Receipt #:	
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Pronouns



Parks and Recreation Day Camp Registration Form

Walk-in registration for Day Camp is March 19 at 8:30am at Hargraves Center, Community Center, and Homestead Aquatic Center. Non-residents must wait until March 21 to register.

☐ Does your camper have medication staff will need

Camper Information Household Information If you live or own property in the Town limits, Carrboro town limits, or Sharing demographic information is optional; we'll only use it to improve our services. Check all that apply. Orange County, you count as a resident. Non-residents are also Parent/Guardian welcome but may pay higher fees and have later registration dates. ☐ Carrboro resident ☐ Chapel Hill resident Preferred First Name Last Name Birthdate ☐ Orange County resident ☐ Non-resident Gender: ☐ Female □ Male □ Non-binary ☐ Transgender ☐ Other Ethnicity: ☐ Hispanic ☐ Asian ☐ African American ☐ American Indian or Alaskan Native □ White ☐ Native Hawaiian or Pacific Islander ☐ Other Household Address Camper Household Email Preferred First Name & Last Name Phone □ Cell ☐ Home ☐ Work Preferred language: ☐ English ☐ Spanish ☐ Burmese Birthdate Grade Pronouns ☐ Karen □ Other: School **Emergency Contact** Must be an adult that's not in the household. Gender: ☐ Female ☐ Male □ Other ☐ Non-binary □ Transgender First & Last Name Ethnicity: ☐ Hispanic ☐ Asian □ Other □ White ☐ African American ☐ Native Hawaiian or Pacific Islander Relationship Phone Number ☐ American Indian or Alaskan Native Sign Here Please read our waiver at chapelhillparks.org/waiver and sign below to First choice camp Second choice camp confirm that you read it and agree to it. Check all weeks you want to attend. ☐ I have read and agree to the waiver at chapelhillparks.org/waiver. A □ A 6/24-6/28 □ F 7/29-8/2 physical copy of the waiver is available on request. □ B 7/1-7/5 □ G 8/5-8/9 ☐ You can use my data (separate from my name or any personal □ C 7/8-7/12 8/12-8/16 identifying information) in research projects. Read more at □ D 7/15-7/19 8/19-8/23 chapelhillparks.org/waiver. □ E 7/22-7/26 ☐ Does your camper have a disability or special Date Signature needs?

to give them?

Camper	
Preferred First Name & La	ast Name
Birthdate Grade	Pronouns
School	
Gender: ☐ Female	☐ Male ☐ Other
☐ Non-binary	☐ Transgender
Ethnicity: ☐ Hispanic	☐ Asian ☐ Other
	☐ African American
	iian or Pacific Islander
☐ American Inc	dian or Alaskan Native
First choice camp	Second choice camp
Check all weeks you want	t to attend.
□ A 6/24-6/28	□ F 7/29-8/2
□ B 7/1-7/5	□ G 8/5-8/9
□ C 7/8-7/12	□ H 8/12-8/16
□ D 7/15-7/19	□ I 8/19-8/23
□ E 7/22-7/26	
☐ Does your camper have	ve a disability or special
needs?	
•	ve medication staff will need
to give them?	

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Camp Reminders

Here are some things to keep in mind while you're choosing camps for your family this summer.

Available Day Camps

Community Center Ages 5-11 Hargraves Center Ages 5-11 McDougle Ages 5-11

Teen X-TREME DIY Makers Ages 11-14
Teen X-TREME ALL STAR Sports Ages 11-14

If your child is 11 years old AND in the 6^{th} grade, they must enroll in Teen X-TREME Camps.

Children with unique skills, abilities, or special needs

We strive to include campers with documented special needs and disabilities in our camp programs. If your child needs extra support to enjoy camp, we may be able to accommodate their needs, but we need you to let us know your needs as soon as possible so we can be ready to help when camp starts. Make sure you check the box when you register!

Parent Packets & Other Forms

Don't forget to fill out your parent packet while you wait! Every camper needs to have these forms filled out before they can come to camp. If your child will need to take medication at camp, make sure you also fill out the form for that.

You can pick up the parent packet and any other forms you need from any of our facilities, or you can read them online at chapelhillparks.org. Just click 'Summer Camp Registration', then 'Camp Forms & Documents'.

Scan me



To read the full waiver and learn more about how we protect your personal information.

Camper Information

Sharing demographic information is optional; we'll only use it to improve our services. Check all that apply.

Camper		
Preferred First Nam	ne & Last Nan	ne
Birthdate	Grade	Pronouns
School		
Gender: ☐ Femal	e □ Ma inary □ Tra	
	☐ Afi Hawaiian or l	sian ☐ Other rican American Pacific Islander Alaskan Native
First choice camp	Sec	ond choice camp
Check all weeks you ☐ A 6/24-6/28 ☐ B 7/1-7/5 ☐ C 7/8-7/12 ☐ D 7/15-7/19 ☐ E 7/22-7/26	□ F □ G	end. 7/29-8/2 8/5-8/9 8/12-8/16 8/19-8/23
☐ Does your camp needs?☐ Does your camp to give them?		sability or special

/	l First Nam ,	C & La	st Main	C	
Birthdate	<u> </u>	Grade		Pronoun	S
School					
Gender:	☐ Female		□ Ma □ Tra		☐ Other
	☐ White		☐ Afr	ican Amer	ican
First choi	☐ Native ☐ Americ		an or A	Alaskan Na	ative
	☐ Americ	an Indi	an or A	Alaskan Na	ative
	□ Americ	an Indi	Seco	Alaskan Na	ative
Check all	ce camp weeks you	an Indi	Seconto atter	Alaskan Na and choice	ative
Check all	ce camp weeks you /24-6/28	an Indi	Seconto atter	nd choice nd. 7/29-8/2	ative
Check all □ A 6/ □ B 7/	□ Americ ce camp weeks you /24-6/28 /1-7/5 /8-7/12 /15-7/19	an Indi	Seco to atter	nd choice nd. 7/29-8/2 8/5-8/9	camp