

# Riley College For Kids Summer Workshops

Warrenton Road, Glen Cove Maine – 207-596-6405

## REGISTRATION FORM

NAME: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

BIRTH-DATE: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE 2007/08: \_\_\_\_\_

NAME OF CURRENT SCHOOL: \_\_\_\_\_

PARENT'S/ GUARDIAN \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ CELL#: \_\_\_\_\_

E MAIL: \_\_\_\_\_

PLACE OF WORK \_\_\_\_\_ PHONE: \_\_\_\_\_

If tuition or a portion of tuition is to be paid by someone other than the parent or guardian listed above, please provide name and address:

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

Where did you hear about the Riley College For Kids Camp? \_\_\_\_\_

**Please number below your first, second, third choices - Two fun workshops per Session**

**MONDAY-THURSDAY - 9:00 to 3:00**

**Session 1 - June 25 - July 5**

**Session II - July 9 - July 19**

\_\_\_\_ Photography \_\_\_\_ Visual Arts

\_\_\_\_ Science \_\_\_\_ Film \_\_\_\_ Music

\_\_\_\_ Music \_\_\_\_ Pottery \_\_\_\_ Science

\_\_\_\_ Pottery \_\_\_\_ Visual Arts

**1st and 2nd choices will take priority, however, CFK has the right to cancel a workshop if need be.**

**COST: Individual session - \$450 or Both Sessions - \$800**

**\* Please enclose a non-refundable \$50 deposit, which will be applied to the cost**

**PAYMENT PAID IN FULL BY JUNE 18, 2007, OR**

**CONTACT RILEY TO MAKE DIFFERENT PAYMENT ARRANGEMENTS**

**Will you be applying for financial aid? \_\_\_\_\_ Yes \_\_\_\_\_ No (Parents of financial aid applicants must provide a copy of their 2006 - 1040 tax form with the application and submit a statement of need including amount requested**

Checks made payable to Riley College For Kids Inc. Please submit application and fee to: Glenna W. Plaisted, Director of Admissions, Riley School, P.O. Box 300, Glen Cove, ME 04846

# Day Camp Health History Form – To Be Filled Out By Parent/ Guardian

Camper's Name: \_\_\_\_\_ Parent / Guardian: \_\_\_\_\_

Age: \_\_\_\_\_ Parent Emergency contact # \_\_\_\_\_:

Emergency Contact person if Parent Cannot Be Reached: \_\_\_\_\_

Phone # \_\_\_\_\_,

## HEALTH HISTORY (check)

### Diseases and/or Chronic or Recurring Illness

Chicken Pox  
 Measles/Mumps  
 Epilepsy  
 Bleeding disorder  
 Heart Disease

Ear Infections  
 Convulsions  
 Diabetes  
 Hyper-Active Behavior  
 Other

### Allergies

Hay Fever  
 Asthma  
 Drugs/Medications  
 Insect Stings  
 Ivy, Oak, Etc.  
 Food

Date of last physical \_\_\_\_\_

On Medication? \_\_\_\_\_ What? \_\_\_\_\_

When is it administered? \_\_\_\_\_

If needed can Tylenol be given to your child? \_\_\_\_\_ YES \_\_\_\_\_ NO

Has camper ever been stung by hornets, wasps or bees? \_\_\_\_\_ Reaction \_\_\_\_\_

Operations or Serious Injuries \_\_\_\_\_ Dates \_\_\_\_\_

Other diseases or details of above \_\_\_\_\_

**Special Considerations Director should know about:** \_\_\_\_\_

Physician's Name \_\_\_\_\_ Telephone \_\_\_\_\_

Physical Address: \_\_\_\_\_

Health Insurance  Yes  No Insurance Company \_\_\_\_\_

Policy number \_\_\_\_\_ Policy Holders Name: \_\_\_\_\_

## PARENT/GUARDIAN CONSENT TO ATTEND CAMP

**EMERGENCY:** I hereby authorize and request the Camp Director to provide or secure necessary emergency treatment for my child should the need arise. I give permission for my son/daughter to receive emergency treatment at a hospital and/or from a licensed physician. I will not send my daughter/son to camp if she/he becomes exposed to any contagious disease, or if for any reason I do not consider her/him to be in good physical condition.

**I GIVE PERMISSION** for my son/daughter to participate in all camp/summer program activities both on and off camp property. I have read the camp brochure and agree to follow the procedures and regulations as stated. Any photographs or videos taken of my daughter/son may become property of Riley School and may be used for publicity purposes.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Riley School does not discriminate on the basis of race, color, creed, sex, national and ethnic origin in the administration of its educational policies, administered programs and employment.