

## Camp Registration/ Liability Form

**\*Please complete one form for each child to be registered\***

Thank you for your interest in our Summer Camp for Extraordinary Kids! Our camp is one of a kind and focuses on the special powers needed to support young children who are affected by cancer. Please print the forms and return to Nikol Downing, Social Worker at Chesapeake Regional Healthcare at the contact information below.

**How did you hear about the Camp for Extraordinary Kids?**

---

**Name of extraordinary kid:** \_\_\_\_\_

**Gender:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

Family member with cancer diagnosis (example: mother, father): \_\_\_\_\_

How can this camp help your extraordinary kid?

---

Please list any behavior or emotional concerns we should be aware of: \_\_\_\_\_

---

Please list any life-threatening allergies including food, drug, and environmental: \_\_\_\_\_

---

Please list all medical history including but not limited to: seizures, diabetes, heart conditions:

---

---

**Dietary Restrictions:** \_\_\_\_\_

---

**Parent/Guardian Name:** \_\_\_\_\_

Relationship to extraordinary kid: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Phone: 757-312-4262**

**Nikol.Garcia@ChesapeakeRegional.com**

**800 Battlefield Blvd., North, Chesapeake, VA 23320**

**Secondary Parent/Guardian:** \_\_\_\_\_

Relationship to extraordinary kid: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Emergency Contact**

Alternate Contact: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Phone: 757-312-4262  
Nikol.Garcia@ChesapeakeRegional.com  
800 Battlefield Blvd., North, Chesapeake, VA 23320

Doctor's Name: \_\_\_\_\_

Doctor's Phone: \_\_\_\_\_

Permission to contact doctor in case of emergency? YES NO

Is the parent(s) or emergency contact a CRMC affiliate (student, volunteer, or employee)? YES NO

Department Affiliation: \_\_\_\_\_

**PLEASE READ CAREFULLY THE FOLLOWING SECTIONS BEFORE INITIALING AND AGREEING TO TERMS. THIS DOCUMENT INCLUDES A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.**

### **Liability Release for CRMC Summer Camp**

I understand that, while CRMC Summer Camp is committed to thorough supervision of all camp activities, there are inherent risks in attendance at summer camp. I understand and assume all associated risks of personal injury or loss, bodily injury (including death), damage to, loss, or destruction of any personal property occurring in connection with or arising out of camp participant's participation in CRMC's Summer Camp.

I hereby release and discharge, indemnify and hold harmless The Regents of Chesapeake Regional Medical Center, a body corporate, and its member officers, agents, employees, and any other persons or entities acting on their behalf, and the successors and assigns for any and all the aforementioned persons and entities, against all claims, demands, costs, and expenses, and causes, of action whatsoever, either in law or equity, arising out of or in any way connected with any loss and/or bodily injury and/or disability, arising from participation in CRMC's Summer Camp program.

I authorize, in a medical emergency, that CRMC Summer Camp staff may seek emergency assistance and medical treatment for Participant student at the parent/guardian's expense. I certify that I have adequate insurance to cover any injury or damage camp participant may cause or suffer while participating, or I agree to bear the costs of such injury and/or damage myself.

### **SUMMER CAMP TERMS AND CONDITIONS**

#### **Age Policy**

Students must be at least 8 years old and no older than 12 years old to attend camp. Please respect the stated age guidelines and only register your child(ren) for camp if

Phone: 757-312-4262

Nikol.Garcia@ChesapeakeRegional.com

800 Battlefield Blvd., North, Chesapeake, VA 23320

they meet this criterion. Falsifying this information may result in your child(ren) being dismissed from summer camp.

### **Behavior Policy**

All camp participants will abide by the behavior guidelines provided to them with this application. If there is disruptive behavior by a camp participant:

- An attempt will be made to redirect the camp participant to more appropriate behavior.
- If inappropriate behavior continues, the camp participant will be reminded of behavior guidelines.
- If a child's behavior still does not meet expectations or is affecting the experience of other campers, the camp participant will be dismissed for the day from the program and the camp participant's parent or legal guardian will be contacted to pick up the camp participant.
- If inappropriate behavior is repeated on a different day, the camp participant will be dismissed from the remainder of the camp and the camp participant's parent or legal guardian will be contacted to pick up the camp participant.

### **Medication Policy**

CRMC Summer Camp will not administer any medications to camp participants.

### **Peanut Restrictions**

For the safety of children with peanut allergies, no peanuts or peanut products can be brought to camp.

### **Pick Up Policy**

A photo ID will be required for child pickup. Only individuals listed as parent/guardian or emergency contact will be authorized to pick up the camp participant. If a camp participant is not picked up at the prescribed time at the end of the camp day, a courtesy phone call will be made to the parent or guardian. If no response is received within 15 minutes, a repeat call to the parent will be made and a call to the secondary and/or emergency contact. If no response within 30 minutes, the local police will be contacted for assistance.

Having had sufficient time to review and seek explanation of the provisions contained above, by agreeing to the terms of CRMC's Summer Camp and marking my initials, I

**Phone: 757-312-4262**

**Nikol.Garcia@ChesapeakeRegional.com**

**800 Battlefield Blvd., North, Chesapeake, VA 23320**

voluntarily give consent and agree to the above Informed Consent, Permission, Release, Assumption of Risk and Summer Camp Terms and Conditions. **Initials:** \_\_\_\_\_

\_\_\_\_\_

Print Name	Signature	Date
------------	-----------	------

**Photo Release**

Participants in CRMC's events are sometimes photographed and videotaped for use in promotional and educational materials. I understand that, if I provide consent herein, such audio, video, film, and/or print images of Participant student may be edited, duplicated, distributed, reproduced, broadcast, and/or reformatted in any form and manner without payment of fees. I authorize CRMC to record and photograph Participant student's image for research, educational and promotional purposes.

**Please initial selection:** \_\_\_\_\_Yes \_\_\_\_\_No

**Chesapeake Regional Medical Center (CRMC)  
Cancer Treatment Center Summer Camp  
Camp Participant Behavior Guidelines**

Camp participants will act respectfully at all times during the camp and while participating in the programs. Camp participants are to behave in a mature, responsible, and respectful manner and comply with the camp instructor at all times. Foul language, name calling, and bullying will not be accepted.

- Always obey camp rules and staff.
- Show respect for the program representatives and volunteers and fellow camp participants.
- Running and excessive shouting is not allowed.
- Aggressive behavior including bullying of any kind will not be permitted at the camp.

If there is disruptive behavior by a camp participant:

**Phone: 757-312-4262  
Nikol.Garcia@ChesapeakeRegional.com  
800 Battlefield Blvd., North, Chesapeake, VA 23320**

CRH'S CAMP FOR EXTRAORDINARY KIDS REGISTRATION

- An attempt will be made to redirect the camp participant to more appropriate behavior.
- If inappropriate behavior continues, the camp participant will be reminded of behavior guidelines.
- If a child's behavior still does not meet expectations or is affecting the experience of other campers, the camp participant will be dismissed for the day from the program and the camp participant's parent or legal guardian will be contacted to pick up the camp participant.
- If inappropriate behavior is repeated on a different day, the camp participant will be dismissed from the remainder of the camp and the camp participant's parent or legal guardian will be contacted to pick up the camp participant.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Participant Child's Name: \_\_\_\_\_

**Phone: 757-312-4262**

**Nikol.Garcia@ChesapeakeRegional.com**

**800 Battlefield Blvd., North, Chesapeake, VA 23320**