HEADS UP! HARTFORD CAMP 2022 <u>Camper Registration Form</u>

CAMPER NAME:
rade Level completed as of Camp 2022 (circle one): 8 9 10 11 12
ear of High School Graduation: Date of Birth:/
chool Name:
hurch / Organization Name:
amper Cell Phone:
amper Email Address:
 ➤ Would you be interested in an open house to see camp facilities? ☐ Yes ➤ What years have you attended Heads Up! Hartford? (circle all applicable) None 2018 2019 2020 2021
➤ Are you currently a member of the Youth Advisory Board (YAB)? (check one) ☐ Yes☐No
 If you are/were a YAB, which years? (circle all that apply) 2018 2019 2020 2021 2022 CAMPER t-shirt size (adult shirt sizes): (circle one): S M L XL XXL XXXL Are you CPR Certified: (check one) □ Yes □ No (If YES - include copy of certificate) Swim Level: (check one) □ Non-Swimmer □ Beginner □ Intermediate □ Expert □ Certified Lifeguard Dorm preference (check one): □ Female □ Male Room preference (check one): □ Single □ Double □ Triple □ Quad Roommate Preference (please list in order of preference): NO guarantees of rooming options
ietary Restrictions (check all that apply): I Gluten-Free □ Dairy-Free □ Vegan □ Vegetarian □ Other: I Allergy (please list):
I Other (please list):
arent/Guardian name(s):
arent/Guardian address:
ity State Ziρ
arent/Guardian cell #(s)
arent/Guardian email(s)

• 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 <u>minimum payment of \$100 is mandatory</u> .
Name of Church/Organization Representative:
Church/Organization Representative Phone Number/Email:
You may need an air mattress / air pump. Will you be able to bring one? 📮 YES 📮 NO
Is there anything you would like to share with your child's counselors to help us better understand your child?
I grant permission for my child to participate in Heads Up! Hartford (HUH) camp. In consideration for being permitted to participate in Heads Up! Hartford summer camp, I [print name] for myself, (and any and all of the following: my heirs, family, successors and assigns and any other persons having claims by or through me hereby fully and forever release, acquit, and discharge the organizers of Heads Up! Hartford and all entities, organizations, and persons now or formerly affiliated with Heads Up! Hartford from, and waive any and all actual or potential claims or causes of action for, any of the following: damage to or loss of property, bodily injury, illness, death, or economic loss, known or unknown, anticipated or unanticipated, arising directly or indirectly in any manner whatsoever from Participant's involvement in Heads Up! Hartford. I understand that he/she will work at, and be transported to, various work sites around the State of Connecticut with their team members by HUH Volunteers, HUH Counselors, HUH Staff or hired 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, videos, and other media of my child of the HUH and worksite partners' websites, social media, and/or the HUH informational slide show.
Parent/Guardian signature: Date:

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