leaves at 8:45 am and returns at 5:00 pm.
- Friday, August 17, 2018 Fieldtrip to Henry Vilas Zoo  
Reg. # 210000.05 Bus leaves at 8:45 am and returns at 5:00 pm, please send a disposable bag lunch with a drink. As we are in for a long day at the zoo it would be best to wear tennis shoes and send along a water bottle and sun screen.



Total Amount: \$ \_\_\_\_\_ Check  Cash  Credit Card