



2019 Summer Camp Registration Form
For Children Entering Grades K-6 (school year 2018-2019)

Registration Checklist

- _____ Proof of Residency (Driver's License, Utility Bill, Lease)
- _____ Birth Certificate (if not currently enrolled in After School)
- _____ ALL outstanding balances paid
- _____ Two weeks' registration fees (first and last week)
- _____ Parent Meeting date secured

(RESIDENTS: \$30/week/child • NON-RESIDENTS: \$125/week/child)

CAMP PAYMENTS ARE DUE ON MONDAY OF EACH WEEK

Field trips fees are not included

Parents/Guardians are **required to attend a CAMP HANDBOOK MEETING. No exceptions.
 Meeting will take place in the Education Room.

Please indicate which meeting you will be attending:

- Thursday, May 9th 6:00p
- Saturday, May 18th 10:00a
- Tuesday, May 21st 7:00p
- Saturday, June 1nd 10:00a

Programming includes games, sports, arts & crafts, swimming, field trips and more.

Participant #1 Name: _____ **DOB:** _____ **AGE:** _____
 Male Female GRADE: _____ T-Shirt Size: _____

Participant #2 Name: _____ **DOB:** _____ **AGE:** _____
 Male Female GRADE: _____ T-Shirt Size: _____

Participant #3 Name: _____ **DOB:** _____ **AGE:** _____
 Male Female GRADE: _____ T-Shirt Size: _____

Participant #4 Name: _____ **DOB:** _____ **AGE:** _____
 Male Female GRADE: _____ T-Shirt Size: _____



**CITY OF SOUTH MIAMI
PARKS AND RECREATION DEPARTMENT**

5800 SW 66th Street South Miami, FL 33143
Tel: 305-668-3876 • Fax: 305-668-7388 • Parks@southmiamifl.gov

Parent/Guardian's Name: _____ DOB: _____

Street Address: _____
City _____ Zip _____

Email Address: _____ Phone: _____

EMERGENCY CONTACTS & AUTHORIZED FOR RELEASE NAMES

NAME	PHONE #	RELATIONSHIP
1. _____	_____	_____
2. _____	_____	_____

Does the participant require assistance or special accommodations to participate in the chosen activity? Specify any special needs:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Medical Conditions or Allergies? Specify any special needs:	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Please initial)

Murray Park Aquatic Center Permission

_____ My child may participate in swim instruction and open swim at the Murray Park Aquatic Center, 6701 SW 58th Place, South Miami, FL 33143. Does your child know how to swim? Yes No

Medical Transportation Consent

_____ I hereby give consent for the City of South Miami to take my child to the nearest hospital's emergency room for emergencies requiring immediate medical attention.

Photography and Video Release

_____ I hereby give consent for the City of South Miami to use photos/video coverage of myself and/or minor child in program guides, flyers, videos, websites, etc. I understand that the City of South Miami staff may take photos/video coverage of its programs and events, and their participants from time to time and that these photos/video shall remain the property of the City of South Miami.

Transportation Consent

_____ I hereby give my child consent to be transported by city-operated bus/van or contracted bus services during the program/activity listed on this registration form.



Release and Waiver of Liability

- 1) Accept, assumes and voluntarily incur all risks of any injuries, damages, or harm which might arise from the use of the requested facility due to the negligence or other fault of the APPLICANT or anyone acting through or on behalf of the APPLICANT.
- 2) Agree to compensate the City of South Miami (“City”) for any repair and/or replacement costs for damages to the requested facility or equipment while in use during the above date and time.
- 3) Agree to indemnify, defend, save and hold CITY, its officers, affiliates, employees, successors and assigns, harmless from any and all damages, claims, liability, losses, claims, demands, suits, fines, judgments or cost and expenses, including reasonable attorney’s fees, paralegal fees and investigative costs incidental there to and incurred prior to, during or following any litigation, mediation, arbitration and at all appellate levels, which may be suffered by, or accrued against, charged to or recoverable from the City of South Miami, its officers, affiliates, employees, successors and assigns, by reason of any causes of actions or claim of any kind or nature, including claims for injury to, or death of any person or persons and for the loss or damage to any property arising out of a negligent error, omission, misconduct, or any gross negligence, intentional act or harmful conduct of the APPLICANT, its contractor/subcontractor or any of their officers, directors, agents, representatives, employees, or assigns, or anyone acting through or on behalf of any of them, which arises out of or is concerning the use of the requested facility by me or anyone acting for or through me. I agree to pay all losses and expenses of any kind or nature whatsoever, in connection therewith, including the expense or loss of the CITY and/or its affected officers, affiliates, employees, successors and assigns, including their attorney’s fees, in the defense of any action in law or equity brought against them.
- 4) Agree and recognize that neither the CITY nor its officers, affiliates, employees, successors and assigns shall be held liable or responsible for any claims, including the costs and expenses of defending such claims which may result from or arise out of actions or omissions of the APPLICANT, its contractor/subcontractor, if any, or any of their agents, representatives, employees, or assigns, or anyone acting through or on behalf of the them, and arising out of or occurring on the CITY's property. In reviewing, approving or rejecting any submissions or acts of the APPLICANT, CITY in no way assumes or shares responsibility or liability for the acts or omissions of the APPLICANT, its contractor/subcontractor, if any, or any of their agents, representatives, employees, or assigns, or anyone acting through or on behalf of them. The APPLICANT has the duty to provide CITY with a defense with an attorney or law firm approved by the City of South Miami, which approval will not be unreasonably withheld.
- 5) Understand and agree to abide by all applicable rules and regulations as set forth herein and attached to this form. I further understand that I may be asked to vacate the premises and may forfeit my security deposit if I fail to abide by these rules and regulations or any other reasonable request from City of South Miami staff.
- 6) Understand and agree that rentals, including pavilion rentals operate between sunrise and sunset (excluding rentals at South Miami Park, Palmer Park and the Gibson-Bethel Community Center).
- 7) I certify that the above information is correct and that I have read and understand the rules and regulations governing this permit.

The City of South Miami does not permit any child to sign themselves out of the program. A parent/guardian or authorized adult must sign their child in and out, in-person, at the front desk, every day.

 Parent/Guardian’s Name (Print)

 Parent/Guardian’s Name (Signature)

 Date