

## Camp Oakwood 2019

Name  DOB  Grade

Address

Parent Name  Phone Number

Please submit payment in the form of cash or check. If you are an Oakwood family, you may choose to charge your account.

Cash  Check  Charge Account

### 9am-12pm

Baking Basics with Mrs. Batterjee: \$125 (\*1<sup>st</sup>-5<sup>th</sup>)

Extended Camp \$100 (12pm-6pm)  Yes  No

### 1pm-4pm

Steam Team with Ms. Thompson: \$125 (\*Pre-K-1<sup>st</sup>)

Extended Camp \$100 (7:30am-1pm)  Yes  No

### Oakwood Day Camp: Half Day \$125, Full Day \$175 (\*Pre-K-7<sup>th</sup>)

AM (7:30am-1pm)  PM (12pm-6pm)  Full Day (7:30am-6pm)

# This is for Non-Oakwood Families Attending Camp

## Medical Information:

Does your child have any allergies?  Yes  No

If yes, please list:

Does your child have medicine they have to take while at camp?  Yes  No

If yes, please list:

Does the Camp Director or representative of The Oakwood School have authorization to administer Tylenol/Ibuprofen to my child as needed?

Yes  No

Tylenol/Ibuprofen dosage (if applicable):

Would you like to provide the camper's insurance information in case of an emergency?  
If yes, please copy front and back of card to turn in with application.

Yes  No

## Photo/Video Publications Release:

I give permission for photographs, videos or written compositions of my child to be used for the above-mentioned purposes.

Yes  No

Signature (photo release):

Date (photo release):

<input type="text"/>
<input type="text"/>

## Emergency Contact (other than parent/guardian):

Emergency Contact Name (1)

Emergency Contact Phone

Emergency Contact Relation to Camper

<input type="text"/>
<input type="text"/>
<input type="text"/>

# This is for Non-Oakwood Families Attending Camp

**Emergency Contact Name (2)**

**Emergency Contact Phone**

**Emergency Contact Relation  
to Camper**


**Are there persons authorized to pick up your child? (ID Required):**

**1. Name:**


**Phone:**


**2. Name:**

**Phone:**

**Are there persons NOT authorized to pick up your child?**

**1. Name:**


**Phone:**


**2. Name:**

**Phone:**

**Consent to Health Care for a minor:**

I am the custodial parent having legal custody of the participant, a minor child. I authorize the Head of School, or his/her representative of The Oakwood School, Inc., an adult in whose care the minor has been entrusted, to do any acts which may be necessary or proper to provide for the health care of the minor child, including, but not limited to, the power

- (I) to provide for such health care at any hospital or other institution, or the employing of any physician, dentist, nurse, or other person whose services may be needed for such health care
- (II) to consent to and authorize any health care, including administration of anesthesia, x-ray examination, performance of operations, and other procedures by physicians, dentists, and other medical personnel except the withholding or withdrawal of life sustaining procedures.

By signing here, I indicate that I have the understanding and capacity to communicate health care decisions and that I am fully informed as to the contents of this document and understand the full import of this grant of powers to the agent named herein.

**Name:**

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**Date:**

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# This is for Non-Oakwood Families Attending Camp

## Camp Oakwood Waiver:

### Refund Policy:

In order to receive a full camp refund, the Camp Director must be notified at least 7 days prior to the start of the camp that your child will not be attending.

### Health Policy:

If injury occurs, parents/guardians will be contacted immediately at the phone numbers provided during this registration process. If a parent/guardian, or emergency contact cannot be reached Oakwood will contact the appropriate medical personnel to care for your child.

### Minimum Camper Cancellation:

Oakwood reserves the right to cancel any camp that does not meet the minimum number of campers set by the program staff. If a cancellation is needed, Oakwood will notify the purchaser the week prior and offer a suitable substitution if one is available. If no suitable substitution camps are available, Oakwood will offer a full refund of any paid fees.

### Behavior Policy:

All campers will be held to The Oakwood School student handbook policies and code of conduct while attending Camp Oakwood. The official handbook can be read by copying the link below and pasting it in to your browser:

[https://www.theoakwoodschool.org/uploaded/Portal\\_Forms/Student\\_Handbook\\_18-19\\_FINAL.pdf](https://www.theoakwoodschool.org/uploaded/Portal_Forms/Student_Handbook_18-19_FINAL.pdf)

Oakwood reserves the right to remove campers from any camp due to violations of policies in the student handbook without offering a refund.

By signing here, I indicate that I have the capability and understanding to expect my child to abide by the behavior and refund policies accepted by The Oakwood School.

**Name:**

**Date:**