

# St. Gertrude Summer Camp Registration

June 1, 2021- July 30, 2021

Camp is open to student's age 3-8th grade (fully potty trained)

Children's Names:

\_\_\_\_\_  
DOB: \_\_\_\_\_ Grade (Next School Year): \_\_\_\_\_  
T-Shirt Size: XX-Small (4T) X-Small (5/6) Small(6-8) Medium(10-12) Large(14/16)  
Adult Small Adult Medium Adult Large

\_\_\_\_\_  
DOB: \_\_\_\_\_ Grade (Next School Year): \_\_\_\_\_  
T-Shirt Size: XX-Small (4T) X-Small (5/6) Small(6-8) Medium(10-12) Large(14/16)  
Adult Small Adult Medium Adult Large

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DOB: \_\_\_\_\_ Grade (Next School Year): \_\_\_\_\_  
T-Shirt Size: XX-Small (4T) X-Small (5/6) Small(6-8) Medium(10-12) Large(14/16)  
Adult Small Adult Medium Adult Large

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DOB: \_\_\_\_\_ Grade(Next School Year): \_\_\_\_\_  
T-Shirt Size: XX-Small (4T) X-Small (5/6) Small(6-8) Medium(10-12) Large(14/16)  
Adult Small Adult Medium Adult Large

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Phone Number: Cell: \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Phone Number: Cell: \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

Any allergies and or physical restrictions? \_\_\_\_\_ Yes \_\_\_\_\_ No (Please list for each child)

If yes, please specify: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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

Insurance Company: \_\_\_\_\_

ID# \_\_\_\_\_ Insurance Phone Number: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_

If there is an emergency we will make every effort to contact the parents at the number listed above. We will also try and contact the Doctor that is listed above. If we are unable to make contact with anyone at the above listed numbers, I do hereby give my permission to the SGS Summer Camp to call a physician and secure proper emergency medical treatment while efforts are being made to locate the parents as soon as possible.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Authorized to pick up camper/emergency Contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

### Photo Release

I hereby give permission for my child to be photographed during the St. Gertrude Summer Camp. I understand the photos will be used to keep a journal of activities, to share for promotional purposes including flyers, brochures, newspapers, and on the internet. I understand that although my child's photograph may be used for advertising, I do not expect compensation

Parent's Signature \_\_\_\_\_

### Bounce House Release for Summer 2021 for entire family

The Lessee shall be in charge of the bounce house unit's operation and is fully responsible for the return of the unit in good working order. Lessee shall pay for theft and/or damage of the inflatable while on their premises. Lessor (Hero Party Rentals and St. Gertrude School and Parish) and its officers, employees and agents is/are not responsible for any injury occurring to any person or persons in contact with the bounce house and/or other rental equipment. I agree to indemnify and hold harmless Hero Party Rentals and St. Gertrude School and Parish, their agents, employees, directors, and subcontractors from any claims, damages, losses, injuries and expenses arising out of or resulting from participation in these activities. I further agree to release, acquit and covenant not to sue Hero Party Rentals and St. Gertrude School and Parish, their agents, employees, directors, boards, subcontractors, and volunteers for all actions, causes of action claims or damages, damages in law or remedies in equity of whatever kind, including the negligence of Hero Party Rentals and St. Gertrude School and Parish, its directors, employees, agents, boards, volunteers, subcontractors, or my family, myself, or my heirs, against Hero Party Rentals and St. Gertrude School and Parish its directors, employees, agents, boards, volunteers, subcontractors, or their heirs arising out of participation in this program. In the event that I file a lawsuit against Hero Party Rentals and St. Gertrude School and Parish, I agree to do so solely in the state of Missouri, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining document shall remain in full force and effect. The terms of this agreement shall continue and be in effect after the experience has ended. As liquidated damages, I hereby agree that if Hero Party Rentals and St. Gertrude School and Parish, their agents, employees, directors, boards, subcontractors, and volunteers is forced to defend any action, lawsuit, or litigation by myself, my executors, or my heirs, on my family's behalf, my heirs or executors and I agree to pay Hero Party Rentals and St. Gertrude School and Parish, their agents, employees, directors,

boards, subcontractors and volunteers costs and attorney fees to defend such action, lawsuit or litigation. In short, Hero Party Rentals and St. Gertrude School and Parish, its directors, agents, boards, volunteers, subcontractors, or their heirs, cannot be sued, and if any lawsuit is held no one can collect any money or other securities and properties. I have read and understood ALL of the Rules listed above AND the Release of Liability and agree to abide by those rules and that Hero Party Rentals and St. Gertrude School and Parish will be held harmless against any claims due to injury or other as described above. By providing your credit card number, you authorize Hero Party Rentals to bill your credit card for the full amount of any rental costs (less any cash payments) plus any additional charges if the unit is returned damaged or is not returned at the time stated on this agreement.

Parent's Signature

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### Permission to apply sunscreen

As a parent or guardian of the above children, I recognize that my children may be exposed to the sunlight for many hours during summer camp and may need sunscreen of SPF-15 or higher to be reapplied during the days at camp.

- Staff may apply sunscreen to my children during camp.
- Staff may apply sunscreen to my children during camp but only the following brand/type of sunscreen.  
\_\_\_\_\_
- Staff may NOT apply sunscreen to my children during camp.

Parent's Signature

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Registration Fee: \$50 per child (Due at the time of Registration to hold spot and is NON-REFUNDABLE)

Please turn in Registration to St. Gertrude School Office Attn: Tanya Virkler

**Weekly Rates: Campers are responsible for paying for all 9 weeks even if you can't attend a week. (No part time rates available)**

1 Child- \$135

2 Children- \$195

3 or more Children- \$250

### Financial Commitment Agreement Summer Camp 2021

By signing this agreement I agree that my child(ren)'s camp tuition will be paid in full. I also recognize that my child may not be allowed back to camp until camp tuition is current or a payment agreement is reached.

Parent Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Name of person(s) making tuition payments. (print):

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Payments are to be made the Wednesday prior to the week of camp. Please make checks payable to St. Gertrude School. There will be a payment box to drop your payment off.