

Tkek Yeel Stem Camp registration

Name of camper:		Age:	DOB:	
Address:				
Guardian cont	tact information			
Name:	Relationship:	Cell Phone#:	Email:	
Emergency co	ntact information			
Name:	Relationship:	Cell Phone#:	Email:	
Name:	Relationship:	Cell Phone#:	Email:	
Who can pick	up the camper			
Name:	Relationship:	Cell Phone#:	Email:	
Name:	Relationship:	Cell Phone#:	Email:	
Name:	Relationship:	Cell Phone#:	Email:	
Name:	Relationship:	Cell Phone#:	Email:	
<u>List any and a</u>	ll allergies (if applicable)			
Are the allergi	es life threatening			

Signing below means when the camper gets dropped off, I understand that I will give it safely to the first aider. When I bring the medication, it must be in its original packaging with the dose and prescription labeled. If my child needs an epi-pen it must be on them at all times and have a note or verbally tell where it is located. I recognize that the camp coordinator/first aider is not allowed to give medicine, but is meant to supervise the camper taking the medicine and will be helped while doing so, as well as write down the dose and time of taking the medicine. When being supervised and helped, this includes opening the container, ensuring medications are taken on time, or administering emergency help as well as providing emergency administering to children, this could be;

•	An	epi-pen/Ep	inephrine
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- Auto injectors
- Asthma Inhaler
- Insulin
- Ext.

Parents Signature: Date:

Dietary restrictions (please list)

Will the camper need any special accommodations (please list)

Tkek Yeel Stem Camp recommends that your camper does not bring any valuable items. The Tkek Yeel Stem Camp will not be responsible for any lost items for the duration of the camp. Although the camp does not have cell phone service, there will be a Satellite phone readily available in case of an emergency.

Parents Signature: _____ Date: _____

The Tkek Yeel Stem Camp will be highly recommending that the campers wear a lifejacket. I agree and accept that my child is exempt from this recommendation. I understand that my child is a strong swimmer and will not need a life jacket in the lake at Tkek Yeel Stem Camp and have proof such as;

• A Red Cross Level 5 or up

• Attached to registration form

Parents Signature: _____ Date: _____

Is the Tkek Yeel Stem Camp allowed to take pictures of your child to send home at the end of camp?

Yes \square No \square

If I sign below, I don't give permission to the Tkek Yeel Stem Camp to use the children's pictures as promotion for the Tkek Yeel Stem Camp

Parents	Signature:
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Date:

Prep list for parents/ guardians

- Shoes and sandals (preferably with a back strap)
 - water shoes (optional)
- Change of clothes
- Swimsuit/towels
- Sweater
- Hat
- Change of socks
- Medicine (if needed)
 - In its original packaging
 - Turned into the first aider upon arrival
- Full water bottles (reusable)
- Backpack

Shirt sizes (select one size)

<u>Kids sizes</u>

Small	Medium	Large

Adult sizes

Small	Medium	Large	

What weeks will the camper be attending the camp? (You may select more than one week)

August <u>8th - 11th</u>	YES:	NO:
August <u>14th - 18th</u>	YES:	NO: 🗌
August <u>21st - 25th</u>	YES:	NO: 🗌

Signing this document, I understand and agree to abide by the operation rules as set by the Tkek Yeel Stem Camp. I recognize and acknowledge that there are certain risks of physical injuries. I agree to assume the full risk that my child may sustain damage of personal objects, loss, or injury as a result of participation while at the Tkek Yeel Stem Camp. I further understand that my signature authorizes my child to be treated by the first available medical facility and physician should they need, as well as authorize emergency contact listed above to pick up my child from the program and make decisions regarding my child if I am not available. I understand that every effort will be made to contact me in the event that such an emergency should take place.

Parents Signature: _____ Name: _____

Date: