

CAMP MCSAUBA REQUEST 2016

09223 Mt McSaubu Rd . 231-547-3253 (office) or 547-3267 (camp).
www.cityofcharlevoix.org . email: tomk@cityofcharlevoix.org

Camp McSaubu is a city-operated day camp for boys and girls, ages 5-13. Activities are age-based. Consequently, children are grouped together on an age basis. (NO EXCEPTIONS.) The day-camp operates from 8:30 AM—4:00 PM Monday-Friday.

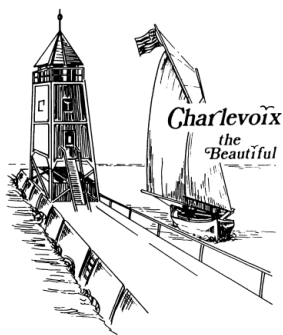
REGISTRATION REQUEST (you will receive confirmation if your request is accepted) Due to the new online registration format; ALL camp registration forms filled out ON PAPER are considered to be requests. If your week choice is already full online you will not be allowed to join over capacity. If your week choice is not full online you will receive an email confirmation letting you know that your child has been accepted into camp. For more information or registration in person please visit the Charlevoix Recreation Department. Please initial to acknowledge understanding of the above statement at Camp McSaubu Requests. INTITIALED _____

CHOICE (✓)	SESSIONS – Mon-Fri.	THEMES	DESCRIPTIONS
	Week 1 June 13– 17	Challenge Week	Welcome to camp! Show us what you got this week by trying some amazing new challenges including: “Minute to Win It”, Blind Obstacle Course, crazy fun relays, and much more!
	Week 2 June 20 – 24	Mt. McSaubu Amazing Race	Get ready for an adventure as groups compete against each other in our inaugural Mt. McSaubu Amazing Race! Help your team find clues, run into road blocks, and race against time to uncover hidden treasures.
	Week 3 June 27 – July 1	HAPPY BIRTHDAY AMERICA!	Enjoy a week full of 4 th of July activities celebrating America’s favorite pastimes! Create a windsock, red, white, and blue beaded bracelets, and play lots of fun games.
	Week 4 July 5– July 8	Mad Scientist Week	Uncover your investigative side this week as a Mad Scientist. We will explore science experiments inside and out, make predictions, test them out, and figure out what happened during the experiments.
	Week 5 July 11 – July 15	Hawaiian Hullabaloo	Say Aloha to summer as we get ready to go to the islands of Hawaii! Enjoy sand art, beach ball kickball, a limbo contest, and a hula party.
	Week 6 July 18– July 22	Mt. McSaubu Summer Games	It’s an Olympic year and what better way to celebrate it at Mt. McSaubu camp than with our own mini Olympic Games!
	Week 7 July 25– July 29	Holiday Extravaganza	Celebrate your favorite holidays of the year! There’ll be music, arts and crafts, and games from every holiday.
	Week 8 Aug 1 – Aug 5	Carnival Week	What would summer be like without a good ‘ole carnival? Come join in the fun as we paint faces and play carnival games.
	Week 9 Aug 8 - Aug 12	Crazy Splash Week	As summer camp comes to a close, we’re going to get Wet n Wild! Get ready to cool off in Lake Michigan.

The Camp is open to both residents and non-residents. A non-refundable fee of \$95 (resident) and \$110 (nonresident) per session is charged for each camper for Weeks 1–9. During the week of July 4th, the week will be shortened, the prices will be \$85 (resident) and 100 (nonresident). Fees may be transferred to another week (same camper) if given one weeks’ notice and space is available. Fees include insurance, arts & crafts, sports, a Camp T-shirt, and an afternoon snack. Fees must be paid in full prior to the start of each session. Payments no longer accepted at Camp; instead, fees must be paid to the Receipts Clerk (first floor City Hall) or mailed to Recreation Department 210 State St. Charlevoix, MI 49720.

Amount Owed _____ Pay by Check _____ Pay by Cash _____ Pay by Credit Card _____

Camp McSaubu accepts all campers without discrimination due to color, race, national origin, gender, or any other basis prohibited by law.



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Visa/MC/Discover _____ Credit Card Number _____ Expiration _____
CVC _____

For staff use only—Time/Date Received: _____

Birth ____/____/____ Camper's Name _____ Gender _____ Date of _____

Camp Week Attending: _____

If previously attended Camp McSaubia, indicate when (year/s) _____

Camper's T-shirt size (Circle One): Child Sm M L XL Youth Sm M L XL Adult Sm M L XL

Parent(s) or Legal Guardian Name _____

Parent(s) or Legal Guardian Address _____

City _____ State _____ Zip _____ Email address _____

Phone # Home _____ Work _____ Cell _____

Emergency Contact (if different from above) Name _____

Emergency Contact Address: _____

Emergency Phone: Home _____ Work _____ Cell _____

REQUIRED BY MICHIGAN LAW: If Camp McSaubia is authorized to release your camper to another adult, please indicate their name below

I authorize _____ to pick up my camper.

Similarly, if you are not able to pick up your camper, but have given your child permission to walk or bike home, please indicate by initialing "yes" in space provided. I authorize my camper to walk or bike home. Yes _____ No _____

HEALTH HISTORY

****Please answer the following questions by circling either "yes" or "no." If "yes," please explain below or attach additional sheet(s). This information, as well as the preceding information, is requested for the benefit of the camper and will not be used for any other purpose. *A copy of birth certificate is also required of all five-year-olds.**

Does your child have any allergies? Yes/No Does your child have any recurring or chronic illnesses? Yes/No

Does your child require a special diet? Yes/No Does your child take any special medications? Yes/No

Does your child have a record of any serious injuries or operations? Yes/No Does your child have any restrictions or require any special assistance? Yes/No

Explanation(s) _____

AUTHORIZATION: The above health history is correct to the best of my knowledge. The camper applying for Camp McSaubia has my permission to engage in all camp activities, except as noted in the space provided. If I cannot be reached in an emergency, I give my permission to the physician selected by the camp director to hospitalize, treat/secure proper treatment for, and order injections, anesthesia, or surgery for my child. Moreover, I have read and completed this application/registration and give my permission for all authorizations and releases indicated.

SIGNATURE of PARENT/GUARDIAN _____ DATE _____

I am an adult and guardian of this child and wish him/her to participate in the activities. As a condition to being permitted to utilize the facilities, services, and programs of the City of Charlevoix for any purpose, including but not limited to observation or use of the facilities and grounds, or equipment, or participation in any off-site program affiliated with the City of Charlevoix, I understand, acknowledge, agree, and represent that I have inspected and carefully considered the facilities and programs. I understand that even when every reasonable precaution is taken, accidents can happen. As a condition to participation by me or my children in City of Charlevoix activities, on my behalf and behalf of my children, I waive and release any claims or loss of injury incurred or suffered which I or my children might make against the City of Charlevoix, its sponsors, officers, employees, volunteers, or contractors as a result of participating in City of Charlevoix activities or using its facilities. I further agree to indemnify the City of Charlevoix against and hold it harmless from loss incurred as a result of claims against it based upon alleged actions or omissions by me or my children.

I understand that the City of Charlevoix is not responsible for personal property lost, damaged, or stolen, while program participants are using the City of Charlevoix facilities, on City of Charlevoix premises, or involved in City of Charlevoix programs.

I give my permission to the City of Charlevoix to use without limitation or obligation, photographs, film footage, or tape recordings, which may include me or my children's image or voice for the purpose of promotion or interpreting City of Charlevoix programs.

I acknowledge and agree with the waiver agreements set forth above.

SIGNATURE of PARENT/GUARDIAN _____ DATE _____

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