

**Camp "Lots of Fun"**  
**2011 REGISTRATION FORM**

*(Check appropriate box)*

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| Can your child walk independently?                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| Can your child dress alone?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Does your child need assistance in toileting?                        | <input type="checkbox"/> | <input type="checkbox"/> |
| Does your child have blackout spells?                                | <input type="checkbox"/> | <input type="checkbox"/> |
| Does your child have hearing, speech, or visual difficulty?          | <input type="checkbox"/> | <input type="checkbox"/> |
| Does your child sunburn easily?<br>If so, send sunscreen with child. | <input type="checkbox"/> | <input type="checkbox"/> |
| Does your child need rest during the day?                            | <input type="checkbox"/> | <input type="checkbox"/> |

**OTHER INFORMATION:**

Please list suggestions or strategies to help make camp a success for your child:

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Name and phone number of 1-to-1 assistant if required:

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**Registration begins**  
**May 2, 2011, 5:30-6:30 pm**

**Space is limited to the**  
**first 90 campers registered.**

**Parents will receive a confirmation letter after**  
**registration is approved.**

**Bring completed form and \$220 fee to:**

Pierce County Parks & Recreation  
 9112 Lakewood Drive SW  
 Lakewood, WA 98499

# Camp "Lots of Fun"



**A day camp experience**  
**for children and young adults**  
**ages 6-21 with disabilities.**

**Special Thanks to:**

Forest Foundation, Baker Foundation, Florence B. Kilworth Foundation,  
 Ben B. Cheney Foundation, Korum for Kids Foundation and the  
 Tacoma Rainiers for their financial support of this program.

**Registration begins**  
**Monday, May 2, 2011 - 5:30-6:30 pm**  
**at the Lakewood Community Center.**

Camp is limited to 90 campers on a first come, first served basis.  
 Mail in registrations will not be accepted until **after** May 2<sup>nd</sup>  
*if space is still available.*



**253.798.4176**  
**[piercecountywa.org/parks](http://piercecountywa.org/parks)**

# Camp "Lots of Fun"

**For:** Children and young adults with disabilities, ages 6 to 21

**When:** July 5-29, 2011  
9:00 am - 2:00 pm (Monday - Friday)

**Where:** Discovery Primary School  
1205 - 19th Ave, Milton, WA 98354

**Cost:** \$220 - 4 weeks. Persons attending the program will receive a camp T-shirt and a participation certificate.

**Activities:** The program is staffed with school teachers and college students under the supervision of a Special Education Teacher. Activities change daily and are designed to meet individual and group needs:

- Social Activities
- Music & Singing
- Games & Sports
- Creative Arts
- Theme Weeks
- Special Events
- Community Visitors

**Food & Clothing:** Bring a sack lunch and beverage daily. All items brought or worn to camp should be well marked with permanent black ink.

**Transportation:** Parents are responsible for transporting their child to and from camp in a timely fashion. Campers meet each morning at the main entrance to the site. Pierce Transit Shuttle services may be available depending on where you live. For more shuttle information call 253-581-8100.

### SPECIAL NOTE:

1. Campers must be toilet trained and ambulatory.
  - If your child is not toilet trained, ambulatory, or poses a safety threat to self or others, you must provide a full time assistant for your child.
  - Or, if it is determined by the staff that an assistant is needed, you will be responsible for providing a 1:1 for your child.
  - If a 1:1 cannot be present at camp, you must make other arrangements or your child will need to stay home that day.
2. Ages 6-21 (must be 6 years of age prior to June 1, 2011).

## Camp "Lots of Fun" 2011 REGISTRATION FORM

Participant's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Male / Female

Participant's T-Shirt Size: Child S\_\_ M\_\_ L\_\_ Adult S\_\_ M\_\_ L\_\_ XL\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work # \_\_\_\_\_

Emergency Name and Day Phone (other than parent or guardian):

Is your child taking medicine of any kind? Please list:

I will send my child's medication to be taken at the following time:

\_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

Diagnosis (medical or laymen's terms): \_\_\_\_\_

Please list allergies (food and/or medications): \_\_\_\_\_

Are there any special precautions or any Life-threatening health concerns we will need to be aware of? If so, please attach.

*I give my consent to Pierce County Parks and Recreation to photograph my child and to use such pictures and or/stories in connection with the program activities. I hereby request that my child be permitted to attend the Recreation Program for individuals with special needs and authorize the director of the program to act for me according to his/her best judgement and ability in any emergency requiring medical care.*

X \_\_\_\_\_

**Signature (Parent or Legal Guardian)**