



# Summer Camp Registration Form

Student Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Parent's Phone \_\_\_\_\_ Camp \_\_\_\_\_

Student's email \_\_\_\_\_ Parent's email \_\_\_\_\_

Select camp:  Week 1  Week 2  Week 3  Week 4

**6,000B/week for Daycare under 5; 7,000B/week for 6-14 Years old.**

Super camp:

Football  Basketball  Swimming  Music  English  Chinese  Olympiad math  Gymnastics

Advanced Art **2,000B/camp/week, you can choose different camp for each week or same camp for 4 weeks.**

1st Parent/Guardian: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Work Phone: \_\_\_\_\_

2nd Parent/Guardian: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Child resides with: 1st Parent \_\_\_\_\_ 2nd Parent \_\_\_\_\_ Guardian \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_

Name and phone number(s) of person(s) other than parents allowed to pick up your child

1. \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

3. \_\_\_\_\_ Phone: \_\_\_\_\_

4. \_\_\_\_\_ Phone: \_\_\_\_\_

5. \_\_\_\_\_ Phone: \_\_\_\_\_

Any special instructions, such as custody or restraining orders must be attached to this application and discussed personally with the camp director. All information will be kept confidential.

Please list any other information you'd like to include about your camper:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# Parent Authorization Form

---

**Please print all information clearly**

Name of Camper: \_\_\_\_\_ Today's Date \_\_\_\_\_

OMIS does not discriminate on the basis of race, color, sex, handicap, religion or national origin. OMIS reserves the right at its sole discretion to refuse an application or dismiss a child from camp. No refund will be made of fees if the child has attended any portion of the camping period.

Parent/Guardian's Signature: I understand and accept these guidelines

Parent/Guardian's Signature: \_\_\_\_\_

I give OMIS permission to photograph and/or videotape my child for public relations and/or marketing purposes. Photos will remain archived at OMIS and can be used for promotional purposes without notification.

Parent/Guardian's Signature: \_\_\_\_\_

I give permission for OMIS to transport my child off camp property for the purpose of field trips and/or medical care. I understand that a schedule of events will be available to me and that all events are subject to change due to weather and/or scheduling conflicts without notice.

Parent/Guardian's Signature: \_\_\_\_\_

I authorize the camp management to act as the agent of the parents in any emergency situation or to administer basic first aid for the health and welfare of the camper involved. I am responsible for the expenses involved if the services of a physician or hospital are required.

Parent/Guardian's Signature: \_\_\_\_\_

Hospital preferred \_\_\_\_\_

By signing below I agree to adhere to all the Policies and Procedures set for by OMIS.

Parent/Guardian's Signature: \_\_\_\_\_