



2019 Camp Shenandoah Registration Form

Application must be filled out prior to in-person registration

Date: _____

Parent/Guardian Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Phone Number: _____

E-mail: _____

Check One: City of Charlottesville Resident Non-Resident

Camper Name: _____ Date of Birth: _____

Camper Name: _____ Date of Birth: _____

Camper Name: _____ Date of Birth: _____

Questions/Additional Information:

Two local emergency contacts, other than parents/guardians must be provided.

Emergency Contact 1

Name: _____

Phone (1st Choice): _____

Phone (2nd Choice): _____

Phone (3rd Choice): _____

Emergency Contact 2

Name: _____

Phone (1st Choice): _____

Phone (2nd Choice): _____

Phone (3rd Choice): _____

Please list persons with permission to pick up child (other than parents/guardians or emergency contacts). Photo ID is required upon pick up of camper.

May your child walk or take the bus home? Yes No

What grade is your child currently enrolled in? (circle one)
Pre-K Kindergarten 1 2 3 4 5 6 7 8 9 10 11 12

Please list any medical conditions/allergies/dietary needs/behavioral/social issues/other concerns: _____

An inclusion leader will be assigned to each campsite to help children with special needs participate successfully in camp. Would you like more information about our inclusion program? Yes No

Will your child will be required to take medication during camp? Medication Authorization forms must be filled out before staff can dispense medication. Yes No

I understand my child must be toilet trained and able to handle toileting independently before entry into camp.

If my child becomes ill during camp, I understand that I will be contacted as soon as possible. If I am not able to be reached, my child's emergency contact will be notified. It is my responsibility to arrange for the child to be picked up from camp as soon as possible.

I understand my child may be suspended from camp if they do not follow the rules. I understand that my child may not attend any field trips if they have been suspended for that week.

Signature: _____ Date: _____

For staff use only:

Registered/Received by: _____

RecTrac Questions Entered: Yes No

Please select the location and week(s) of camp. If you have multiple campers, only one (1) form is required if they are attending the exact same camps and weeks. If different, please fill out a different form.

CAMP SHENANDOAH

Youth Rising K-3rd grade during the 2018-19 school year.

Location: Clark Elementary School, 1000 Belmont Avenue, Charlottesville, VA 22902

Check which weeks you want to attend	Activity#	Days	Dates	Time	Weekly Fee (Resident)	Weekly Fee (Non-Resident)
<input type="checkbox"/>	340798-01	M-F	Jun 17-Jun 21	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340798-02	M-F	Jun 24-Jun 28	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340798-03	M-F	Jul 1-Jul 5	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340798-04	M-F	Jul 8-Jul 12	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340798-05	M-F	Jul 15-Jul 19	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340798-06	M-F	Jul 22-Jul 26	7:30 am-5:30 pm	\$55.00	\$75.00

Location: Greenbrier Elementary, 228 Greenbrier Drive, Charlottesville, VA 22901

Check which weeks you want to attend	Activity#	Days	Dates	Time	Weekly Fee (Resident)	Weekly Fee (Non-Resident)
<input type="checkbox"/>	340797-01	M-F	Jun 17-Jun 21	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340797-02	M-F	Jun 24-Jun 28	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340797-03	M-F	Jul 1-Jul 5	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340797-04	M-F	Jul 8-Jul 12	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340797-05	M-F	Jul 15-Jul 19	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340797-06	M-F	Jul 22-Jul 26	7:30 am-5:30 pm	\$55.00	\$75.00

Location: Johnson Elementary School, 1645 Cherry Avenue, Charlottesville, VA 22902

Check which weeks you want to attend	Activity#	Days	Dates	Time	Weekly Fee (Resident)	Weekly Fee (Non-Resident)
<input type="checkbox"/>	340799-01	M-F	Jun 17-Jun 21	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340799-02	M-F	Jun 24-Jun 28	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340799-03	M-F	Jul 1-Jul 5	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340799-04	M-F	Jul 8-Jul 12	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340799-05	M-F	Jul 15-Jul 19	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340799-06	M-F	Jul 22-Jul 26	7:30 am-5:30 pm	\$55.00	\$75.00

CAMP SHENANDOAH - CARVER

Youth Rising K-3rd grade during the 2019-20 school year.

Location: Carver Recreation Center, 233 4th Street, NW, Charlottesville, VA 22903

Check which weeks you want to attend	Activity#	Days	Dates	Time	Weekly Fee (Resident)	Weekly Fee (Non-Resident)
<input type="checkbox"/>	340806-01	M-F	Jul 29-Aug 2	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340806-02	M-F	Aug 5-Aug 9	7:30 am-5:30 pm	\$55.00	\$75.00
<input type="checkbox"/>	340806-03	M-F	Aug 12-Aug 16	7:30 am-5:30 pm	\$55.00	\$75.00