



Cypress Recreation & Community Services Day Camp Registration Form RESIDENT



PLEASE PRINT CLEARLY AND PROVIDE ALL INFORMATION REQUESTED BELOW

Camper Name: _____ M/F: ___ DOB: _____ Age: ___ Grade entering: _____

Adult Name: _____ Driver's License #: _____

Address: _____ City: _____ Zip Code: _____

Email Address: _____

Day Phone: (_____) _____ Cell Phone: (_____) _____

Camp fee balance due by Monday at 5:00pm of the week prior to camp.

Failure to meet deadline will result in forfeiture of guaranteed space and loss of all deposits.

Camp Schedule, Weekly Fee & Deposits

Dates	Camp Fee	Camp+Ext Care Fee	Excursion	Excursion Fee	Total	Deposit <small>*Non-refundable/non transferable</small>	Balance Due	Automatic balance pay off	Balance/Da te Paid <small>(Office Use Only)</small>	Payment Due Date <small>(Mondays)</small>
June 3-7 Week 1	<input type="checkbox"/> \$105 3181	<input type="checkbox"/> \$130 3191	Big Air USA & John's Incredible Pizza 3201	<input type="checkbox"/> \$32 Due by 6/4		Must Pay in Full		Must pay in Full		Must pay in Full
June 10-14 Week 2	<input type="checkbox"/> \$105 3182	<input type="checkbox"/> \$130 3192	Boomer's 3202	<input type="checkbox"/> \$37 Due by 6/11		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		June 2
June 17-21 Week 3	<input type="checkbox"/> \$105 3183	<input type="checkbox"/> \$130 3193	Laser Quest & Lemon Park 3203	<input type="checkbox"/> \$15 Due by 6/18		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		June 10
June 24-28 Week 4	<input type="checkbox"/> \$105 3184	<input type="checkbox"/> \$130 3194	Knott's Berry Farm** 3204	<input type="checkbox"/> \$39 Due by 6/25		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		June 17
July 1-5 <small>(no camp 7/4)</small> Week 5	<input type="checkbox"/> \$85 3185	<input type="checkbox"/> \$105 3195	Bolsa Chica Eco Res. & State Beach 3205	<input type="checkbox"/> \$15 Due by 7/2		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		June 24
July 8-12 Week 6	<input type="checkbox"/> \$105 3186	<input type="checkbox"/> \$130 3196	Raging Waters 3206	<input type="checkbox"/> \$30 Due by 7/9		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		July 1
July 15-19 Week 7	<input type="checkbox"/> \$105 3187	<input type="checkbox"/> \$130 3197	Pirate Dinner Adventure 3207	<input type="checkbox"/> \$27 Due by 7/16		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		July 8
July 22-26 Week 8	<input type="checkbox"/> \$105 3188	<input type="checkbox"/> \$130 3198	Discovery Cube OC 3208	<input type="checkbox"/> \$18 Due by 7/23		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		July 15
July 29-Aug 2 Week 9	<input type="checkbox"/> \$105 3189	<input type="checkbox"/> \$130 3199	Soak City** 3209	<input type="checkbox"/> \$31 Due by 7/30		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		July 21
TOTAL DUE										

****Weeks 4 and 9 – Those using their Annual Pass for Knott's Berry Farm or Soak City will pay \$10 excursion fee****

PLEASE READ AND SIGN THE WAIVER, RELEASE AND INDEMNITY AGREEMENT BELOW

In exchange for participating in this activity, I hereby agree on behalf of myself and my spouse, parents, children, family, employees, agents, heirs, estate, executors, representatives, administrators, insurers, successors and assigns, distributees, guardians and/or other legal representatives (collectively the "Released Parties") to fully release and to not make any claim against, file a lawsuit against, attach the property of, or prosecute the City of Cypress (the "City") and/or the Cypress Recreation and Park District (the "District") and/or either of their employees, officers, elected and appointed officials, volunteers, boards, departments, agents, contractors and/or anyone else acting on its/their behalf for any and all claims, causes of action, including, but not limited to, emotional distress, bodily injury, death, or property damage arising out of any actions by any City or District employees, officers, elected and appointed officials, volunteers, boards, departments, agents, contractors and/or anyone else acting on the City's and/or the District's behalf in connection with my participation in this activity. **I UNDERSTAND THIS RELEASE SHALL BE EFFECTIVE EVEN IF THE LOSS, DAMAGE OR INJURY WAS NOT FORESEEABLE OR RESULTS, IN WHOLE OR IN PART, FROM THE NEGLIGENCE OF THE CITY, DISTRICT AND/OR ANY OF THE ABOVE PERSONS.**

I understand that this activity involves the risk of serious injury and even death, and I agree to assume any and all risk of serious injury or death in participating in the activity. In case of accident or other emergency, personnel of the City or District and/or their agents, are hereby authorized to secure medical care deemed necessary by them, as a result of that accident or injury, for me at my cost and expense. I further agree to indemnify and defend the City and/or the District and/or both of

their employees, officers, elected and appointed officials, volunteers, boards, departments, agents, contractors and/or anyone else acting on its/their behalf and to pay for any and all costs incurred (including, but not limited to, medical treatment, pain and suffering, emotional distress, any settlement paid or judgment, legal costs and/or attorneys' fees) as a result of any injury that I cause to another participant. I further consent to the use of activity/event photography and/or video taping of me and the display of those pictures of me for promotional use, including on the City's Internet website and social media sites.

By signing below, I acknowledge and represent that **I HAVE READ THIS AGREEMENT CAREFULLY, I FULLY UNDERSTAND ITS CONTENTS AND I VOLUNTARILY AGREE TO ITS TERMS.** No oral representations, statements or inducements, apart from this written agreement, have been made. If any portion of this agreement is declared invalid by a court, the remainder shall continue in full force and effect. Where this agreement is signed by a parent or legal guardian on behalf of a minor, the use of the word "me" in this agreement shall include and bind the minor, and the use of the word "I" in this agreement shall include the parent or legal guardian acting on behalf of and binding the minor to this agreement.

IF 18 YEARS OF AGE OR OLDER: I declare under the penalty of perjury under the laws of the State of California that I am eighteen (18) years of age or older and am fully competent to sign this agreement. **IF THE PARTICIPANT IS UNDER 18 YEARS OF AGE,** by signing below, I declare under the penalty of perjury under the laws of the State of California that I am the parent/legal guardian for the minor participant herein and am authorized to sign this agreement on their behalf:

I authorize Cypress Recreation and Community Services to process a charge against my credit card account for the TOTAL FEES amount stated above for the payment of programs, classes, and activities. **By selecting YES to Automatic Balance Pay Off, the credit card on file will be charged the remaining balance for the week(s) selected.**

Name of Participant: _____

Name of Parent/Legal Guardian, if Participant is under 18: _____

Signature: _____ Date: _____

Camp fee balance due by Monday at 5:00pm of the week prior to camp. Failure to meet deadline will result in forfeiture of guaranteed space and loss of all deposits. *\$20 deposit per week is non-refundable, nontransferable.



City of Cypress Recreation & Community Services Day Camp Registration Form NON-RESIDENT



PLEASE PRINT CLEARLY AND PROVIDE ALL INFORMATION REQUESTED BELOW

Camper Name: _____ M/F: ___ DOB: _____ Age: ___ Grade entering: _____

Adult Name: _____ Driver's License #: _____

Address: _____ City: _____ Zip Code: _____

Email Address: _____

Day Phone: (_____) _____ Cell Phone: (_____) _____

Camp fee balance due by Monday at 5:00pm of the week prior to camp.

Failure to meet deadline will result in forfeiture of guaranteed space and loss of all deposits.

Camp Schedule, Weekly Fee & Deposits

Dates	Camp Fee	Camp+Ext Care Fee	Excursion	Excursion Fee	Total	Deposit <small>*Non-refundable/nontransferable</small>	Balance Due	Automatic balance pay off	Balance/Date Paid <small>(Office Use Only)</small>	Payment Due Date <small>(Mondays)</small>
June 3-7 Week 1	<input type="checkbox"/> \$107 3181	<input type="checkbox"/> \$132 3191	Big Air USA & John's Incredible Pizza 3201	<input type="checkbox"/> \$32 Due by 6/4		Must Pay in Full		Must pay in Full		Must pay in Full
June 10-14 Week 2	<input type="checkbox"/> \$107 3182	<input type="checkbox"/> \$132 3192	Boomer's 3202	<input type="checkbox"/> \$37 Due by 6/11		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		June 2
June 17-21 Week 3	<input type="checkbox"/> \$107 3183	<input type="checkbox"/> \$132 3193	Laser Quest & Lemon Park 3203	<input type="checkbox"/> \$15 Due by 6/18		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		June 10
June 24-28 Week 4	<input type="checkbox"/> \$107 3184	<input type="checkbox"/> \$132 3194	Knott's Berry Farm** 3204	<input type="checkbox"/> \$39 Due by 6/25		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		June 17
July 1-5 <small>(no camp 7/4)</small> Week 5	<input type="checkbox"/> \$87 3185	<input type="checkbox"/> \$107 3195	Bolsa Chica Eco Res. & State Beach 3205	<input type="checkbox"/> \$15 Due by 7/2		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		June 24
July 8-12 Week 6	<input type="checkbox"/> \$107 3186	<input type="checkbox"/> \$132 3196	Raging Waters 3206	<input type="checkbox"/> \$30 Due by 7/9		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		July 1
July 15-19 Week 7	<input type="checkbox"/> \$107 3187	<input type="checkbox"/> \$132 3197	Pirate Dinner Adventure 3207	<input type="checkbox"/> \$27 Due by 7/16		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		July 8
July 22-26 Week 8	<input type="checkbox"/> \$107 3188	<input type="checkbox"/> \$132 3198	Discovery Cube OC 3208	<input type="checkbox"/> \$18 Due by 7/23		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		July 15
July 29-Aug 2 Week 9	<input type="checkbox"/> \$107 3189	<input type="checkbox"/> \$132 3199	Soak City** 3209	<input type="checkbox"/> \$31 Due by 7/30		<input type="checkbox"/> \$20		<input type="checkbox"/> YES <input type="checkbox"/> NO		July 21
TOTAL DUE										

****Weeks 4 and 9 – Those using their Annual Pass for Knott's Berry Farm or Soak City will pay \$10 excursion fee****

PLEASE READ AND SIGN THE WAIVER, RELEASE AND INDEMNITY AGREEMENT BELOW

In exchange for participating in this activity, I hereby agree on behalf of myself and my spouse, parents, children, family, employees, agents, heirs, estate, executors, representatives, administrators, insurers, successors and assigns, distributees, guardians and/or other legal representatives (collectively the "Released Parties") to fully release and to not make any claim against, file a lawsuit against, attach the property of, or prosecute the City of Cypress (the "City") and/or the Cypress Recreation and Park District (the "District") and/or either of their employees, officers, elected and appointed officials, volunteers, boards, departments, agents, contractors and/or anyone else acting on its/their behalf for any and all claims, causes of action, including, but not limited to, emotional distress, bodily injury, death, or property damage arising out of any actions by any City or District employees, officers, elected and appointed officials, volunteers, boards, departments, agents, contractors and/or anyone else acting on the City's and/or the District's behalf in connection with my participation in this activity. **I UNDERSTAND THIS RELEASE SHALL BE EFFECTIVE EVEN IF THE LOSS, DAMAGE OR INJURY WAS NOT FORESEEABLE OR RESULTS, IN WHOLE OR IN PART, FROM THE NEGLIGENCE OF THE CITY, DISTRICT AND/OR ANY OF THE ABOVE PERSONS.**

I understand that this activity involves the risk of serious injury and even death, and I agree to assume any and all risk of serious injury or death in participating in the activity. In case of accident or other emergency, personnel of the City or District and/or their agents, are hereby authorized to secure medical care deemed necessary by them, as a result of that accident or injury, for me at my cost and expense. I further agree to indemnify and defend the City and/or the District and/or both of

their employees, officers, elected and appointed officials, volunteers, boards, departments, agents, contractors and/or anyone else acting on its/their behalf and to pay for any and all costs incurred (including, but not limited to, medical treatment, pain and suffering, emotional distress, any settlement paid or judgment, legal costs and/or attorneys' fees) as a result of any injury that I cause to another participant. I further consent to the use of activity/event photography and/or video taping of me and the display of those pictures of me for promotional use, including on the City's Internet website and social media sites.

By signing below, I acknowledge and represent that **I HAVE READ THIS AGREEMENT CAREFULLY, I FULLY UNDERSTAND ITS CONTENTS AND I VOLUNTARILY AGREE TO ITS TERMS.** No oral representations, statements or inducements, apart from this written agreement, have been made. If any portion of this agreement is declared invalid by a court, the remainder shall continue in full force and effect. Where this agreement is signed by a parent or legal guardian on behalf of a minor, the use of the word "me" in this agreement shall include and bind the minor, and the use of the word "I" in this agreement shall include the parent or legal guardian acting on behalf of and binding the minor to this agreement.

IF 18 YEARS OF AGE OR OLDER: I declare under the penalty of perjury under the laws of the State of California that I am eighteen (18) years of age or older and am fully competent to sign this agreement. **IF THE PARTICIPANT IS UNDER 18 YEARS OF AGE,** by signing below, I declare under the penalty of perjury under the laws of the State of California that I am the parent/legal guardian for the minor participant herein and am authorized to sign this agreement on their behalf:

I authorize Cypress Recreation and Community Services to process a charge against my credit card account for the TOTAL FEES amount stated above for the payment of programs, classes, and activities. **By selecting YES to Automatic Balance Pay Off, the credit card on file will be charged the remaining balance for the week(s) selected.**

Name of Participant: _____

Name of Parent/Legal Guardian, if Participant is under 18: _____

Signature: _____ Date: _____

Camp fee balance due by Monday at 5:00pm of the week prior to camp. Failure to meet deadline will result in forfeiture of guaranteed space and loss of all deposits. *\$20 deposit per week is non-refundable, nontransferable.