

# Summer Camp Registration

Please fill out one form per camper



**M F**

Camper's Name Gender Date of Birth School Grade in Fall

Home Address City State Zip Code

Home Phone Number Family E-Mail Address

1st Parent/Guardian Name Relationship Cell Phone Work Phone + Employer

2nd Parent/Guardian Name Relationship Cell Phone Work Phone + Employer

Please select which camp your child will be attending:

- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> <b>Critter Camp</b><br>June 13-17 Grades K-1<br>\$100 Members, \$130 Non-Members | <input type="checkbox"/> <b>Critter Camp</b><br>July 11-15 Grades K-1<br>\$100 Members, \$130 Non-Members | <input type="checkbox"/> <b>Wiggly Wonders</b><br>June 27-July 1 Grades 2-3<br>\$100 Members, \$130 Non-Members | <input type="checkbox"/> <b>Discovery Camp</b><br>July 25- 29 Grades 4-5<br>\$100 Members, \$130 Non-Members |
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**PAYMENT OPTIONS (please check one):**

- Check-** Enclosed • Payable to River Discovery Center
- Credit Card-** Phone: 270-575-9958 • In Person: 117 S. Water St. 42001
- Online: www.riverdiscoverycenter.org (must still submit registration form)

**CANCELLATION POLICY:**

- Refund, less \$10 (processing fee) for cancellations received and confirmed 2 weeks prior to start date. Cancellations received within 2 weeks of camp date will receive half of the registration fee.
- If camps are cancelled for any reason by the RDC, all fees paid will be refunded.

**IMPORTANT CAMP INFORMATION:**

**LUNCH, SNACK, WATER:** Campers will be responsible for bringing a self-contained lunch, a morning + afternoon snack, and re-fillable water bottle every day of camp.

**SUNSCREEN APPLICATION:** Campers must have sunscreen applied daily, PRIOR to drop off. The camper is responsible for bringing their own (spray on) sunscreen for reapplication. INSECT REPELLENT (spray on) is REQUIRED and each camper MUST bring their own for application by RDC staff.

**MEDICAL HISTORY:** Please list any medical or behavioral issue that our staff needs to be aware of, i.e., asthma, allergies, ADHD....

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**MEDICATION REQUIRED WHILE AT CAMP?**

YES NO

**Does camper use/wear any medical appliances?**

YES NO

**PLEASE ATTACH DETAILED INFORMATION TO THIS REGISTRATION FORM.**

*CAMPERS MAY HAVE THE OPPORTUNITY TO BE HIGHLIGHTED BY MEDIA AND RDC THROUGH VIDEO OR PHOTOGRAPHY (NAMES WITHHELD).*

- YES**, RDC has permission to use photo and video of my child.
- NO**, RDC DOES NOT have permission to use photos or videos of my child.
- Please **DO NOT** include my child in any photos, including group photos.

**EMERGENCY CONTACT:** If parents/guardians are unavailable, who should we call?

Name Relationship Home/Cell Phone Work Phone + Employer

**PICK-UP AUTHORIZATION:** Besides Guardians 1 & 2, who is authorized to pick-up your child from River Discovery Center?

<p><b>1</b></p> <p>Name <span style="margin-left: 200px;">Relationship</span></p>	<p><b>2</b></p> <p>Name <span style="margin-left: 200px;">Relationship</span></p>
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**PARTICIPATION AGREEMENT**

**WAIVER:** I acknowledge that participation in activities carries with it a risk of injury. I agree that the River Discovery Center, its agents and employees shall not be liable to me or my child for any injury or damage resulting directly or indirectly from my child's participation in River Discovery Center camps at any time preceding, during, or after camp is in session. I hereby discharge River Discovery Center, its agents and employees from all actions, claims, and demands I or my child may have for any such injury or damage. The River Discovery Center reserves the right to dismiss any camper deemed detrimental to the camp. Parents will be held liable for any damage caused due to reckless behavior. No refunds or deductions will be made for late arrivals or early departures.

**I do authorize that** all of the above information is correct and that my child is fully able to participate in all activities, without specialized attention or serious medical issues, while attending camp at River Discovery Center. I agree to notify River Discovery Center if the medical situation changes prior to the start of camp. I hereby consent and authorize the administration of all medical treatments advisable or necessary under the judgment of an emergency room physician or any other clinical physician with the understanding that I will be notified immediately.

Parent/Guardian Signature

**We feel it is important for your camper to understand what is expected of them at camp. Please read the below expectations to your camper and have them initial if they understand.**

**CAMPER EXPECTATIONS:** Campers are expected to: respect and follow the instructions of counselors and directors, to avoid profanity, pranks, racial slurs, and practical jokes, and avoid exploring dangerous areas. River Discovery Center does not tolerate violent behavior, loud or abusive language directed at instructors or fellow campers.

*As a camper I agree to follow the above guidelines and use common sense and good judgment regarding my behavior at camp.*

Camper's Initials

**For more information or to mail registration/payment, contact:**

**Krystal Watson**

kwatson@riverdiscoverycenter.org

**Phone: (270) 575-9958 Fax: 270-444-9944**

117 S. Water St. Paducah, KY 42001

**Assumption of the Risk and Waiver of Liability Relating to  
Coronavirus/COVID-19**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

**River Discovery Center (“RDC”)** has put in place preventative measures to reduce the spread of COVID-19 during its summer camp program and will adhere to KY Healthy at Work Childcare/Day Camp Guidelines; however the RDC **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **participation in an RDC camp could increase** your risk and your child(ren)’s risk of contracting COVID-19.

**We will adjust requirements as the state makes changes to safety guidelines.**

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By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending an RDC camp and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 during an RDC camp may result from the actions, omissions, or negligence of myself and others, including, but not limited to, RDC employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)’s attendance at an RDC camp or participation in RDC programming (“Claims”). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless RDC, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto, and I shall defend and indemnify RDC, its employees, agents, and representatives for any such Claims. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of RDC, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any RDC program.

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**Signature of Parent/Guardian**

**Date**

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**Print Name of Parent/Guardian**

**Name of RDC Participant(s)**