



PARK RIDGE DAY CAMP

It's finally here....

Registration for summer of 2014.

Monday, June 23, 2014 – Friday, July 25, 2014

This year, we are excited to announce
Friday "SWIM DAYS" at the **Park Ridge Municipal Pool!**
Activities will also be held at Colony Field-adjoining the pool.

On Wednesdays (excluding 7/16/14) we will be meeting at
Montvale Lanes for unlimited Bumper Bowling!

Best of all...

**Bowling and Swimming
are included in this year's camp tuition!**

In addition to the above, campers will be able to enjoy some camp favorites including:

Organized Sports of All Sorts
Live Shows

Arts and Crafts
DQ Days

***...All for approximately \$6.00 per day!!**

**Be sure to register online by May 16, 2014 in order to take
advantage of our**

EARLY BIRD Discount!!

OR...at

Park Ridge Borough Hall
53 Park Avenue
Park Ridge, New Jersey

* Based on Early Bird registration.



PARK RIDGE DAY CAMP

Park Ridge residents Rob Cerabona and Cheryl Shaw are thrilled to be returning to the Park Ridge Day Camp. The summer of 2014 brings some new and exciting developments for our day camp program. We are pleased to announce SWIM DAYS that will take place on Fridays (excluding July 4th), at the Park Ridge Municipal Pool. We have also expanded our field trip options to include Bounce Trampoline in Valley Cottage, NY, and Monster Mini-Golf in Nanuet, NY. Programming will also include some favorites such as Sports of All Sorts, Arts and Crafts, and the annual camp Talent Show! As always, it is our goal to create a safe and stimulating camp experience while maintaining some of the long-standing day camp traditions that the children love!

This summer, camp will begin on **Monday, June 23, 2014**, and will last for five weeks until Friday, July 25, 2014. In observance of Independence Day, Camp will not be in session on Friday, July 4, 2014. This year, the camp day will begin at **8:30 A.M.** and will end at 12:00 P.M. On Mondays, Tuesdays and Thursdays, camp will be held at Memorial/Davies Field. On Wednesdays, (except 7/16/14) camp will be held at Montvale Lanes with a start time of 9:15AM. On Fridays, camp will be held at the Park Ridge Municipal Pool and at the adjoining Colony fields. Shortly before camp begins, details regarding drop-offs and pick-ups will be communicated to all camp families.

The PRDC program is open to children who reside in Park Ridge for grades K-7. It is also available to children who attend school in Park Ridge, but live out of town, as long as the child(ren) are sponsored by a borough resident.

Enclosed in this packet, is information about registration, the registration form, all the required release forms and the code of conduct form. Please read every page thoroughly as there are some changes from last year. After you have read the packet over and have complete registration, **please email us at summercamp@parkridgeboro.com** so that we can update our email list. This will enable us to communicate with you regarding camp happenings.

Should you have any questions or concerns please call borough hall at 201-573-1800. For additional forms, please go to borough hall or visit the website parkridgeboro.com and follow the day camp link for downloadable forms.

We are looking forward to a fabulous, fun-filled summer!

Sincerely,

Cheryl Shaw and Rob Cerabona
summercamp@parkridgeboro.com

**Details, times and dates are subject to change.*



PARK RIDGE DAY CAMP

Registration Checklist

All completed forms should be submitted online or dropped off to Borough Hall by May 16th, 2014.

- Payment in full (check made to Borough of Park Ridge)
- Proof of residency (this may be a copy of child's report card or paperwork from the school with the child's name and address, etc)
*** (Out of town residents please provide a letter of sponsorship)
- Recent photo of the child- **This is mandatory for security reasons.**
- Registration form (please attach photo to this form)
- Medical Information and Release form
- Release Forms: Bike and Walk / Photography release form
- N.J. Recreation Code of Conduct form

Fees:

Early Bird Fee (On or Before May 16th, 2014)

Park Ridge Resident	Non-Resident
K-7: \$175 per camper,	K-7: \$250 per camper
Families with 3 or more campers \$175 for the 1 st child and \$150 for additional siblngs.	

Registration Fee (May 17th, 2014 and thereafter)

Park Ridge Resident	Non-Resident
K-7: \$195 per camper	K-7: \$250 per camper

In order to receive the Early Bird Rate, **registration forms must be received by Borough Hall on or before Friday May 16th, 2014.**

**Details, times and dates are subject to change.*



PARK RIDGE DAY CAMP

Registration Form

Child:

First Name: _____ Last: _____

Home Address: _____

Town, State, Zip: _____

Home phone: _____ Male / Female

DOB: _____ Age: _____ **Grade in Sept. 2014:** _____

School entering this coming September:

____ EAST BROOK ____ WEST RIDGE ____ PRHS ____ OLM OTHER: _____

T-shirt size: ____ Child ____ Adult / ____ XS ____ S ____ M ____ L ____ XL ____ XXL

Parents/Guardians:

Name(s): _____ Email: _____

If different than above.... Home phone: _____

Home Address: _____

Town, State, Zip: _____

Mom Cell: _____ Dad Cell: _____

Mom Work: _____ Dad Work _____

Are the people named above authorized to pick up your child at dismissal? ____ Yes ____ No

Emergency Contact 1: (Other than parent/guardian who are always called first!)

First Name: _____ Last: _____

Home Address: _____

Town, State, Zip: _____

Home phone: _____ Cell: _____

Is this person authorized to pick up your child at dismissal?: ____ Yes ____ No

Relationship to child: _____

Emergency Contact 2: (Other than parent/guardian who are always called first!)

First Name: _____ Last: _____

Home Address: _____

Town, State, Zip: _____

Home phone: _____ Cell: _____

Is this person authorized to pick up your child at dismissal?: Yes No

Relationship to child: _____

Please list **any additional parents, guardians, siblings and others** who are authorized to pick up your child at camp dismissal:

Name	Relationship	Phone Number

For the protection of the campers, only list people that can pick up this camper. A detailed note must be sent to the camp office staff to indicate any changes to this pick-up and release list. **Safety comes first!**

FEEDBACK

We would love to hear from you! Any suggestions and/or feedback you would like to share regarding camp programs, procedures and/or routines is encouraged and appreciated!

I certify that the above information is current and accurate.

(Please Print)

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____



PARK RIDGE DAY CAMP

Trip Registration

MONSTER MINI GOLF IS CLOSED!

Dear families:

We are pleased to announce that we will be continuing our field trip program for the 2014 summer. Please note: There are additional registration forms and fees associated with the Monster Mini Golf, Gravity Vault and Bounce Trampoline Sports trips.

PLEASE NOTE THE FOLLOWING:

- Registration for ~~Monster Mini Golf~~, Gravity Vault and Bounce Trampoline Sports is due by **June 15th, 2014**.
- All registrants must be registered for the current year at the Park Ridge Summer Day Camp.
- LIMITED SPACE IS AVAILABLE FOR ~~Monster Mini Golf~~, Gravity Vault and Bounce Trampoline Sports. Registration will be accepted on a first come, first served basis.
- Trips to Bounce, Monster Mini Golf and Gravity Vault will be held rain or shine. Even if camp is not in session that day.
- New this year, pick up/drop off for bused trips (Monster Mini Golf, Gravity Vault and Bounce Trampoline Sports) will be at **the Park Ridge High School Mini Gym on Wampum Road**.
- There is NO FEE for bowling or swimming. Bowling/ Swim days are included in camp registration fee for ALL campers! Pickup/drop off for bowling days will be at Montvale Lanes. Pick up/drop off for pool days will be at **the Colony Field. Parents will be asked to drop off via Colony Avenue Pool entrance.** Details will be communicated to via email to registered campers.
- In the event of inclement weather, pool days may be cancelled.
- Camp T-shirts (which will be distributed during the first week of camp) should be worn on all field trips.

FIELD TRIPS - 2014

Monster Mini Golf, June 30th

Kids will enjoy a round of Miniature Golf with a fun, monster theme. They will also receive an arcade card to enjoy. We will be boarding the buses at 8:45 AM and returning to PRHS at approximately 11:00 AM.



COST-\$19.00 **LIMIT-90 Campers**

CLOSED

Bounce Tuesday, July 15st

Kids will flip as they bounce their way to fun! Bounce is an air-conditioned facility with a variety of trampolines for kids to choose from. Also, they have a special area reserved for our youngest campers. Whohoo! We will be boarding the buses at 8:45 AM and returning to PRHS at approximately 11:40AM.



COST-\$35.00 **LIMIT-120 Campers**

(CAMPERS MUST SIGN FACILITIES WAIVER/ HOLD HARMLESS FORM)

The Gravity Vault, July 8th



Kids can enjoy rock climbing in this state-of-the-art facility. Campers will be working closely with the Gravity Vault's instructors as they are "shown the ropes." We will be boarding the buses at 8:50 AM and returning to PRHS at approximately 11:30AM. Campers may bring a small, disposable snack with them to enjoy.

COST-\$34.00 **LIMIT- 120 Campers**

(CAMPERS MUST SIGN FACILITIES WAIVER/ HOLD HARMLESS FORM)

Montvale Lanes, Dates – (Wednesdays: June 25, July 2, July 9, and July 22nd)

Located right nearby, Montvale Lanes is a Park Ridge Day Camp favorite! We have been enjoying a relationship with the bowling alley for more than 30 years and we will continue that tradition this year! **Please note:** this is a drop-off event. Campers may bring a small, disposable snack with them to enjoy.

COST- **\$0.**

NO REGISTRATION REQUIRED OPEN TO ALL REGISTERED CAMPERS



Park Ridge Municipal Pool, (Fridays: June 27, July 11, July 18, and July 25th)

Located on Colony Avenue, the Park Ridge Pool is extending its hospitality to us for a full morning of swimming! **Please note:** this is a drop-off event. Details about drop off and pick up will be communicated out before our first pool day.

COST- **\$0.**

NO REGISTRATION REQUIRED OPEN TO ALL REGISTERED CAMPERS



****WE REGRET THAT WE ARE UNABLE TO ISSUE REFUNDS ONCE PAYMENT HAS BEEN MADE.**



PARK RIDGE DAY CAMP

Field Trip Registration Form

CHILD'S NAME: (PLEASE PRINT) _____ **AGE:** _____

ADDRESS: _____ **TOWN:** _____

TELEPHONE: Home# _____ Work# _____

Cell# _____ **EMAIL:** _____

EMERGENCY CONTACT

NAME: _____ **TELEPHONE #:** _____

MEDICAL INFORMATION: ALLERGIES? _____

MEDICATION TAKEN ON A REGULAR BASIS? _____

MEDICAL HISTORY: _____

DOCTOR'S NAME: _____ PHONE: _____

Please identify the trips your child will attend:

~~Monster Mini Golf - \$19.00~~ **CLOSED**

Bounce Trampoline Sports- \$35.00

The Gravity Vault - \$34.00

Montvale Lanes - \$0

Park Ridge Municipal Pool - \$0

Total Amount Enclosed: _____

****WE REGRET THAT WE ARE UNABLE TO ISSUE REFUNDS ONCE PAYMENT HAS BEEN MADE.**



PARK RIDGE DAY CAMP

Field Trip Permission Form

I, the undersigned parent or guardian of the above named applicant, do hereby give my permission for him/her to participate in the Park Ridge Summer Day Camp Field Trip Program.

I do assume all risks and hazards incidental to the activity and transportation, and do further hereby release, absolve and hold harmless the Borough of Park Ridge, the Park Ridge Recreation Committee, its agents and instructors, any or all of them.

I do further understand that the Borough of Park Ridge or the Park Ridge Recreation Committee does not provide Accident Insurance for this activity. I hereby fully consent to emergency medical care to be rendered by competent medical physicians in the event the above- named child should require such attention during this activity.

MOTHER'S NAME (Please Print)

FATHER'S NAME (Please Print)

SIGNATURE OF PARENT/GUARDIAN

DATE

WAIVER OF LIABILITY: MUST BE SIGNED BY ALL PARTICIPANTS

GO AIRBORNE, LLC, (GA) dba BOUNCE! TRAMPOLINE SPORTS (BTS) PARTICIPANT AGREEMENT, INDEMNIFICATION, GENERAL RELEASE AND ASSUMPTION OF RISK

This is a contract – read before signing

In consideration of Bounce! Trampoline Sports (BTS) allowing me or a child for whom I am a parent or guardian ("Minor Child") to participate in BTS activities, including, but not limited to trampoline jumping, trampoline park access, trampoline dodgeball, trampoline basketball, aerial training, fitness classes, bounce house and other athletic and amusement activities (collectively "Activities"), I agree to forever release, indemnify and discharge GO AIRBORNE, LLC, BOUNCE! TRAMPOLINE SPORTS and their respective affiliates, agents, officers and directors on behalf of myself, my spouse, my children, my parents, my guardians, and my heirs, assigns, personal representative and estate, and any and all other persons and entities who could in any way represent me, the Minor Child or act on our respective behalfs. I represent that I am the parent or guardian of the Minor Child.

Trampolines expose its participants to the usual risk of cuts and bruises. Participants can fall off equipment, sprain or break wrists, ankles and legs, and can suffer more serious injuries as well. Traveling to and from trampoline locations raises the possibilities of any manner of transportation accidents. Double bouncing - more than one person per trampoline - can create a rebound effect causing serious injury. Flipping and running and bouncing off the walls is dangerous and must be done at the participant's own risk. There is also a risk of colliding with or being landed on by jumpers of a different size. In any event, if you or your child is injured, you or your child may require medical assistance, at your own expense.

Furthermore, BTS employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's health or abilities. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

I acknowledge that my participation in a BTS game or activity entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless BTS from any and all claims, demands, or causes of action which are in any way connected with my participation in BTS activities or my use of BTS's equipment or facilities including any such claims which allege negligent acts or omissions of BTS.

Should BTS or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

In the event that I file a lawsuit against BTS, I agree to do so solely in the state of NY and I further agree to the sole and exclusive venue of Rockland County, NY. I further agree that the substantive law of New York shall apply without regard to any conflict of law rules of that state. I also agree that if any portion of this agreement is found to be void or unenforceable, the remaining portion shall remain in full force and effect.

I hereby waive my right to trial by jury and agree that any controversy between the parties hereto involving any claim arising out of or relating to a breach of this agreement shall be submitted to and be settled by final and binding arbitration in the state of New York in accordance with the then current Commercial Arbitration Rules of the American Arbitration Association. I understand that this agreement extends forever into the future and will have full force and legal effect each and every time I visit Bounce Trampoline Sports, whether at the current location or any other location or facility.

I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

If the participant is a minor, I agree that this release of liability and assumption of risk agreement ("RELEASE") is made on behalf of that minor participant and that all of the releases, waivers and promises herein are binding on that minor participant. I represent that I have full authority as parent or legal guardian of the minor participant to bind the minor participant to this agreement.

If the participant is a minor, I further agree to defend, indemnify and hold harmless Bounce Trampoline Sports from any and all claims or suits for personal injury, property damage or otherwise which are brought by, or on behalf of the minor, and which are in any way connected with such use or participation by the minor, including injuries or damages caused by the negligence of RELEASED PARTIES, except injuries or damages caused by the sole negligence or willful misconduct of the party seeking indemnity.

In consideration of not being required to sign a fresh copy of this RELEASE before each visit, I further agree that **this RELEASE shall apply to all future visits by me and by the minor participant until he/she is 18 years old in full.**

I grant BTS permission to use my, and the Minor Child's likeness in its publications, websites, marketing and other materials without payment.

THIS DOCUMENT IS 2 PAGES

By signing this document, I intend to forever waive my right and the rights of the Minor Child to maintain any lawsuit or action against GO AIRBORNE LLC or BOUNCE! Trampoline Sports based on any claim of personal injury or death or property loss or damage. I have had sufficient opportunity to read and understand this agreement and consult with legal counsel, or have voluntarily waived my right to do so. I knowingly and voluntarily agree to be bound by all terms and conditions set forth herein.

***PLEASE NOTE WE RESERVE THE RIGHT TO REVIEW YOUR DRIVER'S LICENSE AND/OR OTHER FORMS OF IDENTIFICATION IN ORDER TO VERIFY IDENTITY AND YOUR DATE OF BIRTH / AGE.**

SIGNATURE OF PARTICIPANT AND/OR PARENT or GUARDIAN

*** SECTION REQUIRED FOR ALL PARTICIPANTS and the PARENT or GUARDIAN OF A MINOR CHILD (YOU CANNOT SIGN FOR A FRIEND OR SOMEONE ELSE'S CHILD!). You must be 18 years of age or older to sign this document. ALL INFORMATION BELOW IS REQUIRED!**

Signature:	Today's Date:
Printed Name:	Date of Birth:
Email:	Home Phone:
How did you hear about Bounce?	Cell Phone:
Complete Address (street, town, zip):	
Driver's License Number and State:	

**NAME(S) AND DATE(S) OF BIRTH FOR ALL CHILDREN UNDER 18 FOLLOWS:
*SECTION IS REQUIRED IF YOU ARE RELEASING THE LIABILITY FOR CHILDREN UNDER 18**

PARENT'S OR GUARDIAN'S ADDITIONAL AGREEMENT, INDEMNIFICATION, GENERAL RELEASE AND ASSUMPTION OF RISK - (Below must be completed for participants under the age of 18)

In consideration of the Minor Child (children) detailed below being allowed to participate in the Activities, I voluntarily agree that all terms and conditions set forth herein shall equally apply to such minor as if the Minor Child (or children) was eighteen years old or older.

(REMINDER: YOU CANNOT SIGN FOR A FRIEND OR SOMEONE ELSE'S CHILD!)

Name of Minor #1	Date of Birth	Relation
Name of Minor #2	Date of Birth	Relation
Name of Minor #3	Date of Birth	Relation
Name of Minor #4	Date of Birth	Relation
Name of Minor #5	Date of Birth	Relation

Please add me to your email list for special events and promotions.

THE GRAVITY VAULT INDOOR ROCK GYMS

TERMS OF GYM USE AND WAIVER AND RELEASE OF CLAIMS AGREEMENT

107 Pleasant Avenue, Upper Saddle River, NJ 07458
40 Watchung Avenue, Chatham, NJ 07928

201.934.ROCK (7625)
973.701.ROCK (7625)

Date ___/___/___

Name of Climber _____ Date of Birth ___/___/___

AGREEMENT (1) FOR ACKNOWLEDGMENT OF RISK, (2) FOR WAIVER, DISCLAIMER, AND RELEASE OF LIABILITY, (3) NOT TO SUE AND (4) FOR INDEMNITY

I, on behalf of myself (or if signing on behalf of a child or children, on behalf of such child or children) and on behalf of my (or my minor's) heirs, personal representatives, spouse, next of kin, successors and assigns, hereby understand, acknowledge, and voluntarily agree with The Gravity Vault, LLC, its shareholders, members, owners, officers, directors, employees, agents, contractors, insurers and/or landlords, and each of their respective successors and assigns (hereinafter collectively the "GYM") as follows:

CLIMBING IS AN INHERENTLY HAZARDOUS AND DANGEROUS ACTIVITY AND INVOLVES BOTH INHERENT AND EXTRINSIC, AND BOTH NATURAL AND ARTIFICIAL RISKS THAT MAY RESULT IN ALL MANNER OF HARM, LOSS, DAMAGE, PROPERTY DAMAGE, SERIOUS PERSONAL INJURIES, OR DEATH TO ME AND/OR OTHERS FROM, FOR EXAMPLE, (a) FALLS FROM THE CLIMBING SURFACE ONTO THE FLOOR, ROCK SURFACE, PROJECTIONS OR OTHER OBJECTS, (b) FALLING ONTO OTHERS PRESENT, (c) CLIMBERS OR OTHER OBJECTS (SUCH AS ROPES, HOLDS OR HARDWARE) FALLING ONTO ME, (d) IMPROPER USE, INSTALLATION OR MAINTENANCE OF GEAR, EQUIPMENT AND/OR APPARATUSES, (e) GEAR AND EQUIPMENT DEFECTS OR MALFUNCTION, (f) FAILURE TO FOLLOW PROPER CLIMBING AND/OR BELAY PROCEDURES, (g) IMPROPER OR INSUFFICIENT TRAINING, SUPERVISION AND/OR INSTRUCTION, (h) ROPE ABRASION AND/OR ENTANGLEMENT, (i) CUTS AND ABRASIONS RESULTING FROM SKIN CONTACT WITH THE CLIMBING WALL, AND (j) FAILURE OF ROPES, SLINGS, BOLTS, CHAINS, CLIMBING HARDWARE, ANCHOR POINTS, OR ANY PART OF THE CLIMBING WALL STRUCTURE. I fully and completely acknowledge that the above list and descriptions are not all of the risks associated with use of and presence in the GYM, and that the above list in no way limits the extent or scope of this Agreement.

My presence in and use of the GYM facilities is entirely voluntarily and with a complete and full understanding that any and all such usage, including, but not limited to climbing, is entirely voluntary and with a complete and full understanding that any and all such usage involves all manner of hazards and dangers. I ASSUME ALL RISKS AND RESPONSIBILITY FOR ANY HARM, LOSS, DAMAGE, PROPERTY DAMAGE, PERSONAL INJURY, OR DEATH TO ME OR OTHERS RESULTING FROM, ARISING OUT OF, OR ANY WAY IN RELATION TO MY USE OF OR PRESENCE IN THE GYM'S FACILITIES, GEAR, EQUIPMENT, CLIMBING WALLS AND APPARATUSES.

I have an obligation and responsibility to myself, as well as to other users of the GYM to conduct myself in a safe manner. I will not use the GYM while under the influence of drugs or alcohol or while suffering from or experiencing any other condition that might impair me.

I HEREBY **WAIVE, RELEASE, AND DISCHARGE** FOREVER, THE GYM FROM **ANY AND ALL LIABILITIES, CLAIMS, DEMANDS, OR CAUSES OF ACTION WHATSOEVER**, FOR ANY HARM, LOSS, DAMAGE, PROPERTY DAMAGE, PERSONAL INJURIES OR DEATH, DUE TO ANY NEGLIGENCE, GROSS NEGLIGENCE, OR ANY OTHER CAUSE (INCLUDING, BUT NOT LIMITED TO THE NEGLIGENCE OR GROSS NEGLIGENCE OF THE GYM, OR ITS EMPLOYEES, CONTRACTORS OR AGENTS, OR OTHERWISE) RESULTING FROM, ARISING OUT OF, OR IN CONNECTION WITH MY PRESENCE IN OR USE OF THE GYM.

I HEREBY AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS THE GYM, FROM AND AGAINST ANY CLAIM, CAUSE OF ACTION, LIABILITY OR JUDGMENT RESULTING FROM, ARISING OUT OF, OR IN CONNECTION WITH MY PRESENCE IN AND/OR USE OF THE GYM, ITS FACILITIES, GEAR, EQUIPMENT, OR APPARATUSES.

I UNDERSTAND THAT BY SIGNING THIS AGREEMENT I AND ANY OF MY CHILDREN WHO I AM SIGNING FOR SHALL HAVE (a) NO CLAIMS WHATSOEVER AGAINST, (b) HAVE NO RIGHT TO SUE, AND (c) HAVE NO RIGHT TO RECOVER ANY DAMAGES OR OTHER COMPENSATION FROM THE GYM.

I REPRESENT AND ACKNOWLEDGE THAT I HAVE FULLY READ THIS AGREEMENT, AND HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS. I FULLY UNDERSTAND EACH AND EVERY TERM. I AM VOLUNTARILY EXECUTING THIS AGREEMENT. I FURTHER UNDERSTAND THAT THIS AGREEMENT HAS NO EXPIRATION DATE.

AGREED AND ACCEPTED:

Climber Signature: _____ Date: ____/____/____

If under 18, signature of a parent or legal guardian is also required.

I CERTIFY THAT I AM THE PARENT OR LEGAL GUARDIAN OF THE ABOVE SIGNED CHILD AND CAN AUTHORIZE THE RELEASE OF LIABILITY FOR THIS CHILD.

_____ (Initial)

PRINT Parent/legal guardian name: _____

Relationship: _____

Signature: _____ Date: ____/____/____

Emergency Contact Name	Relationship	Phone
_____	_____	() _____ - _____



PARK RIDGE DAY CAMP

SUMMER CAMP RELEASE OF LIABILITY AND WAIVER FORM

RELEASE:

I am the parent or legal guardian of the child or children named below. I understand that my child's or children's participation in the Park Ridge Summer Camp Program is voluntary. I also understand that selected camp activities, some of which are outlined below, may involve accidental injury and that there are natural hazards associated with the camp and related activities. I hereby affirm that my child or children are in good health and physically capable of performing all required camp activities. In consideration of having my child or children participate in these activities I hereby release and forever discharge all camp personnel and the Borough of Park Ridge, and its agents and employees, from all claims of liability for damage, injury or any other loss that may be sustained while my child or children participate in any camp activities.

I further agree to indemnify and hold the Borough of Park Ridge, all camp personnel and their agents and employees from any and all injuries, liabilities or damages resulting from my child or children's participation in camp activities. I also understand that I may be required to sign additional Release and/or Waiver documents prepared by the independent operators of facilities providing outside camp activities, and I agree that my child or children will not be permitted to participate in those activities for which additional Release and/or Waiver documents are required unless I sign such documents.

Some of the activities in which my children may participate involve bicycle riding, rock climbing, swimming, use of the Bounce Trampoline Sports facility, Miniature Golf, and travel to and from these activities.

Date: _____

Parent/ Natural Guardian Signature

Name of Child/ Children



PARK RIDGE DAY CAMP

SUMMER CAMP RELEASE OF LIABILITY AND WAIVER FORM

RELEASE:

I am the parent or legal guardian of the child or children named below. I understand that my child's or children's participation in the Park Ridge Summer Camp Program is voluntary. I also understand that selected camp activities, some of which are outlined below, may involve accidental injury and that there are natural hazards associated with the camp and related activities. I hereby affirm that my child or children are in good health and physically capable of performing all required camp activities. In consideration of having my child or children participate in these activities I hereby release and forever discharge all camp personnel and the Borough of Park Ridge, and its agents and employees, from all claims of liability for damage, injury or any other loss that may be sustained while my child or children participate in any camp activities.

I further agree to indemnify and hold the Borough of Park Ridge, all camp personnel and their agents and employees from any and all injuries, liabilities or damages resulting from my child or children's participation in camp activities. I also understand that I may be required to sign additional Release and/or Waiver documents prepared by the independent operators of facilities providing outside camp activities, and I agree that my child or children will not be permitted to participate in those activities for which additional Release and/or Waiver documents are required unless I sign such documents.

Some of the activities in which my children may participate involve bicycle riding, rock climbing, use of the Bounce facility, visits to the town pool and to the bowling alley, and travel to and from some of these activities.

Name of Child/ Children

(Please Print)

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____



PARK RIDGE DAY CAMP

Release Form

Child's Name: _____ Grade entering Sept.'13: _____

Photography Release

Group photos as well as other pictures will be taken of campers during camp. Please note that these photos may be given to campers, displayed at camp, and/or used for publicity purposes. If you consent to these terms, check YES, if you do not consent, check "NO."

_____ Yes

_____ No

Bicycle and Walk Release

Memorial Field, Montvale Lanes and the Park Ridge Municipal Pool are the local sites that my child will travel to this year. I give my child permission to walk and/or bike to/from these locations. I am the parent /guardian of the above named child and hereby indemnify and release the Borough of Park Ridge from any liability associated with the transportation of my son/daughter, to and from the day camp sites listed above.

This waiver and indemnification specifically applies to the items selected above. I further understand that the Borough of Park Ridge is not responsible for the safety and behavior of the camper, while in transit to or from the Park Ridge Summer Day Camp sites. All of the children riding bicycles to or from camp must wear helmets and are not permitted to ride bicycles during camp hours. Furthermore, it is suggested that all campers bring a lock to secure their bicycles while at camp. The Borough of Park Ridge is not responsible for lost, stolen or damaged property. It is recommended that bicycles be inspected and registered at the Park Ridge Police Department.

If you consent to these terms, check YES, if you do not consent, check "NO."

_____ Yes

_____ No

(Please Print)

(Please Print)

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____



PARK RIDGE DAY CAMP

Medical information & Release Form

Child's Name: _____ Grade entering Sept.'14: _____

Family Physician: _____

Physician Phone: _____

Allergies: Please list all allergies to medication, food, nuts, bee stings or other:

Medical Conditions: Please list any medical problems, conditions, disabilities, or medication(s) that your child may be taking:

I am the parent/guardian of the child indicated above and I authorize the day camp directors to use their own judgment for medical treatment and/or in sending my child to the hospital for advanced medical treatment, if a parent/guardian cannot be reached.

(Please Print)

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____



State of New Jersey

Model Athletic Code of Conduct

The following model athletic code of conduct is promulgated in accordance with the provisions of P.L. 2002, Chapter 74.

Preamble:

Interscholastic and youth sports programs play an important role in promoting the physical, social and emotional development of children. It is therefore essential for parents, coaches and officials to encourage youth athletes to embrace the values of good sportsmanship. Moreover, adults involved in youth sports events should be models of good sportsmanship and should lead by example by demonstrating fairness, respect and self-control.

I therefore pledge to be responsible for my words and actions while attending, coaching, officiating or participating in a youth sports event and shall conform my behavior to the following code of conduct:

1. I will not engage in unsportsmanlike conduct with any coach, parent, player, participant, official or any other attendee.
2. I will not encourage my child, or any other person, to engage in unsportsmanlike conduct with any coach, parent, player, participant, official or any other attendee.
3. I will not engage in any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant, official or any other attendee.
4. I will not encourage my child, or any other person, to engage in any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant, official or any other attendee.
5. I will not use drugs or alcohol while at a youth sports event and will not attend, coach, officiate or participate in a youth sports event while under the influence of drugs or alcohol.
6. I will not permit my child, or encourage any other person, to use drugs or alcohol at a youth sports event and will not permit my child, or encourage any other person, to attend, coach, officiate or participate in a youth sports event while under the influence of drugs or alcohol.
7. I will not engage in the use of profanity.
8. I will not encourage my child, or any other person, to engage in the use of profanity.
9. I will treat any coach, parent, player, participant, official or any other attendee with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
10. I will encourage my child to treat any coach, parent, player, participant, official or any other attendee with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
11. I will not engage in verbal or physical threats or abuse aimed at any coach, parent, player, participant, official or any other attendee.
12. I will not encourage my child, or any other person, to engage in verbal or physical threats or abuse aimed at any coach, parent, player, participant, official or any other attendee.
13. I will not initiate a fight or scuffle with any coach, parent, player, participant, official or any other attendee.
14. I will not encourage my child, or any other person, to initiate a fight or scuffle with any coach, parent, player, participant, official or any other attendee.

I hereby agree that if I fail to conform my conduct to the foregoing while attending, coaching, officiating or participating in a youth sports event I will be subject to disciplinary action, including but not limited to the following in any order or combination:

1. Verbal warning issued by a league, organization or school official.
2. Written warning issued by a league, organization or school official.
3. Suspension or immediate ejection from a youth sports event issued by a league, organization or school official who is authorized to issue such suspension or ejection by a school board or youth sports organization.
4. Suspension from multiple youth sports events issued by a league, organization or school official who is authorized to issue such suspension by a school board or youth sports organization.
5. Season suspension or multiple season suspension issued by a school board or youth sports organization.

Name _____ *Signature* _____ *Date* _____