



Camp HORIZONS 2010



Register online at www.CampHorizonsVA.com

Spring Break Day Camp: Tuesday, March 30 - Thursday, April 1, 2010

8:30 am - 4:30 pm. Campers should bring their own lunch and drink. Snacks are provided.

Choose your program:

- Equestrian Camp** **Grades 3-6** **Cost: \$135**

Horses, horses, horses! Days are packed with English riding lessons, horse care, trail rides, games, and more! Open to riders of all ability levels.

My child has: never ridden some riding experience a lot of riding experience

- "Green" Camp** **Grades K-6** **Cost: \$95**

"Go Green!" Cook s'mores in a solar oven! Learn all about what it means to "go green," including activities about energy, solar power, recycling, wind energy, sustainability, and more. Find out how you can make good choices everyday to help keep our planet healthy for generations to come.

Transportation (Choose one):

- My child will ride the shuttle from the Target parking lot at Valley Mall at 8:00 am and 5:00 pm
 My child will ride the shuttle from the Exxon station on Route 11 N (exit #251) at 8:15 am and 4:45 pm
 My child will be dropped off and picked up at Camp Horizons at 8:30 am and 4:30 pm

Camper Information

First Name _____ Last Name _____ Preferred Name _____

Address _____ Male Female

City _____ State _____ Zip _____

Phone (_____) _____ Date of Birth (M/D/Y): _____ Age _____ Grade _____

School _____ Camper Email _____

Has camper ever been to a camp before? Yes No Does camper make friends easily? Yes No

What are camper's hobbies? _____

List adjectives that describe camper _____

Does camper want to attend camp? Yes No If no, please explain: _____

What is camper looking forward to at camp? _____

Camper's fears and concerns: _____

Camper's emotional or behavioral issues: _____

Note special health problems (include orthodontics, etc.): _____

List any dietary restrictions: _____

Registrations are due by March 13. Turn over for more information.

CAMP HORIZONS SPRING BREAK CAMP 2010

Payment is due by March 13.

Parent Information

Mother's Name _____ Home Phone () _____ Work Phone () _____

Mother's Occupation _____ Cell Phone () _____ Email: _____

Father's Name _____ Home Phone () _____ Work Phone () _____

Father's Occupation _____ Cell Phone () _____ Email _____

Who does camper live with? BothParents Mother Only Father Only Joint Custody Other

Emergency Contact Name (other than parents, whom we will try to contact first) _____

Relationship to Camper _____ Home Phone () _____ Cell Phone () _____

IMPORTANT INFORMATION FOR PARENTS AND CAMPERS

Cancellations: Fees, in full or part, may be refunded at the discretion of the Camp Director.

Camper Dismissal: A camper whose behavior is disruptive to the camp program or harmful to himself/herself, others, or the property of camp or others will be dismissed at the discretion of the Camp Director, with no refund of fee. Any camper found possessing or using alcoholic beverages, illegal drugs, or weapons will be dismissed immediately from camp with no refund.

Program Cancellation: Where health and safety are at issue, at the discretion of camp staff, programs and activities may be cancelled at any time due to inclement weather or other unanticipated circumstances of a serious matter as they arise with no refund provided.

Parent's and Camper's Agreement

I, as a camper or parent/guardian of a camper, understand that reasonable precautions are taken to insure that all programs and activities are conducted in a safe and responsible manner by qualified personnel. I/We further understand and accept that the camper may be exposed to potential hazards and certain risks while at camp and its cooperating sites, which include but are not limited to hazards and risks encountered in travel to or from Camp Horizons or cooperating sites, in camp activities, and in the natural setting of the camp and activity sites. These include, but are not limited to, ropes course, water sports, land sports, archery, canoeing, rock climbing, bicycling, hiking, weather changes, campouts, plants, insects, and rugged terrain. I, the undersigned, as a camper, individually, or parent/guardian of a camper, individually or on behalf of the camper, recognize and accept these and other unnamed risks, which are inherent to full participation in the camp program, and I agree to assume these risks by allowing my child to participate in the camp program. Therefore, I/we agree to assume all risks. I, as a camper, individually, or as a parent/guardian of a camper, individually and on behalf of the camper, hereby release and discharge Camp Horizons, its directors, officers, employees, and cooperating organizations or professionals, from all liability for damage, injury, or illness to the camper or his/her property relating to or deriving from his/her presence at Camp Horizons and its cooperating organizations or in travel to or from Camp Horizons, activity locations, and the camper's home. I/We also grant permission for Camp Horizons, the photographer of camp activities, and the American Camp Association to use photographs or video taken of my child during the camp session for promotional purposes. I/We have read, understand, and agree to abide by the contents of this application, including the **Parent's and Camper's Agreement, and the Payment, Cancellation, Camper Dismissal, and Refund policies. Emergency Authorization:** I hereby give permission to the camp to provide routine health care, administer prescribed medication, and seek emergency medical treatment, including ordering x-rays or routine tests, and ordering injections and/or surgery. I agree to the release of any records necessary for insurance purposes. I give permission to Camp Horizons to arrange necessary related transportation for the camper. In the event I cannot be reached in an emergency, I hereby give permission to the physician or dentist selected by the camp to secure and administer treatment, including hospitalization, for the camper and acknowledge that I will be responsible for the payment of all charges related to the medical or dental services. This form may be photocopied for use out of camp.

Signature of Parent or Guardian _____ Date _____

Signature of Camper _____ Date _____

Camp Horizons, 3586 Horizons Way, Harrisonburg, VA 22802 (540) 896-7600 Fax: (540) 896-5455

