

Camp PIER on Lanier

Registration Form

***Please complete and email to: cindy@thepiercenter.org**

****Once received you will be contacted to set up a phone interview with camp director.**

*****Upon approval non-refundable payment of \$50 will need to be made to secure space.**

Date: April 5th-9th - 9:00-3:00 - Cost: \$350.00-Due by March 29th and non-refundable

Camper's Name: _____

Date of Birth: _____ School: _____

Parent/Guardian Info:

Name: _____

Address: _____

E-mail: _____

Phone: (HOME) _____ (CELL) _____

Emergency Contacts: (In case of emergency camp will contact parents first. Please list 2 additional names who can be contacted in case parents aren't available.)

1st contact: Name: _____ Phone: _____

2nd contact: Name: _____ Phone: _____

Medical Profile: (Please note that Camp PIER is not able to disperse medicine, assist with toileting and caring for adults who are medically fragile.

Describe any special needs your camper has: _____

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Describe any special help your adult will need at camp.

Does your camper currently take any medications? **YES** **NO**

List Medications/Dosage/Reason

Does your camper have any other medical diagnoses: (e.g. seizure disorder, anxiety disorder, etc.)

ALLERGIES: List all known medication, food, or other allergies (e.g. insect stings, hay fever, asthma) Describe reaction and management of reaction. _____

BEHAVIOR: To insure the safety of all of our participants, we are unable to accept campers who display violent or aggressive behavior, are at risk to other campers or are such an interruption that camp activities cannot continue.

Does your camper follow instructions? **YES** **NO**

Does your camper have difficulty with transitions? **YES** **NO**

Does your camper have difficulty with being told "No"? **YES** **NO**

When upset, what type(s) of behavior does your camper display? _____

What calms them down? _____

List any foods that your camper should NOT eat: _____

Is your camper verbal?

YES

NO

If not, how do they communicate? (e.g. sign, communication device)

***Please note that camp director will call parents if there are any behavior needs during camp. Parent/Caregiver will need to pick up camper for the day. Camper will be allowed to come back again the following day and see if behavior has improved. There are no refunds if camper needs to go home due to behavior issues.**

ITEMS THAT NEED TO COME WITH YOUR CAMPER EACH DAY:

*Clothing that can get dirty and comfortable shoes for recreational activities.

*Lunch/water bottle

COVID-19 Precautions:

*All campers/volunteers/staff will be screened each day for symptoms of Covid-19 by taking everyone's temperature and checking for any known illness. If any temperature reads at 100.3 or higher camper/volunteer/staff will be asked to go home and may not come back to camp unless a Coronavirus test comes back negative. Also camp staff will be providing extra sanitation of all surfaces as well as cleaning campers hands throughout the day. Masks are permitted but not required. Social distancing will be encouraged as much as possible.

Camp PIER on Lanier Liability Release Form

I/We the parent(s)/guardian(s) of the participant do hereby consent to his/her participation in the Camp PIER on Lanier Camp, including all activities incidental to the Program. I/We assume all responsibilities for, and risks and hazards of participation in the named Program. In consideration of the Camp PIER on Lanier Camp, including all officials, officers, sponsors, organizers, supervisors, volunteers, participants, and all other agents, of any and all claims, demands, rights, and causes of action of whatever kind of nature, arising from and by reason of, and all known and unknown, foreseen and unforeseen, bodily and personal injuries, damage to property, and the consequences thereof, resulting from his/her participation in the Program and all activities incidental to the Program.

I/We understand that my child as a participant of this Program will be photographed with the possibility of using the pictures for publications and social media.

I/We understand that my child could be exposed to unknown illnesses including Covid-19. I/We will not hold The PIER Foundation liable for any illness while attending the camp.

I/We understand that NO REFUNDS will be issued other than stated above.

Signature

Date