

CHOOSE PRIMARY CAMP LOCATION

Registration Form 2012



Check One: "SR" San Rafael (Dominican University) "MV" Mill Valley (Mill Valley Middle School) "SF" San Francisco (150 Oak St between Gough & Franklin)

NEW OR RETURNING FAMILY?

NEW Family (welcome to the doodles family!) * RETURNING Family (Fields marked with a * are required. Please **clearly circle** any fields we need to update in our software.) Can't wait to see you!

CAMPER INFORMATION:

* Child 1 _____ * Birthdate _____ * School _____ Grade in Fall 2012 _____
 Hair Color _____ Eye Color _____ T-shirt size: _____ Child Has: Inhaler Epi-Pen (circle clearly!) Returning Camper? Yes No
 Child 2 _____ Birthdate _____ School _____ Grade in Fall 2012 _____
 Hair Color _____ Eye Color _____ T-shirt size: _____ Child Has: Inhaler Epi-Pen (circle clearly!) Returning Camper? Yes No

PARENT INFORMATION:

* Parent 1 _____ Relationship to Child(ren) _____ * Home Phone _____
 * Cell Phone _____ * Work Phone _____ Occupation & Employer _____
 Address _____ City _____ State _____ Zip _____
 * Email (required) _____ (confirmations & important camp updates are sent via email)
 * Parent 2 _____ Relationship to Child(ren) _____ * Home Phone _____
 * Cell Phone _____ * Work Phone _____ Occupation & Employer _____
 Address [] same as above _____ City _____ State _____ Zip _____
 Email _____ (confirmations & important camp updates are sent via email)

AUTHORIZED PICK UP PEOPLE & EMERGENCY CONTACTS: (other than parents, who we would always try to contact first)

Name 1 _____ Cell Phone _____ Name 2 _____ Cell Phone _____
 Name 3 _____ Cell Phone _____ Name 4 _____ Cell Phone _____

MEDICAL INFORMATION:

Health Insurance Company _____ Policy No.(s) _____
 Doctor _____ Phone _____ Dentist _____ Phone _____

*** MEDICAL INFO, RESTRICTIONS and / or SPECIAL NOTES FOR CAMP STAFF**

Please list all activity restrictions/exemptions, allergies, dietary restrictions, and medications used for each child. List any relevant past medical treatment and immunizations (incl. date of last tetanus) and any current physical, mental, health or psychological conditions requiring medication, treatment or special restrictions or considerations while at camp. Use additional pages if needed.

HOW OUR REGISTRATION PROCESS WORKS:

At Camp Doodles, each week boasts a fun new theme. Great new events, games and craft projects compliment our most popular camp activities. Campers declare that with each week at our camp, the *Doodles Experience* just keeps getting better and better – they get to strengthen friendships and share in the excitement each day brings. While some campers are only able to come for a couple days or weeks, the large majority of campers get to attend at least four to six weeks. Over one-third of our campers register for the Whole Summer, and their parents get an amazingly sweet discount!

For your convenience, we offer multiple registration options. Register for any number of weeks and/or buy drop-in days to use anytime. Many parents mix and match the registration options to suit their families' needs. Regular check-in is from 9 - 9:30am, with assembly & main camp activities beginning at ~9:30am. Camp ends at 3:30pm. Extended-Hours are available from 7:30am – 6:00pm.

CHOOSE ANY # OF WEEKS and/or BUY "USE ANYTIME" DROP-IN DAYS or JUST REGISTER FOR THE WHOLE SUMMER

Specify Camp Location (if different than Primary)	Select All The Weeks You Would Like To Register For	Cost Per Week	DISCOUNT Price If Registered		Do You Need Extended-Hours?	"Whole Summer!"
			BEFORE June 1	BEFORE May 1		
<input type="checkbox"/> SR (San Rafael only)	<input type="checkbox"/> Week 0: June 11 – 15	\$325	\$315	\$250	<input type="checkbox"/> +\$50 (or \$15/day)	Ready for the best summer yet? Kids love doodles. Many, many of our campers attend doodles the bulk of summer, offered again at a <u>huge</u> discount, for only \$1,675 if registered before May 1, saving ~\$1,000 off the regular cost. \$1,800 if registered after June 1 (save ~\$800) <input type="checkbox"/> June 18 – Aug 10 (core dates) <input type="checkbox"/> +\$250 Ex-Hours Need an earlier and/or later week? We are also open "Week 0: June 11-15", "Week 9: August 13-17" and "Week 10: August 20 – 24" at some of our locations. To register, check the appropriate box(es) on the section to the left to add these additional a la carte weeks.
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> SF	<input type="checkbox"/> Week 1: June 18 – June 22	\$325	\$315	\$295	<input type="checkbox"/> +\$50 (or \$15/day)	
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> SF	<input type="checkbox"/> Week 2: June 25 – June 29	\$325	\$315	\$295	<input type="checkbox"/> +\$50 (or \$15/day)	
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> SF	<input type="checkbox"/> Week 3: July 2 – July 6 (open 7/4)	\$325	\$315	\$295	<input type="checkbox"/> +\$50 (or \$15/day)	
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> SF	<input type="checkbox"/> Week 4: July 9 – July 13	\$325	\$315	\$295	<input type="checkbox"/> +\$50 (or \$15/day)	
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> SF	<input type="checkbox"/> Week 5: July 16 – July 20	\$325	\$315	\$295	<input type="checkbox"/> +\$50 (or \$15/day)	
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> SF	<input type="checkbox"/> Week 6: July 23 – July 27	\$325	\$315	\$295	<input type="checkbox"/> +\$50 (or \$15/day)	
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> SF	<input type="checkbox"/> Week 7: July 30 – Aug 3	LUAU \$325	LUAU \$315	LUAU \$295	<input type="checkbox"/> +\$50 (or \$15/day)	
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> SF	<input type="checkbox"/> Week 8: Aug 6 – Aug 10	\$325	\$315	\$295	<input type="checkbox"/> +\$50 (or \$15/day)	
<input type="checkbox"/> SR <input type="checkbox"/> MV <input type="checkbox"/> MV (MV only)	<input type="checkbox"/> Week 9: Aug 13 – 17	\$325	\$315	\$250	<input type="checkbox"/> +\$50 (or \$15/day)	
	<input type="checkbox"/> Week 10: Aug 20 – 24	\$325	\$315	\$250	<input type="checkbox"/> +\$50 (or \$15/day)	

BUY DROP-IN DAYS: USE ANYTIME DROP-IN DAYS / "DOODLE DAYS" (just show up – no reservation needed)

Want some more flexibility and convenience? Buy any number of days and **come any days you want** (space guaranteed). Just show up anytime between 7:30am – 6:00pm.

DROP - IN DAYS: Maximum # of days 25 per child Buy "Use Anytime" Doodle Days x \$75.00/day = \$ _____ unused days are fully refundable, if camp notified in writing by Aug 15

PAYMENT INFO:

Cost \$ _____ + \$25 Per Child, Per Summer, Registration Fee = \$ _____ Amount Enclosed: Full Payment (preferred) OR \$200 Deposit Per Child (full payment due 5/1)
 Check VISA _____ Exp: ____ / ____ CVV Code: _____ Billing Zip: _____

TERMS & CONDITIONS:

General Release: I hereby agree to indemnify and hold harmless Camp Doodles, Inc. and all its officers, directors, employees, representatives and volunteers from and against any and all liabilities for any injury which may be suffered by me and/or by my child(ren) arising out of or in any way connected with participation in a Camp Doodles, Inc. program. **Medical Treatment Consent:** In case of a medical or surgical emergency, I hereby give permission to any medical personnel selected by the camp staff to secure treatment. **Sunscreen & Neo/Polysporin Permission:** I give permission for the camp staff to apply Neosporin/Polysporin and/or other antibiotic creams and to regularly provide sunscreen to my child(ren). **Medical Insurance:** I understand and agree that it is my responsibility to provide accident and health coverage for the child or children named above while they are attending Camp Doodles, Inc. **Medication / Allergy Info:** I hereby give my approval for the Camp to list, on their public nametag system, symbols related to my child's allergies and/or medications. **Immunizations:** I attest that all immunizations required for school are up-to-date. I give **Trip/Travel Permission:** I give my full permission for my child(ren) to leave campus on regular walking, bike, car, ferry, van and/or bus trips. **Photographs/Videos:** Use of any pictures, text and/or videos of/by me or my child(ren) may be used for camp training, advertising and marketing without any compensation to me or my child(ren). Video cameras may monitor & record on site. **Risk of Injury:** I acknowledge that the camp activities may contain risks that may result in injury or death to me and/or my child. **Mediation or Binding Arbitration:** Any controversy or claim arising out of or related to my child(ren)'s participation in this camp will be settled by a professional mediation service, then by binding arbitration pursuant to the applicable rules of the American Arbitration Association. **Refund Policy:** 100% refund until March 15th. 75% refund until April 29th. 50% refund until May 30th. No refunds on or after June 1st. All requests must be made in writing. Drop-In Day refunds must be requested by August 15 to receive 100% credit or 50% cash back. Schedule change requests must be made in writing - \$20 processing fee. **Force Majeure:** Camp Doodles' duties and obligations under this Agreement shall be suspended immediately without notice during periods that the Camp is closed because of Force Majeure events including, but not limited to, any fire, act of God, war, governmental action, act of terrorism, epidemic, pandemic, natural disaster, or any other event which the camp deems is beyond its control. If such an event occurs, the Camp's duties and obligations in this contract will be postponed until such time as the Camp, in its sole discretion, may safely reopen. **Understand All Policies:** I have asked any questions I have about the camp's policies and operations. All questions about policies and operations have been answered to my satisfaction. **I hereby agree to all the terms and conditions set forth above and additionally consent to my child(ren) participating all camp activities on site and off site.**

* Parent SIGNATURE: _____ Date: _____

MAIL TO: Camp Doodles – 1307 5th Ave – San Francisco, CA 94122
 PHONE (415) 388-4386 EMAIL staff@campdoodles.com

STAFF USE: staff name _____ date rcvd ____ / ____ received \$ _____ w/check # _____ staff name when in software _____ confirmation sent by _____

Please tell us all the places you have seen / heard about Camp Doodles?

Please be specific so we can continue to get the word out, while keeping our prices down.

NOTES TO CAMP STAFF:

Need to clarify any of your registration options?

e.g. if you have multiple children attending at different weeks, grouping requests, etc.

Campership Fund

100% of scholarship funds received by Camp Doodles go directly to our scholarship program.

\$325 (send a child to camp for a week) \$100 \$50 \$_____ (every dollar counts)

Your generosity will directly benefit a child in our community. Through our partnership with the American Camp Association, you are able to make a **fully tax-deductible** donation to fund a child in need. *Donations of \$100+ will be processed via the ACA. Pay by check ("ACA/Camp Doodles" or simply check here and we'll charge your credit card.*

IMPORTANT INSTRUCTIONS:

When you are done, please complete the following steps:

1. PRINT DOCUMENT.

Then sign it with a pen and mail the signed copy to Camp Doodles with payment.

2. SEND IN THIS REGISTRATION FORM:

Camp Doodles
1307 5th Avenue
San Francisco, CA 94122

staff@campdoodles.com

Fax: (415) 634-3210 *You can email or fax your signed registration, with credit card info*

TAX WRITE-OFF

Camp Doodles Federal Tax ID #: 68-0483962

ask your tax accountant if you can **write-off summer camp (Child and Dependent Care Credit, Form 2441)*