

CARDEROCK 2018 SUMMER FUN PROGRAM REGISTRATION

REGISTRANT REQUIREMENTS:

MUST BE AGE (6) OR ENTERING FIRST GRADE PRIOR TO THE ENROLLMENT DATE AND BE NO OLDER THAN AGE (11).

REGISTRANT: _____

AGE: (____) DATE OF BIRTH (____)(____)(____)

ADDRESS: _____

PARENT / GUARDIAN: _____

CONTACT NUMBER: (1) - (____)(____)(____) (2) - (____)(____)(____)

E-MAIL (PLEASE PRINT CLEARLY)

EMERGENCY CONTACT (1) _____ # (____)(____)(____)

EMERGENCY CONTACT (2) _____ # (____)(____)(____)

PER SESSION FEE \$275.00 PAID AT TIME OF ENROLLMENT.

TOTAL PAID \$ _____

SESSION (1) 6-18 THRU 6-22 _____

SESSION (2) 6-25 THRU 6-29 _____

SESSION (3) 7-2 THRU 7-6 _____

SESSION (4) 7-9 THRU 7-13 _____

SESSION (5) 7-16 THRU 7-20 _____

SESSION (6) 7-23 THRU 7-27 _____

CARDEROCK SPRINGS SWIM AND TENNIS CLUB, INC assumes no liability for injury or damages arising from participation in the program. I hereby approve my child's participation in the program activities and consent to the emergency treatment of my child on my behalf. To the best of my knowledge, there are no physical or other limitations, which will interfere with my child's participation other than those listed below.

FOOD/OTHER ALLERGIES OR SPECIAL CONCERNS: _____

PARENT / GUARDIAN SIGNATURE: _____