



# Township of New Hanover

## Parks and Recreation Department

New Hanover Township Building • 2943 North Charlotte Street, Gilbertsville, PA 19525-9718  
Phone: (610) 323-1008 • Fax: (610) 323-5173  
Website: www.newhanover-pa.org

### 2018 Hickory Park Summer Camp Application

All Information Must Be Legible – Please Print

The Hickory Park Summer Camp Program is run by the YMCA and is for New Hanover and Upper Frederick Township residents. This is a half day program for those who have graduated from kindergarten to sixth grade.

**Camper's Name:** \_\_\_\_\_ **Sex:** M F

**Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Grade (2018-2019):** \_\_\_ **Township:** New Hanover/Upper Frederick  
(circle one)

**Camper's Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Home Phone #:** \_\_\_\_\_

**Mom's Name:** \_\_\_\_\_ **Work #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Mom's Email:** \_\_\_\_\_

**Dad's Name:** \_\_\_\_\_ **Work #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Dad's Email:** \_\_\_\_\_

**Summer Camp Sessions:** All sessions are from 9:00am to 12:00pm

- Session 1 – June 18 to July 6 (No camp on July 4th) \$90.00
- Session 2 – July 9 to July 27 \$90.00
- Both Sessions - June 18 – July 27 \$160.00

#### Child Pick-up Authorization

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

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

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

**Medical History**

Does your child have any allergies? YES NO If yes, explain: \_\_\_\_\_

Please give a brief description of any current health conditions requiring medication, treatment, special restrictions or considerations while at camp: \_\_\_\_\_

**Boyertown YMCA Waiver of Liability**

I/We, the undersigned parent(s) of \_\_\_\_\_, age \_\_\_\_\_, (hereinafter called "Child") hereby enroll said Child in the New Hanover Township Recreation Park Camp for the period of June 18, 2018 through July 28, 2018. No park camp will be held on July 4, 2018.

In consideration of New Hanover Township and the Boyertown YMCA providing recreation activities for my child, I hereby agree as follows:

Wavier of Liability: I hereby accept any and all responsibility for, and assume the risk of any and all injury or damage to my person or dependant children, which might arise directly or indirectly as a result of participation in a YMCA and New Hanover Township Recreation program. I hereby expressly release, discharge, and hold harmless from any liability whatsoever the New Hanover Township and the Boyertown YMCA, and all employees and volunteers in their capacities as representatives of the YMCA and New Hanover Township, except for injuries caused intentionally, or by willful misconduct. I certify that I am familiar with the contents of this release, that I have read and understand the same, and that it is my intention by signing this release that the same be binding not only on me, but my heirs, administrators, executors, and assigns.

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

---

FOR OFFICE USE ONLY BELOW:

**Camp Package:** Session 1    Session 2    Both Sessions

Amount Paid: \_\_\_\_\_ Payment: \_\_\_\_\_ Date: \_\_\_\_\_ Initials: \_\_\_\_\_