

# HANCOCK SUMMER RECREATION - full day offering

2017 Registration Information

July 5, 2017 to August 4, 2017

## SUMMER RECREATION PROGRAM:

The Hancock Recreation Committee is proudly offering a \*new\* full day outdoor summer recreation program for resident and non-resident boys and girls 5-13 years of age. Children participate in active outdoor activities, such as games, arts and crafts, nature activities, and swimming at Norway Pond. The summer recreation program is five weeks, Monday - Friday, beginning July 5<sup>th</sup> to August 4<sup>th</sup>. The summer recreation program begins daily at 9:00am at the Hancock Elementary School playground and ends at 3pm. Each week has a theme:

WEEK 1 (July 5-7): SCIENCE (Ice cream making, SLIME, and sand volcanos)

WEEK 2 (July 10-14) : CAREER/SERVICE (Main Street businesses, Police/Fire, Town Library)

WEEK 3 (July 17-21): NATURE (Harris Center, bird feeder construction, Cornucopia Project and cooking)

WEEK 4 (July 24-28): MOVEMENT & SPORTS (pickleball, soccer, dance, flag football, basketball, yoga)

WEEK 5 (July 31-August 4th): HANCOCK HISTORY (Meetinghouse, Bell Tower, Historical Society)

## NEW FOR 2017:

### PLEASE REGISTER YOUR CHILD AT THE TOWN OFFICE BY JUNE 30TH.

This season we offer two enrollment types:

- **Full Summer Rate:** \$125.00 per first child registered, \$100.00 for each additional sibling. \$150.00 per non-resident child. *We recognize that some children may not be able to attend all days or weeks of summer rec program. Unfortunately, we cannot offer a decreased rate to accommodate those circumstances. This program is offered at a highly subsidized rate.*
- **Single Day Rate:** \$15.00. *Registrations for single day enrollment will be accepted on a space available basis and must be received at least 2 business days prior to attending. Please register your child at the Town Office. Fees and registrations cannot be accepted on the same day as the start date.*
- **Counselor-In-Training:** FREE - offered to 14 year olds. *They can receive community service hours or volunteer hours for their commitment of time. Selection of CIT's is at the discretion of the rec chair and the rec director. Please email Emily Daniels for more information at: [emilyreaddaniels@msn.com](mailto:emilyreaddaniels@msn.com)*

## WHEN AT CAMP:

- Please be certain your child has a water bottle, lunch, snack, swimsuit, close toed shoes (e.g. crocs, sneakers, etc) and towel with them for each day of camp.
- We are going to be having LOTS OF FUN, so please have your child(ren) leave their electronic devices at home - they are not permitted.
- Please bring a full bottle of sunscreen labeled with your child's name on the first day they attend camp. Sunscreen, medications, and bug spray will be kept with the director at all times. Sunscreen will be applied upon arrival at camp and during the day, unless otherwise determined (e.g. indoor day due to weather)

## REGISTRATION FORM

*Please complete and/or include information for a Counselor in Training (CIT)*

### Participant Information (Family)

Child's Name (1)	Age:	DOB:
Child's Name (2)	Age:	DOB:
Child's Name (3)	Age:	DOB:
Child's Name (4)	Age:	DOB:
Mailing Address:		
Parent/Guardian Name:	Name:	
Phone:	Phone:	
Email:	Email:	
Please list people authorized to pick up your child:		

*Please list 2 people who can assume responsibility for your child if you cannot be reached in an emergency:*

### EMERGENCY INFORMATION

Emergency Contact (#1):

\_\_\_\_\_ (phone) \_\_\_\_\_

Emergency Contact (#2):

\_\_\_\_\_ (phone) \_\_\_\_\_

*Please inform us of any medical information that may be relevant*

### MEDICAL INFORMATION

Allergies (please list): \_\_\_\_\_

Medications (please list, if administered at camp): \_\_\_\_\_

Relevant Medical Conditions:

Child's Physician:

Name: \_\_\_\_\_ (phone) \_\_\_\_\_

Is there anything you would like us to know about your child (ren)?

For planning purposes, please **CIRCLE** the days your children **WILL** attend:

Monday	Tuesday	Wednesday	Thursday	Friday
July 3 <sup>rd</sup> NO CAMP	July 4 <sup>th</sup> NO CAMP	July 5 <sup>th</sup>	July 6 <sup>th</sup>	July 7 <sup>th</sup>
July 10 <sup>th</sup>	July 11 <sup>th</sup>	July 12 <sup>th</sup>	July 13 <sup>th</sup>	July 14 <sup>th</sup>
July 17 <sup>th</sup>	July 18 <sup>th</sup>	July 19 <sup>th</sup>	July 20 <sup>th</sup>	July 21 <sup>st</sup>
July 24 <sup>th</sup>	July 25 <sup>th</sup>	July 26 <sup>th</sup>	July 27 <sup>th</sup>	July 28 <sup>th</sup>
July 31 <sup>st</sup>	August 1 <sup>st</sup>	August 2 <sup>nd</sup>	August 3 <sup>rd</sup>	August 4 <sup>th</sup>

Once your child is at the recreation program, (s)/he must remain there and participate in activities until completion of the program. At that time, the child will be picked up by an authorized person or will bike/walk home if permission has been given. All children must sign in upon arrival and sign out upon departure. The summer rec program ends promptly at 3:00pm. Please pick your child up on time. Staffers cannot go home until your child has been signed out.

Participation in this sport/activity may involve risk of injury. As a parent, guardian, or participant, I am aware of these hazards and my ability to participate. In consideration for participation in the program listed above, I hereby for myself, my heirs, executors and administrators, waive and release all rights and claims against the Town of Hancock, its officers, employees, agents, volunteers and supervisors, except in the case of their sole negligence, from all losses, damages, fees and other expenses, arising out of or in connection with participation in this activity. In addition, I give my permission for the agents, servants, employees, and officials to the Town of Hancock to use their sole discretion in seeking and providing treatment for the child(ren) by qualified medical personnel in the event that the above named parent/guardian cannot be reached at the phone numbers provided. I understand the cancellation/refund policy of the Town of Hancock Recreation Program.

I authorize the Town of Hancock to reasonable use of any and all images and statements

I give permission for my child to bike or walk to and from the Hancock Summer Recreation Program at the completion of the camp day.

By signing this form, I agree to the above terms and conditions and verify that the information provided on this form is correct:

Child's Name:	Child's Name:	Child's Name:	Child's Name:
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Parent/Guardian Print

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Parent/Guardian Signature:

Date:

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Payment must be made at the time of registration. Bring payments and registrations to the Hancock Town Office, 50 Main St Hancock, during normal business hours Monday – Friday 8:30am – 4:30pm and Mondays 6:00pm – 9:00pm - **OR** - Mail registration with payment to Town of Hancock Recreation PO Box 6 Hancock, NH 03449. For questions please call 525-4441 or email townadmin@hancocknh.org. **Make checks payable to “Town of Hancock”**

**No refunds for cancellation of weeks or days after July 5th. A \$30 fee for insufficient funds will be charged for returned checks.**

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