



**JOIN IN THE FUN!**  
**AUGUST 21-24, 2017**  
**9:00am – 2:00pm**

**Hopewell Police Department**  
**Free Summer Camp**

Boys & Girls, Ages 6-12

Lunch and Snacks Provided

Activities include: Organized Sports and games, arts & crafts, physical fitness, special projects and programs, DJ, and field trips to the Hopewell Community Center Pool & United States Army Women's museum!

**MUST BE A HOPEWELL RESIDENT!**

*Applications will be accepted at the Hopewell Police Department from March 27<sup>th</sup> - June 15<sup>th</sup> and will be approved in the order they are received.*

**SPACE IS LIMITED!!!**

*For more information - please call 804-541-2283*





# Hopewell Police Department Summer Camp 2017



August 21 – 24, 2017 (9:00 a.m. – 2:00 p.m.)

## Registration Form – COMPLETE ONE FORM PER CHILD ATTENDING

**HOPEWELL RESIDENTS ONLY!**

### Participant Information

Participant Name: \_\_\_\_\_ Hopewell Resident: Y / N  
 Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Gender: M / F  
 School Attended 2016/2017 Year: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ T-Shirt Size: YS YM YL S M L XL XXL

### Parent/Guardian Information

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Emergency Contact Information – Alternate Pickup/Release

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Relation to Child: \_\_\_\_\_

### **Is your child allergic to any type of food or medication?**

Yes: \_\_\_ No: \_\_\_ If yes, please explain: \_\_\_\_\_

### Please list those that are permitted to pick up your child - (if applicable & must present valid ID):

1: \_\_\_\_\_ 2: \_\_\_\_\_ 3: \_\_\_\_\_

### Indemnity Statement and Liability Waiver

I agree to indemnify and hold harmless the City of Hopewell, its officers, employees and agents from and against any, and all claims and liabilities for injury to persons or property which may be suffered by anyone as a result of, or in any way connected with participation in any activity, program or the use of any city facility. I agree that if my child is disruptive and/or violates any camp rules or policies, he or she will be required to leave immediately and I (the parent or guardian) agree that I will be available to pick up. I agree that the waiver of liability and the hold harmless provisions of this application shall be effective to absolve the city of Hopewell and its officers, agents and employees from liability to the maximum extent permitted by Virginia law. If any provision of this application is held void or of no effect by a court of competent jurisdiction, the remainder shall be effective to the extent permitted under Virginia law.

Photos and Video: The City of Hopewell Police Department reserves the right to use any photo or video taken of any person participating in a department sponsored program or event for future publication.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date