

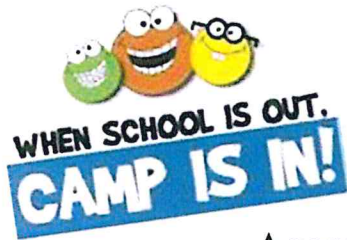


Incorporated Village of Lake Grove Summer Recreation Program 2021

*** Limited to Lake Grove Residents***

Lake Grove Recreational Hall

980 Hawkins Avenue, Lake Grove



Dates: July 5, 2021 - August 6, 2021

Time: 8:30am - 12:30pm

Trip days may have extended times

Ages: Students **currently** in Kindergarten to 7th Grade

Fee: \$420

Additional fees for trips (optional)

Registration Information



Open registration Monday-Friday from 9:30am – 4pm at Village Hall

Registration Deadline: June 7, 2021

****The Registration Deadline Will Be Strictly Enforced!****

Upon Registration You Will Need:

1. Payment of \$420 by check or money order payable to Inc. Village of Lake Grove



2. Proof of Age (Birth Certificate)

3. Proof of Residency

4. Immunization Record

Camper Registration Forms and Job Applications are available at Village Hall or www.lakegroveny.gov

For further information and the inside scoop on the Lake Grove Camp, like us on Facebook!

Camper Release Form

Lake Grove Recreation

Camper's Full Name: _____

Below, please neatly list the full names, phone numbers, and relationship to camper of any and all people (including parents) who are allowed to pick up your camper.

Thank you!

[illegible]

INCORPORATED VILLAGE OF LAKE GROVE SUMMER RECREATION PROGRAM

DATE - -

AGE	GRADE	GROUP
FOR OFFICE USE		

LAST NAME, FIRST	DATE OF BIRTH	E-MAIL
------------------	---------------	--------

ADDRESS	HOME TELEPHONE
---------	----------------

SCHOOL	GRADE AS OF 2020-2021 SCHOOL YEAR/AGE AS OF
--------	---

☐ VILLAGE RESIDENT FEE \$ _____ SHIRT SIZE _____ CHILD S M L ^{11/12} EXTRA SHIRT ☐
CHECK ☐ # _____ ADULT S M L XL XXL QUANTITY _____ SIZE _____

PARENTS'/GUARDIANS' NAMES _____

FAMILY DOCTOR _____ TEL. NO. _____

IN CASE OF EMERGENCY CONTACT _____ OR _____

TEL. NO. _____

CELL NO. _____

TEL. NO. _____
CELL NO. _____

KNOWN ILLNESSES, DISABILITIES, ALLERGIES, ETC. _____

MY CHILD HAS MY PERMISSION TO PARTICIPATE IN ALL ACTIVITIES **EXCEPT:** _____

DATE _____ SIGNATURE OF PARENT OR LEGAL GUARDIAN _____

RELEASE

I agree to assume full responsibility for any injuries which might occur to the above named participant () as a result of participation in any activities of the Lake Grove Summer Recreation Program, including but not limited to any claims for personal injuries resulting from or arising out of the negligence or intentional acts of parties other than the Village of Lake Grove and its employees.

DATE _____ SIGNATURE _____

Lake Grove Summer Recreation Program 2021

Medical Waiver

I authorize the staff of the Lake Grove Summer Recreation Program to act on my behalf according to the best judgment in any emergency situation requiring immediate attention for my child:

Name: _____

Parent/Guardian Signature: _____

Date: _____

Dear Parents and Guardians of Lake Grove Summer Camp,

We are asking permission to be able to post pictures of your children on our social media site as well as the end of the year video presentation. The social media site includes our Lake Grove Summer Camp Facebook page. We would like for you to be able to see what your children are up to at camp on a day-to-day basis. Please check yes or no below with your signature. Thank you for your time and cooperation.

Sincerely,

The Staff at Lake Grove Summer Camp



Camper's Name: _____

☐

Yes, I will allow my child's picture to be used

☐

No, I will not allow my child's picture to be used

Signature: _____