



2021 LIFESEEDS SUMMER CAMP REGISTRATION FORM

FOR AGES 6-15 YRS ♦ 9AM-3PM | Complete & Return to: LifeSeeds, P.O. Box 167, Jenkintown, PA, 19046

Parent/Guardians of all registered campers will receive a health and safety questionnaire to be completed prior to their first day of camp. Campers will also be required to receive a medical clearance to attend camp.

Camper: _____ Gender: _____ Age: ____ Grade: ____ (in Fall) DOB: ____ / ____ / ____

Address: _____ City: _____ State: _____ Zip Code: _____

Select a Shirt Size: youth sizes: YS YM YL YXL adult sizes: AS AM AL XL XXL *(When in doubt, choose the larger size.)*

List all Medical and Allergy Concerns: _____

THE FOLLOWING PEOPLE ARE AUTHORIZED TO PICK UP YOUR CAMPER (UNLESS NOTED)

PARENT/GUARDIAN 1: _____ PH #: _____

E-MAIL: _____ Alt PH #: _____

PARENT/GUARDIAN 2:: _____ PH #: _____

E-MAIL: _____ Alt PH #: _____

ALTERNATE CONTACT: _____ PH #: _____

Relationship to Camper: _____

PLEASE PROVIDE ADDITIONAL PEOPLE AUTHORIZED TO PICK-UP YOUR CHILD FROM CAMP

NAME	RELATIONSHIP	PH #
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____
4) _____	_____	_____

REGISTER MY CAMPER FOR THE FOLLOWING WEEK(S):

Select **ONE** sport each week. **LOCATION: JENKINTOWN SCHOOL** (*Basketball: Campers 8 years+)

JUNE 21 - 25, 2021					
*Basketball <input type="checkbox"/>	Football <input type="checkbox"/>	Lacrosse <input type="checkbox"/>	QuickBall <input type="checkbox"/>	Soccer <input type="checkbox"/>	Tennis <input type="checkbox"/>
JUNE 28 - JULY 2, 2021					
*Basketball <input type="checkbox"/>	Football <input type="checkbox"/>	Lacrosse <input type="checkbox"/>	QuickBall <input type="checkbox"/>	Soccer <input type="checkbox"/>	Tennis <input type="checkbox"/>
JULY 5 - 9, 2021					
*Basketball <input type="checkbox"/>	Football <input type="checkbox"/>	Lacrosse <input type="checkbox"/>	QuickBall <input type="checkbox"/>	Soccer <input type="checkbox"/>	Tennis <input type="checkbox"/>

OPTIONAL EXTENDED CARE - Additional cost of \$10 a day per camper. You may also sign up at drop off.

- **Before Care:** Early camper drop-off, Monday thru Friday, starting at 7:30 a.m.
- **After Care:** Late camper pick-up, Monday thru Friday, after 3:00 p.m. until 4:00 p.m.

SELECT DAYS BELOW:

JUNE 21 - 25, 2021					
Before Care	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thur <input type="checkbox"/>	Fri <input type="checkbox"/>
After Care	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thur <input type="checkbox"/>	Fri <input type="checkbox"/>
JUNE 28 - JULY 2, 2021					
Before Care	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thur <input type="checkbox"/>	Fri <input type="checkbox"/>
After Care	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thur <input type="checkbox"/>	Fri <input type="checkbox"/>
JULY 5 - 9, 2021					
Before Care	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thur <input type="checkbox"/>	Fri <input type="checkbox"/>
After Care	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thur <input type="checkbox"/>	Fri <input type="checkbox"/>

CAMP COSTS*

• REGISTER **BY MAY 1ST FOR AN EARLY REGISTRATION DISCOUNT OF \$25 EACH WEEK:**

1 WEEK = \$325, 2 WEEKS = \$650, 3 WEEKS = \$975

• REGISTER **AFTER MAY 1ST:**

1 WEEK = \$350, 2 WEEKS = \$700, 3 WEEKS = \$1050

**EACH ADDITIONAL SIBLING WILL RECEIVE A \$10 DISCOUNT FOR EACH REGISTERED WEEK*

PAYMENTS

*A minimum \$50 non-refundable deposit for each session is due now to confirm registration. Remaining balance is due **BEFORE** the start of camp. **FULL** payment is required if registering on first day of camp. Receipt will be e-mailed.*

Make all checks payable to LIFESEEDS and mail with registration form to:

LIFESEEDS SPORTS CAMP, P.O. BOX 167, JENKINTOWN, PA, 19046

\$ _____ Payment enclosed I would like to pay by SQUARE INVOICE ¹

SQUARE INVOICE PAYMENT

If paying by SQUARE INVOICE, provide email: _____

and amount to be invoiced \$ _____. (Minimum \$50/registered week required.)

We will send an email with link to pay securely online by credit card using SQUARE INVOICE.

¹ A 3% PROCESSING FEE FOR ALL SQUARE PAYMENTS WILL BE ADDED.

PLEASE READ & SIGN WAIVER AND PHOTO RELEASE FOR EACH CAMPER

Parent/Guardian Permission and Waiver of Liability

I/we hereby give consent for the above camper to participate in the LifeSeeds Summer Sports Camp(s). In consideration of acceptance of this application, I/we, intending to be legally bound, hereby, for ourselves, heirs, executors, and administrators, waive and release all rights and claims that might arise against LifeSeeds, and the persons and organizations affiliated with the camp. I/we further attest that the above camper is physically fit and has been examined by a physician. I/we give permission for LifeSeeds to provide immediate and reasonable emergency care should it be required. Every attempt will be made to notify parents.

Name *(please print)*

Signature

Date

Photography/Video Release

I/We hereby give permission to LifeSeeds, LLC to use any photos or videotape material taken of above camper(s) during LifeSeeds Summer Camp. The photos and videotape material will only be used in the LifeSeeds website or LifeSeeds promotional material. I may at any time withdraw permission for use of photos or video footage of above camper to LifeSeeds, LLC.

- I AGREE to give permission for use of photos/videos
- I DO NOT give permission for use of photos/videos

Name *(please print)*

Signature

Date
