



SUMMER CAMP 2022

9:30AM - 2PM

I, _____ am registering my child/children _____
For BEAR SPS Summer Camp #____. I understand that reasonable care will be
taken to protect his or her safety. I release BEAR SPS from liability for any injury
caused by accident while participating in planned activities and games. I hereby
give BEAR SPS permission to see medical attention for my child in the event of an
emergency. I further agree to provide a phone number where I can be reached at
anytime during the event. *(initials)* _____

Phone numbers where I can be reached:

Phone 1 _____ phone 2 _____

-
- I agree to pick up my child/children promptly at 2:00 pm *(initials)* _____
- I agree that I will provide my child with lunch *(initials)* _____

Full Week Camp - \$225

1 Day - \$70 **Total Amount \$** _____

Method of Payment:

CASH

CHECK / CK# _____

VISA

DIS

MC

CAMP 1: JUNE 13 - 17

CAMP 2: JUNE 27 - JULY 1

CAMP 3: JULY 11 - 15

CAMP 4: JULY 25 - 29

CAMP 5: AUGUST 8 - 12

*For CC payments please come in to swipe the card *

Parent (please print) _____ Date _____

Parent (Signature) _____ Date _____