

PHIT Camp



A program designed to get kids active and engaged over summer break, while also providing a healthy lunch three times a week. Each session will consist of various activities, games, crafts, and cooking. Camp will be held Monday, Wednesdays, and Fridays from 11:00am to 1:00pm. The program will run five weeks beginning on June 9th with the last session being on July 11th (no camp on July 4th.) Grade levels K-6th will be divided up to insure maximum benefits. Schedules will be available for parents and kids after registration is completed.

Registration Deadline: Saturday, May 31st, 2025

Drop off form **with payment** at WRAC front desk or mail to the
WRAC at P.O. Box 447, Wray, CO 80758

Register early to ensure a spot in this session of PHIT Camp!!

PHIT Registration Form

Participant's Name: _____

Participant's Grade Level: _____

Parent's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

E-mail: _____

Emergency Contact & Relation: _____

Emergency Contact Phone Number: _____

T-Shirt Sizes: Youth S M L or Adult S M L

Food Allergies and/or Health Concerns/Conditions:

\$50 per participant

K-6th | Mon., Wed., Fri.

11:00am-1:00pm

June 8th-July 18th

6 weeks

No Camp-July 4th

Limited Class Space Available

Parent Signature: _____

Date: _____

Photo Release Consent Form

RELEASE FOR MINOR CHILDREN (Under 18) I, (print name) _____, parent or official guardian of (child's name) _____ hereby grant permission to the WRAC, to take and use: photographs and/or digital images of my child for use in news releases and/or educational materials as follows: printed publications or materials, electronic publications, or Web sites. I agree that my child's name and identity: may be revealed in descriptive text or commentary in connection with the image(s). I authorize the use of these images without compensation to me. All negatives, prints, and digital reproductions shall be the property of the WRAC. _____ (Date)

_____ (Signature of Parent or Guardian) FORMULARIO DE CONSENTIMIENTO DE FOTOGRAFIA/LIBERAR I, _____ (nombre de impresión), padre o guardián oficial de (nombre del niño) _____ por la presente conceder permiso a los WRAC para adoptar y utilizar: fotografías y/o imágenes digitales de mi hijo para utilizar en los comunicados de prensa y materiales educativos. Estos materiales pueden incluir publicaciones impresas o electronicas, de sitios Web o de ostras comunicaciones electronicas. Ademas estoy de acuerdo en que mi hijo nombre e identidad: puede ser revelado en un texto descriptivo o comentario en relación con las imágenes. Autorizo el uso de estas imágenes sin compensacion para mí. Todos negativos, impresiones y reproducciones digitales serán propiedad de la WRAC. _____ (Fecha) _____ (Firma del padre o tutor)