

LCC SUMMER CAMP REGISTRATION

PLEASE RETURN THE COMPLETED FORM WITH A NON-REFUNDABLE \$50 APPLICATION FEE.

Child's Name

Date of Birth

Gender

Parent's/Guardian's Name

Parent's/Guardian's Name

Home Phone

Work Phone

Home Phone

Work Phone

Email

Email

Home or mailing address

Work address

City, St Zip Code

City, St Zip Code

Alternative Emergency Contacts

Primary Emergency Contact

Secondary Emergency Contact

Home Phone

Work Phone

Home Phone

Work Phone

Medical Information

Hospital/Clinic Preference

Physician's Name

Phone Number

Insurance Company

Policy Number

Allergies/Special Health Considerations

Parent's/Guardian's Signature

Date

. Office Use:

Application Fee Paid Upon Receipt: _____ Tuition Paid: _____ Application Received by: _____

LCC SUMMER CAMP AGREEMENT & AUTHORIZATION

PLEASE READ AND INITIAL EACH STATEMENT:

___ I permit my child to go on field trips. If routine safety procedures have been taken, I release Linnton Community Center and individuals from liability in case of an accident during activities related to Linnton Community Center if standard safety procedures have been taken. I give the Linnton Community Center permission to take and use photographs of my child for publicity and/or news-related purposes.

___ I understand that my child must be picked up at or before closing time. The Linnton Community Centers Summer Camp provides no supervision after closing. I will make other pick-up arrangements if I cannot be on time. I understand that a late fee policy will be in effect if my child is not picked up or vacated at the Linnton Community Centers before closing time. Members not picked up before closing are the parent's responsibility; the Linnton Community Center assumes NO responsibility.

___ I understand that my child's membership standing is based on his/her ability to obey the rules of the Linnton Community Center, its officials, and staff members. Membership may be suspended or canceled for misbehavior without a refund.

___ Cancellations received at least 30 days before the start of camp will be eligible for a refund. Cancellations received with less than 30 days' notice but at least one week before camp will not be refunded but can be rescheduled. Cancellations received with less than one week's notice, and "no-shows" will not receive a refund or a credit to reschedule.

___ I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only if neither parent/guardian can be reached in the case of an emergency.

___ I certify that the above information is accurate and complete. I understand that there are risks associated with any physical activity, and I agree to hold Linnton Community Center and staff harmless from all responsibility for any injury or condition resulting from my child participating in the program.

Parent's/Guardian's Signature

Date

LCC SUMMER CAMP 2026

Week 1: June 15th – 19th
Blast to the Past

Week 2: June 22nd – 26th
Animal Planet

Week 3: June 29th -
July – 3rd Let Them Cook

Week 4: July 6th – 10th
Minds of S.T.E.A.M.

Week 5: July 13th – 17th
Creative Arts

Week 6: July 20th – 24th
Summer Olympics

Week 7: July 27th – 31st
Spanish Language & Culture

Week 8: August 3rd – 7th
Kids Got Talent

Week 9: August 10th – 14th
Outdoor Adventure Camp

Week 10: August 17th – 21st
Shark Tank for Kids

<u> </u> Weeks of camp	X \$275	Total: _____
1 nonrefundable application fee	\$50	Due to the time of registration.

REGISTRATION & PAYMENT:

We're excited to have your child join us! Spots are limited and filled on a first-served basis. So, we encourage you to register early. Full payment is due no later than one week before camp begins.

Payments can be made **online at linntoncommunitycenter.org**, or you are always welcome to stop by, and we'll gladly help you in person. We accept debit cards, credit cards, and PayPal.

When submitting your payment online, please **include your child's first and last name and the camp week** you are paying for in the description/comment section. This helps us ensure your payment is applied correctly.

SUBMIT REGISTRATION FORM:

Please email completed forms to: activitycoordinator@linnton.com Or mail/drop off at:

Linnton Community Center
10614 NW St. Helens RD
Portland, OR 97231

If you have any questions, feel free to call or text us on 971-393-6736 or call 503-286-4990.
We're happy to help!