

Agreements

Registration

A non-refundable deposit is required at registration in the amount of One Hundred Dollars due no later than June 13, 2008 for the first session and July 3, 2008 for the second session. All registration forms are to be completed and on file prior to camp date.

Dates: June 16 - June 27, 2008 Monday –Friday 9:00 a.m.-12:00 p.m.

Dates: July 7 - July 18, 2008 Monday –Friday 9:00 a.m.-12:00 p.m.

Location: CSUMB Reading Center, Bldg. 59, 4205 A St nearest Cross Street 7th Avenue., Seaside, CA 93955

Fees: \$300

Illness/Injury/Emergency

Campers who have been ill, had a fever, vomited or had diarrhea during the previous 24 hours may not be brought to the camp that day. If a camper becomes ill or injured at the CSUMB Summer Reading Camp, parents/guardians will be notified as soon as possible and they will pick up their child immediately or will arrange for the immediate pick up of the child by an authorized adult.

In case of emergency or life-threatening situation-as determined by the staff, the paramedics will be called. Emergency medical personnel will determine the appropriate course of action and parents/guardians will be responsible for all of the child's emergency medical and dental expenses.

Parents/guardians will keep all contact and emergency information current.

Medications

CSUMB Reading Center Summer camp staff will not administer medications. Campers may not medicate themselves. If a camper requires medication, parents/guardians are to administer medication prior to the camper arriving at camp.

Support Staff Consent

CSUMB Reading Center has a staff consisting of a Reading Specialist, University Student Tutors, Front Desk Staff and University Faculty working within the program. In addition, student interns and volunteers may work within the program. By registering a child at the CSUMB Reading Center Summer Camp, a parent/guardian gives permission for them to interact with these support staff.

Snacks

Campers may bring a healthy snack.

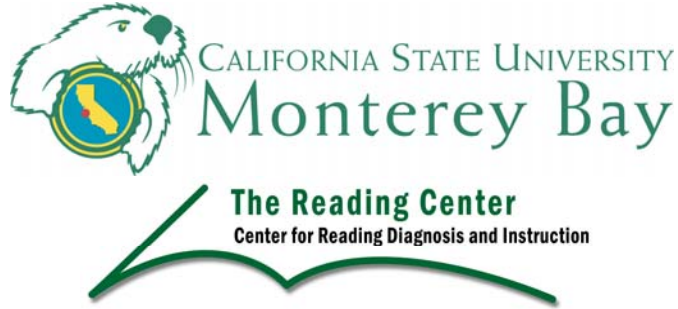
Promotional Release

CSUMB Summer Reading Camp activities and events may be photographed or videotaped for publication in CSUMB Reading Center informational and promotional materials. Campers may appear in these photographs or videos. If you do not wish for your child's image to be used for this purpose, please initial here _____, _____

Waiver of Liability

Client agrees to hold harmless The Reading Center and CSU Monterey Bay, its officers, employees, students and agents from and against all liability, loss, expense (including reasonable attorney's fees and court costs), or claims for bodily or personal injury or damage to property, including loss of use thereof, arising out of the performance of this Agreement.

Parent/Guardian Signature: _____ Date _____



Summer Camp Health Form

Camper Name: _____

Birthdate _____

Allergies and associated reactions (including allergies to any medications)

1. _____

2. _____

3. _____

Disabilities (physical and learning)

1. _____

2. _____

3. _____

Special needs or considerations

1. _____

2. _____

3. _____

Parent/Guardian Signature: _____ Date _____