



HEADS UP! HARTFORD CAMP 2020 Camper Registration Form

CAMPER NAME: _____

Gender: _____ Preferred Pronouns: _____

Grade Level (circle one): 8 9 10 11 12 Year of High School Graduation: _____ Date of Birth: ___/___/___

School Name: _____ Church / Organization Name: _____

Camper Cell Phone: _____ **Camper Email Address:** _____

**For the latest updates on camp, please sign up for REMIND at remind.com/join/huh2020
You can also download the free app and join with the following code: @huh2020
Or text @huh2020 to 81010**

- What years have you attended Heads Up! Hartford? (circle all applicable) None 2016 2017 2018 2019
- Would you be interested in an open house to see camp facilities? Yes No (circle one)
- CAMPER t-shirt size (adult size shirts) Please circle one : S M L XL XXL
- Are you CPR Certified: (circle one) Yes No If YES - please ATTACH copy of certificate
- Swim Level: (circle one) Non-Swimmer Beginner Intermediate Expert Certified Lifeguard
- Are you currently a member of Youth Advisory Board (YAB)? (circle one) Yes No
- If you are/have been a YAB, which years? (circle all that apply) 2016 2017 2018 2019 2020
- Room preference (circle one): Single Double (NO guarantees of rooming options HUH staff will assign rooms)
- Roommate Preference (please list 2): _____

Please list any dietary choices or restrictions, including food allergies: _____

Parent/Guardian name(s): _____

Parent/Guardian address: _____

City _____ State _____ Zip _____

Parent/Guardian cell #(s) _____

Parent/Guardian email(s) _____

- I can volunteer at camp on a morning or afternoon. We would appreciate your help!
If you have any questions about volunteering, please get in touch with Patti Cole at headsupthartford@gmail.com

I grant permission for my child to participate in Heads Up! Hartford camp. I understand that he/she will work at, and be transported to, various work sites around Hartford County with their team members by HUH Counselors or bus drivers in vans, buses, or cars. I understand potentially dangerous equipment may be used at work sites and that we will be working where there may be poison ivy, etc.

I grant permission for my child to participate in activities at Stratton Brook Park including swimming, etc. I also grant permission for HUH to use pictures of my child on the HUH and work site partners' websites or the HUH informational slide show. Campers are usually pictured in groups. No names will be used.

Parent/Guardian signature: _____ **Date:** _____

⇒ **Full cost of camp fees (room, transportation, and ALL meals) is \$425.**

If you desire a **scholarship** or to make a **pre-camp payment arrangement** for your camper:
Please check here _____ and speak with your Church or Organization’s Youth Director/HUH Representative so that we may call you. However, a minimum payment of \$100 is mandatory.

Name of Church/Organization Representative: _____

Church/Organization Representative Phone Number/Email: _____

You may need an air mattresses / air pump. Will you be able to bring one? YES NO

During the course of the week at Heads Up! Hartford, the teens engage in a great deal of small group discussion that often results in significant self-reflection. If your child has been involved in psychological treatment or has been struggling with serious emotional issues that may make them more vulnerable, we suggest that you contact us for a confidential discussion with our psychologist to determine if this is the opportune time for them to come to camp.

Please circle if you would like to be contacted by a clinician to discuss your child’s participation.

Yes No

Is there anything you would like to share with your child’s counselors to help us better understand your child?

CLOSING CEREMONY starts at 7:00PM on Friday, June 26, 2020.

The campers leave camp directly following the ceremony at about 8:15 PM.

Your camper MUST be signed out before leaving camp.

Camper Name: _____

Who will be picking up your camper?

Name: _____

Cell phone # _____

TO BE COMPLETED AT CHECK OUT ONLY

Picked up by _____ **Date:** _____

(signature)

If you are printing a paper copy please mail registration to:

Shelby Demke
HUH Registration
1112 Boulevard, Apt. 2
West Hartford, CT 06119

If you have any questions about registration, or if you would like to scan and email forms, please contact Shelby at huhreg@gmail.com