



**Let's work together to give your child a foundation for success!  
During camp kids will enjoy games, activities and crafts that encourage achievement,  
a sense of community, good health and strong character!**

**Out of School Day Programs:**

**Dates:** Various dates, see listing below

**Time:** 7:00 am–6:00 pm

**Camp Locations:** ARM and ECC

**Cost:** \$5.25/day (city residents\*)  
\$8.00/day (non-city residents)

**Ages:** 6–13 years of age or 5 and completed kindergarten

Out of School Day Camp Dates		
Day	Month	Holiday
Friday	October 26, 2012	Teacher Workday
Friday	November 9, 2012	UF Homecoming
Wednesday	November 21, 2012	Teacher Workday
Friday	January 18, 2013	Teacher Workday
Friday	February 15, 2013	Teacher Workday
Monday	February 18, 2013	President's Day
Monday	April 1, 2013	Teacher Workday
Wednesday	June 5, 2013	Post Planning Day
Thursday	June 6, 2013	Post Planning Day
Friday	June 7, 2013	Post Planning Day

**Camp Locations**

**ARM:** Albert "Ray" Massey Recreation Center, 1001 NW 34th Street

**ECC:** Eastside Community Center, 2841 E University Avenue

**MNC:** Morningside Nature Center, 3540 E University Avenue

\*Proof of residency (GRU Bill or Voter ID card) is required at the time of registration.

Register at [www.cityofgainesvilleparks.org](http://www.cityofgainesvilleparks.org) or in person (Monday–Thursday, 7:00 am–6:00 pm) at the Thomas Center B, 3rd Floor, 306 NE 6th Avenue, 32601. For information, please call 352-334-5067.

**Winter Break Camp**

**Dates:** Thursday, December 20–Friday, December 21, 2012

Wednesday, December 26–Monday, December 31, 2012

Wednesday, January 2, 2013

**Time:** 7:00 am–6:00 pm

**Camp Locations:** ARM and ECC

**Cost:** \$43.00/child (city residents\*)  
\$65.00/child (non-city residents)

**Ages:** 6–13 years of age or 5 and completed kindergarten

**Spring Break Camp**

**Dates:** Monday, March 25–Friday, March 29, 2013

**Time:** Monday–Friday, 7:00 am–6:00 pm

**Camp Locations:** ARM and ECC

**Cost:** \$43.00/child (city residents\*)  
\$65.00/child (non-city residents)

**Ages:** 6–13 years of age or 5 and completed kindergarten

**Spring Earth Academy Day Camp**

**Dates:** Monday, March 25–Friday, March 29, 2013

**Time:** Monday–Friday, 8:30 am–4:30 pm;

Early drop off and late pick up services are available.

**Camp Location:** MNC

**Cost:** \$110.25/child (city residents\*)  
\$165.50/child (non-city residents)

**Ages:** Open to children in 1–6 grades

**Camp Location** \_\_\_\_\_

**Participant(s) Information** For more than two children, use additional Household Registration Form.

**Name:** \_\_\_\_\_  
**Male:** \_\_\_ **Female:** \_\_\_  
**Age:** \_\_\_ **Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Grade:** \_\_\_  
**Indicate any allergies, medical, physical limitations or behavioral concerns:**

**Name:** \_\_\_\_\_  
**Male:** \_\_\_ **Female:** \_\_\_  
**Age:** \_\_\_ **Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Grade:** \_\_\_  
**Indicate any allergies, medical, physical limitations or behavioral concerns:**

**Primary Guardian Name:** \_\_\_\_\_  
**Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Male:** \_\_\_ **Female:** \_\_\_  
**Mailing Address:** \_\_\_\_\_  
**Physical Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Secondary Guardian Name:** \_\_\_\_\_  
**Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Male:** \_\_\_ **Female:** \_\_\_  
**Mailing Address:** \_\_\_\_\_  
**Physical Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**I give my permission for the following individuals to pick up my child/children – please print clearly:**

First name	Last name	Ph:#
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Proper ID may be requested.*

**Initial all that apply:**

\_\_\_\_\_ My child has my permission to walk home from the after-school program each day. I understand he/she will not be escorted by staff.

\_\_\_\_\_ My child will walk to the program. I will provide transportation for my child home each day. He/she is not allowed to walk home from the program/park.

\_\_\_\_\_ I will provide transportation for my child to and from the program. He/she is not allowed to walk to the program and/or home from the program/park.

\_\_\_\_\_ I authorize staff to administer sunscreen to my child.

**Emergency Information**

If I cannot be reached in the case of an emergency, I hereby give permission for immediate first aid care by the Parks, Recreation, and Cultural Affairs personnel until a physician can be accessed. I hereby also give permissions to the physician selected by the City of Gainesville Parks, Recreation, and Cultural Affairs Department's authorized personnel to hospitalize, secure proper treatment for, and approve medications/injections, and/or surgery for my child.

**1st Emergency Contact Information: If guardians are not available**

**Name:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_ **Phone: (H):** \_\_\_\_\_  
**(W):** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**2nd Emergency Contact Information: If guardians are not available**

**Name:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_ **Phone: (H):** \_\_\_\_\_  
**(W):** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Waiver Agreement**

I give permission for my child(ren) to participate in all programs and activities conducted by the City of Gainesville Parks, Recreation, & Cultural Affairs Department Foundations After-school program, including field trips. I am fully aware of the risk inherent and hereby release the City of Gainesville, any of its elected or appointed officials, volunteers, employees, agents, and/or sponsors from any and all liability, claims, including attorney's fees, costs, and injuries which may be sustained by me or minor children on account of his/her participation in said programs and events. We (I) approve of the child(ren)'s attendance and certify that he/she is in good health and able to participate in all activities. At these said programs and events it is possible for photographs to be taken of your child and I give permission for these photographs to be used for publicity purposes for the City of Gainesville Parks, Recreation, and Cultural Affairs Department. This release form is completed and signed of my own personal free will and with full knowledge of its significance. I have read this release and understand all of its terms.

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

**Parents or Guardians**

If you are interested in chaperoning trips (if they occur), you must complete a volunteer form (background check) at least two weeks prior to the date of the trip. We recommend you complete the form at the time of enrollment to allow time for processing. The Volunteer form can be obtained at our Administration Office: 306 NE 6th Avenue, Building B, 3rd Floor, Mon. through Thurs., 7:00 am–6:00 pm or online at: [www.cityofgainesvilleparks.org](http://www.cityofgainesvilleparks.org). Please return the completed form to our Administrative Office.