



Hill Country
SPCA

Hill Country SPCA
2981 S. Hwy 16 Fredericksburg, TX 78624
Phone:(830)990-9085 Fax:(830)990-9080
Programs@hillcountryspca.com

Winter Camps 2017-2018 Registration

Name: _____ Grade (2018-2019) _____ Age: _____

Home Address: _____ City: _____ Zip: _____

Parent/Legal Guardian(s): _____ Relationship: _____

Cell: _____ Phone: _____ Email: _____

Emergency Contact & Individuals Authorized to pick up my Child:

Name: _____ Cell: _____ Relationship: _____

Name: _____ Cell: _____ Relationship: _____

**Please add additional contacts on the back, as Campers will not be released to those without authorization.*

Does the camper take any medication? Yes or No Does the camper have any food allergies? Yes or No

If yes to medication or food allergies, please explain: _____

_____ **Please note campers with severe food allergies will be asked to bring their own lunch/snacks.*

Does camper have animal allergies? Yes or No If yes, please explain: _____

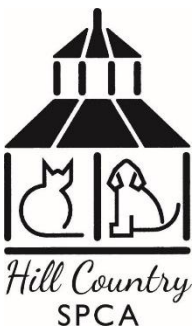
Any physical limitations or other needs: _____

Which camp session will your child be attending Santa Paws- Dec. 9th(\$50) Bark Break - Jan 4th & 5th (\$100)

Parent/Legal Guardian Signature: _____ Date: _____

**Please note that all payments over the phone have a \$4 processing fee per camper.*

<u>STAFF USE ONLY</u>			
Date Received: _____	Staff: _____		
Payment- Cash: _____	Check # _____	Credit/Debit: _____	Date: _____
Forms- Registration: _____	HCSPCA Liability: _____		



Hill Country SPCA
Winter Camps Waiver 2018
Dec. 9th, Jan. 4th & 5th

In consideration of being allowed to participate in the Winter Camps Program at the Hill Country SPCA, I acknowledge and agree that: I, _____, the parent/legal guardian of _____, understand the nature of the activities that my child will participate in. I also understand the nature of domestic shelter animals and that their behavior is sometimes unpredictable which can give rise to risks such as personal injury, disease, illness, or property damage. Knowing this, I and anyone who might claim on my behalf, including heirs, guardians, legal representatives, or assigns, release and discharge the Hill Country SPCA, its officers, directors, employees, volunteers and all others affiliated with the Hill Country SPCA from any and all claims and liability of any kind arising out of personal injury, disease, illness, or property damage resulting from my child's participation in activities on and off campus during the Winter Camps Program.

I agree to inform my child to perform only those tasks assigned, observe all safety rules, and use care in their participation in the Winter Camps Program.

I agree that my child may be photographed, videotaped or recorded and that said photographs, videos or recordings may be used on the Hill Country SPCA website or in any editorial, educational or promotional material produced and/or published by the Hill Country SPCA. I understand that my child will not receive compensation for the use of these and that my child will not be given notice of when these materials are used.

I certify to the best of my knowledge, that my child's current physical condition is satisfactory for participation in the Winter Camps Program, and that he/she is free of any health problem that would affect his/her ability to participate. I acknowledge that loss or damage to my child's personal property used while participating in the Winter Camps Program is not reimbursable. I hereby authorize and give my consent for medical care to be given in an emergency situation to the above named child while participating in the Winter Camps Program. I have listed above all of my child's known allergies, all of my child's physical limitations and any special needs that my child might have. In addition, I have no knowledge of any medical condition that would prevent my child from participating in the activities during Winter Camps.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILTIY AND I SIGN IT OF MY OWN FREE WILL.

Parent/Legal Guardian Signature: _____ Date: _____