



## SUMMER ACTIVITES REGISTRATION 2024

Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Child's Age During Activity \_\_\_\_\_ Grade Fall 2024 \_\_\_\_\_

Shirt Size: YS YM YL AS AM AL AXL AXXL

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent's Name \_\_\_\_\_ Parent's Cell Phone \_\_\_\_\_

**\*\*Camp information will be communicated through text; schedule changes, weather alerts, etc.\*\***

Home Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

**Permission Agreement:** I hereby give permission for myself and/or my child to participate in the following activity(s). I agree to hold harmless the Edenton-Chowan Recreation Department staff, instructors, and/or agents from any liability related to loss, damage, or injury as a result of participation. ECRD is authorized to seek and consent for emergency medical treatment for the participation if deemed necessary. It is understood that ECRD provides NO health, medical, or accident insurance for participants.

Parent/Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*Parent signature required if the participant is under the age of 18\*\***

**Please Note:**

- All activities have minimum and maximum participation requirements
- Duplicate session registration will be allowed as space permits. Campers may register for one week if the camp is offered two weeks, and two weeks if the camp is offered three times.
- Registration fees listed are for Chowan County residents. Non-residents are welcome as space allows, an extra \$10 fee will apply. Fees must be paid to hold your spot.

Activity	Date	Time	Cost

For Office Use: Amount Paid \_\_\_\_\_ Date Paid \_\_\_\_\_ Received By \_\_\_\_\_