

kids adventures at candlewood Summer Camp Registration form 2024

(Please complete a separate form for each child)

Name of child:	_Birth Date:	Male: Female:
Is child a sibling of another child attending this summer? Yes: \Box N	lo: 🗆	Shirt Size: YS YM YL AS AM
Name of sibling:	_	
Home Address:		
Home Phone:		
Parent/Guardian #1:	Daytime Phone:	
E-mail:		
Parent/Guardian #2:	Daytime Phone:	
E-mail:		
Summer Ca	mp Program	
Adventure	Travel Camp	
Camp Day 9	years of age :00am-3:30pm por work	

Extended Day 7am-6pm

\$520 per week

Travels to water parks, museums, various kid friendly environments, active games, arts and crafts. Trips to a pool on Tuesdays and Thursdays.

Please place a \checkmark in the \Box below for your camp and sessions:

Week #	Session Dates	Travel Camp
1	June 17—June 21 Closed June19th	Camp Day □ Extended Day □ \$376 \$416
2	June 24—June 28	Camp Day 🗆 Extended Day 🗆
3	July 1—July 5 Closed July 4th & 5th	Camp Day 🗆 Extended Day 🗆 \$282 \$312
4	July 8 –July 12	Camp Day 🗆 Extended Day 🗆
5	July 15– July 19	Camp Day 🗆 Extended Day 🗆
6	July 22—July 26	Camp Day 🗆 Extended Day 🗆
7	July 29— August 2	Camp Day 🗆 Extended Day 🗆
8	August 5—August 9	Camp Day 🗆 Extended Day 🗆
9	August 12—August 16	Camp Day ONLY! \$470 Hours 8:30am to 4:30pm

Children who register for six or more of the nine weeks of summer camp, will have their registration fee credited to their final payment.

Name of Child:__

Necessary Paperwork:

*******Current Enrolled Families do not need to complete an Emergency Form or Health Inventory.* The following documents must be on file before a child may attend summer camp:

- Emergency Form
- Health Inventory (Part One, completed by Parent/Guardian and Part Two, completed by a Physician)
- Signed Parent Handbook Appendices
- Medication Authorization (Only required for students that require medication/epi-pens)

Tuition Due Dates

Payments for tuition	are due on the	dates listed below:
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	Registration Fee	1st Payment	2nd Payment	3rd Payment	
	\$50 per child Due with registration form	Weeks 1 – 3 Due June 1st	Weeks 4 – 6 Due July 1st	Weeks 7—8 Due August 1st	
	Tuition must be paid in full before child may attend camp unle	ss previous arrangements are	made in writing through the	Kids Adventures Office.	•
Sw	(unable to swim/no (son	ne limited (a	Intermediate average swimming bility)	 Advanced (skilled swimmer) 	

Application Policy

Camp operates on a weekly basis with no adjustments to fees for partial weeks. There will be no refunds or adjustments given for days not attended.

A registration fee of \$50 for each child is required to be submitted with a signed summer camp registration form for each child. (Check, money order, or completed authorization form is required to secure enrollment of your child/ren.)

Withdrawal/Change Policy

In the event of withdrawal from summer camp, the deposit and tuition are considered non-refundable once the application is accepted. There will be a \$25 change fee for any changes made before the tuition due date. No changes are accepted after the tuition due date.

Photo Release

Occasionally Kids Adventures will photograph or take videos of trips and activities during summer camp. These photos and videos are used on bulletin boards, in brochures, displays, advertisements, and/or our website, etc. I hereby give my permission for Kids Adventures LLC to use any photo or videos taken of my child for the purpose stated above. It is further understood that images of camp, its campers, and staff are the property of Kids Adventures LLC and may not be used publicly without the express written permission of Kids Adventures LLC.

Program

Transportation and admission for all scheduled trips is included in the tuition fee. Campers should bring a non-perishable bag lunch to camp each day unless otherwise notified. Refrigeration and/or cooking of lunches will not be available. Kids Adventures LLC reserves the right to change the schedule and/or activities at any time due to weather, schedule changes, MCPS facility changes, natural disaster, or any real or perceived threat to the safety and security of the Kids Adventures children or staff at the sole discretion of Kids Adventures LLC.

Child's Health Requirement

It is the responsibility of the parent, guardian, or financially responsible party to make Kids Adventures aware of any conditions that may restrict or affect the child's participation in the activities of this program. It is also the responsibility of the parent, guardian, or financially responsible party to complete all necessary Emergency Forms and Health Inventory Documents.

Agreement

I understand and agree to the policies and tuition obligation of Kids Adventures LLC. I wish to enroll my child in the Kids Adventures Summer Camp during the sessions indicated on this registration form. I understand that acceptance of this application by Kids Adventures LLC is contingent on space availability and the receipt by Kids Adventures of the required fees. I further understand that I shall be responsible for payment of fees and enrollment is subject to the completion of all necessary paperwork by the parent, guardian, or financially responsible party.

Signature:_

(Financially Responsible Party)

(Please Print First & Last Name)

Please initial to bill registration fee:

(Completed authorization form required for this option)

VELCOME TO SUMMER CAMP 2024!

For electronic bank drafts or credit card payments please complete the attached authorization form: Tuition Express Parent Authorization Please make checks payable to: Kids Adventures

E-mail Registrations to: Shannon@kidsadventures.com

OR

Mail Registrations to:

Kids Adventures 4809 Bready Rd. Rockville, MD. 20853



Appendix A

Liability Release with Parental Consent for Medical/Emergency Treatment and Transportation

CHILD'S NAME:	DATE OF BIRTH:
CHILD'S NAME:	DATE OF BIRTH:

The undersigned, being the lawful parent(s) and/or guardian(s) of the above child (or children), hereby consent to the participation by the child in all day care and/or summer camp activities conducted by Kids Adventures, LLC and to the participation of the child in all events related to said activities. The undersigned recognize(s) both that Kids Adventures, LLC takes many precautions in the supervision of the students in its care, and that certain risks exist in sending our child to any school, day care or summer camp.

The undersigned acknowledge that: (i) Kids Adventures, LLC is not responsible for damages to or theft of personal property brought to or left at any Kids Adventures program; and (ii) the undersigned is responsible for any damages or losses caused by the above child to the property or persons of Kids Adventures, LLC, its agents, employees, attendees, invitees and vendors.

The undersigned hereby further authorize(s) any of the staff, employees, agents and representatives of Kids Adventures to provide for, approve and authorize any health care at any hospital, emergency room, doctor's office or other institution, employ any physicians, dentists, nurses or other person whose services may be needed for such health care, review and if necessary disclose the contents of any medical records, execute any consent form required by medical, dental or other health authorities incident to the provision of medical, surgical or dental care to the child. Health care shall include, but not be limited to the administration of anesthesia, x-ray, examination, performance of operations, diagnostic and other procedures.

The undersigned(s) hereby further authorize(s) emergency transportation by either day care personnel or if necessary, by ambulance or other emergency vehicle. In any such event, I acknowledge that I will be notified as soon as practicable as to the location of my child.

If there is no medical emergency, the day care staff will first use reasonable efforts to contact the parent(s) and /or guardian(s) before administering or authorizing any treatment.

Notwithstanding other provisions in this consent form, Kids Adventures shall not have the authority to withhold or withdraw life-sustaining procedures for the child.

The day care and the summer camp are well child-proofed and the children are consistently well- supervised. However, accidents do happen. The undersigned assume(s) full responsibility for any and all risk of bodily injury or harm to the child, due to negligence of Kids Adventures or otherwise, associated with participation in the day care and agree(s) to release, waive, indemnify, defend and forever discharge and hold harmless, and covenant(s) not to sue, Kids Adventures and its staff, employees, and agents of and from all liability, claims, demands, damages, costs, expenses, actions and causes of action (including without limitation attorneys' fees and costs) in respect of death, injury, loss or damage to the child, or by the child, howsoever caused, arising or to arise by reason of or during the child's participation in the day care.

The undersigned expressly agrees that the foregoing release, waiver and indemnity is intended to be as broad and inclusive as is permitted by the law of the State of Maryland and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Lastly, and in furtherance of Kids Adventures overarching concern for the safety and well-being of the children entrusted to its care, the undersigned covenant and agree: (i) to provide Kids Adventures with the required up-to-date and complete emergency card, health inventories, immunization forms, about my child form and any other form that shall be deemed reasonably necessary and required in the future by Kids Adventures or any applicable federal, state or local governmental authority; and (ii) that it is the parents' or guardians' responsibility to promptly notify Kids Adventures, LLC regarding any legal custody or parenting time arrangements, or issues, acknowledging that it is not possible for Kids Adventures, LLC to heed the terms of any such arrangement of which it is not made aware. Unless the context clearly indicates otherwise, where appropriate the singular shall include the plural and the masculine shall include the feminine or neuter, and vice versa, to the extent necessary to give the terms used in this agreement the proper meanings.



Appendix A Continued

Liability Release with Parental Consent for Medical/Emergency Treatment and Transportation

The undersigned has/have read, understood and voluntarily sign(s) this Liability Release with Parental Consent for Medical/Emergency Treatment and Transportation, and agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

Parent/Guardian Signature:	Name(Print):	Date:
Parent/Guardian Signature:	Name(Print):	_Date:

Center Location:



Appendix B Parent Acknowledgement

Please sign below and return this page to the Kids Adventures LLC main office to finalize your registration for your child (children).

I have read and understand the Kids Adventures Parent Handbook and I agree to abide by its terms and conditions. I understand that failure to abide by these terms and conditions may result in dismissal from the program.

Parent/Guardian Signature:	Name(Print):	Date:
Child's Name (Children's Names):		
Center Location:		

Automated Payment Processing



Safe. Convenient. Easy.

We are excited to offer the safety, convenience and ease of Tuition Express[®]—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize (business name) <u>Kids Adventures LLC</u> to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

COMPLETE ONE SECTION ONLY

SECTION A (Credit Card)

ardholder Name			Phone #			
Cardholder Addres	S		City		State	Zip
ccount Number			Expiration Date	e		
ardholder Signatu	ure		Date			
ECTION B (Bank	Account)					
'our Name			Phone #			
ddress			City		State	Zip
ank or Credit Unio	on Name Ba	nk or Credit Union Address	City		State	Zip
outing Transit Nu	mber (see sample bel	ow) Account Number (see s	ample below)		Checking	Savings
uthorized Signatu	ıre		Date			
Your Name Any Street, Anytown Tel: (001) 555-0000		0001 DATE		F	OR OFFICIAL	USE ONLY
DEPOS Savings Ba Any Street, J	Anytown	Ť		Date R	eceived	
BĂNK Tel: (001) 55 RE 123456789	000123456789	MP 0001		Emplo	yee Signature	
ROUTING NUMBER	ACCOUNT NUMBER	CHECK NUMBER	80		-	esoftware.co ocare Software®, L



ADVENTURE TRAVEL CAMP K-5th Grade www.kidsadventures.com

Camp Week 1: June 17 - June 21 Wacky Week

Monday	Tuesday	Wednesday	Thursday	Friday
Player Fun Zone	Swimming e BEL AiR POOL	CLOSED Juneteenth Observed	SWIMMING C ROLLING CREST	CAMP DAY!
Camp Week 2: June 24 - June :	28 Theme: Down on the Farm			
Monday	Tuesday	Wednesday	Thursday	Friday
Clark's Elioak Farm	SWIMMING C ROCKVILLE POOL	Butler's Orchard Strawberry Picking	SWIMMING C VOLCANO ISLAND	CAMP DAY!
Camp Week 3: July 1 - July 5 1	Theme: Mission Impossible			
Monday	Tuesday	Wednesday	Thursday	Friday
Adventure Playground	Swimming C BEL AiR	Monster Mini Golf	CLOSED Independence Day	CLOSED Independence Day
Camp Week 4: July 8 - July 12	? Theme: Let's take a trip			
Monday	Tuesday	Wednesday	Thursday	Friday
Billy Goat Hike	Swimming e Rockville Pool	Adventure Park USA	Swimming e ATLANTIS	CAMP DAY!
Camp Week 5: July 15 - July 1	19 Theme: The Great Outdoors			
Monday	Tuesday	Wednesday	Thursday	Friday
Cabin John Regional	Swimming C BEL AiR POOL	Guppy Gulch or Atlantis Waterpark	Swimming e Rolling CREST	CAMP DAY!
Camp Week 6: July 22 - July 2	26 Theme: League of Champion	ns		
Monday	Tuesday	Wednesday	Thursday	Friday
Clopper Trail	SWIMMING C ROCKVILLE POOL	Zavazone	Swimming c Water mine	CAMP DAY!
Camp Week 7: July 29 - Augus	t 2 Theme: Steam			
Monday	Tuesday	Wednesday	Thursday	Friday
Watkins Regional	Swimming C BEL AiR	Port Discovery Baltimore, MD.	Swimming C PiRate's Cove	CAMP DAY!
Camp Week 8: August 5 - Augu	ust 9 Theme: Color Blast			
Monday	Tuesday	Wednesday	Thursday	Friday
All Camps Together Wheaton Regional Camp Cookout	Swimming C Rockville Pool	Wonderfly Arena	Swimming C SPLASH DOWN	ALL CAMPS TOGETHER! FOAM PARTY!!
Camp Week 9: August 12 - Aug	gust 16 Travel Only 8:30am t	o 4:30pm Limited Space Availabl	e	
Monday	Tuesday	Wednesday	Thursday	Friday
Air & Space Museum Chantilly VA. &	SWIMMING C ROLLING CREST	Roller Skating & Adventure Playground	Swimming C GREAT WAVES	Climb Zone & Hillandale Park

All Kids Adventures Summer Camp Programs are Closed August 19th through August 23rd for Back to School Staff Trainings.

Register for the new school year 2024-2025 www.kidsadventures.com