

**Town of Ohio  
Summer Program Registration/Medical Form**

**Name of Child/Children:**

- |  |  |
|--|--|
| 1. _____<br>Name                      Age                      Date of Birth | 2. _____<br>Name                      Age                      Date of Birth |
| 3. _____<br>Name                      Age                      Date of Birth | 4. _____<br>Name                      Age                      Date of Birth |

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Number you can be reached at during camp hours:** \_\_\_\_\_

**My Child/Children has the following allergies (List Name and allergy):**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

**Any other special information:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Child's Doctor:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name of preferred hospital in case of emergency:** \_\_\_\_\_

**Other Authorized Contact Information: At least one other person to be notified in an emergency or authorized to pick up the camper(s).**

**Name & Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**In the event I cannot be reached in an emergency, I hereby give permission to the physician or hospital selected by the Town of Ohio Youth Program or Emergency Medical System to provide any medical care necessary for my child. I also waive any rights to hold the Town of Ohio, Town of Ohio Recreation Commission, or the individuals involved with the Town of Ohio Recreation Program liable for any reason or action.**

**Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Immunization Record

**Child's Name:**

---

Please fill out to the best of your ability or you may include a copy of your child's shot record.

<b>VACCINE</b>	<b>RECENT DATE GIVEN</b>
DTP	
Polio	
MMR	
HbPv	
HEP	
Chicken Pox	

## Town of Ohio Summer Program Transportation Form

We will have bus transportation.

In order to accommodate as many campers as possible we will have as many designated bus stops as practical. Please note below the stop that would be most convenient for your child and we will **try** to arrange it.

---

**Name of Road or Corner**

**Please note:** Due to time constraints, we are unable to pick up everyone at their house, so please help us by selecting a place that may be on the main route. If there is an **extreme** hardship with transportation, please let us know.

If your child will not be riding the bus and you have made arrangements for your child to be picked up by someone other than yourself, or have given your child permission to leave the program on his/her own, please fill out the following:

Please list the people or person who has permission to pick up your child:

1. \_\_\_\_\_  
Name Relationship to child
2. \_\_\_\_\_  
Name Relationship to child

Check all that apply:

- I give my child permission to ride his or her bike to the program.
- My child should remain at the Recreation Program for the entire day.
- My child has permission to leave the program on his/her own at any time.

**Please Note:** Children 14 and under are required by law to wear a helmet.

Other arrangements you have made with your child, please be specific:

---

**Supervision of campers is not provided before 8:30 a.m. or after 3:00 p.m. Please do not drop your child off before 8:30 a.m. and if your child is not riding the bus they should be picked up by 3:00 p.m.**

---

Parent/Guardian Signature

**Town of Ohio Summer Program  
Acknowledgement Sheet**

I have read and understand the rules, guidelines, and discipline policy for the camp. I agree to support the camp staff and my child in following them.

**Camper's Name:**

1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Date**

The staff will be taking photographs of campers and camper activities. The pictures may be displayed in the Recreation Building, Recreation Commission Web Site, Town Office, Town Newsletter, and the local newspapers. Please check one of the following:

\_\_\_\_\_ No, I do not want my child's picture taken during the Program.

\_\_\_\_\_ Yes, I give my permission to have my child's picture taken and displayed in the areas mentioned above.

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Date**

## **Recreation Commission Request Sheet**

Dear Parents/Guardians:

The Summer Program's funding comes from several different areas:

1. **Recreation Commission** – pays for trips, speakers, arts and craft supplies, sports equipment, computer games, movies, snacks, soda, toys, games, prizes for the carnival, and a back to school treat at the end of the summer.
2. **Town of Ohio** – pays for the Director of the Program, Director of Counselors, Bus Driver, and gas for the bus.
3. **Herkimer County Youth Bureau** – pays for the teenagers of the Town to be hired for counselors.

As you can see it takes money from different places to fund this program, but in order to supply the children with activities and trips the Recreation Commission (a small group of volunteers) needs to replenish the funds every year.

These Volunteers take one weekend a year in September, to raise these funds for your children. These funds are raised at Snow Bash, which is a big job for a small group, but this group keeps getting smaller as the years go by. That is why we are asking for your help in advance to assist us in raising this money this year, so your children can have a summer program with a variety of activities and new equipment.

Upon your completion of this application, please select a day and time during Snow Bash weekend (September 18 & 19) to help us cook, clean, serve, and prepare food for the Snowmobile Racers. You can sign up for an hour or a whole shift; any time you can give will help us greatly. You will get in for free, have a meal and drink for free, and after your shift you can enjoy touring the vendors for free.

Please take a moment to fill in the day, job, and the time that you would like to volunteer for, so you can help us make your child's summer a little brighter. Thank you for your help in advance. When you sign up, you will receive a reminder in the mail or by phone the week before Snow Bash.