

**BRANT SUMMER RECREATION APPLICATION**

*One completed form per Camper*

<b>OFFICE USE ONLY:</b> IMMUNIZATIONS _____ DISCIPLINE CONT _____
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**CAMPER INFO**

CAMPER'S NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY, ZIP \_\_\_\_\_

DAYTIME PHONE # \_\_\_\_\_

AGE \_\_\_\_\_ D.O.B. \_\_\_\_\_ GRADE ENTERING IN FALL: \_\_\_\_\_

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**EMERGENCY CONTACT INFORMATION (REQUIRED)**

Emergency Contact: \_\_\_\_\_ Cell/Home Ph # \_\_\_\_\_

2<sup>nd</sup> Emergency Contact: \_\_\_\_\_ Cell/Home Ph# \_\_\_\_\_

Family Doctor \_\_\_\_\_ Doctor Ph # \_\_\_\_\_

Insurance Co. & I.D. Number: \_\_\_\_\_

Hospital (In case of emergency) \_\_\_\_\_

Please list any allergies or medical/health conditions that your child has: \_\_\_\_\_

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Add'l information about your child that may benefit the Recreation Staff: \_\_\_\_\_

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I, _____ GIVE MY CHILD PERMISSION FOR:  <input type="checkbox"/> SUPERVISED WATER ACTIVITIES & SPORT ACTIVITIES <input type="checkbox"/> ADMINISTRATION OF EMERGENCY FIRST AID (ALSO FILL OUT FORM BELOW)
PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

I, \_\_\_\_\_, Parent/Guardian of \_\_\_\_\_ do hereby give my total consent for the Town of Brant Recreation Personnel to authorize medical care for my child. It is understood that the Recreation Staff will attempt to secure my consent prior to exercising this authority, as circumstances will follow.

I do hold harmless and indemnify the Town of Brant, their employees and agents, for any damage or liability incurred for any event following application of emergency medical care.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to Camper: \_\_\_\_\_

Email: \_\_\_\_\_

ALL CAMPERS MUST HAVE A COPY OF THEIR IMMUNIZATION RECORDS TO PARTICIPATE IN THE TOWN OF BRANT RECREATION PROGRAM

# TOWN OF BRANT SUMMER RECREATION DISCIPLINE CONTRACT

Parents/Guardians,

Welcome to the 2021 summer season! To ensure that all children have an enjoyable experience while attending Brant Recreation, we have initiated a Discipline Contract that all parents are required to sign and return BEFORE Monday, July 5, 2021.

Thank you for your cooperation,  
Vince Finizio, Jr.  
Recreation Director

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**The following rules will be followed by all children and enforced by all Counselors during Brant Recreation:**

1. There will be NO fighting, swearing, or disrespecting others
2. Children will stay with their Counselor in their assigned location throughout the day
3. While on the bus, the children will follow all bus rules
4. Stealing will not be tolerated
5. While in the pool area, all swimmers will follow the rules of the pool and locker room

**Consequences:**

**1<sup>st</sup> Offense:** A warning will be given to the individual and the parent/guardian will be notified by phone or writing.

**2<sup>nd</sup> Offense:** The individual will be suspended for 3 days from the Recreation Program

**3<sup>rd</sup> Offense:** The individual will be permanently suspended from the Recreation Program and the parent/guardian will NOT be refunded their money

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I, \_\_\_\_\_ have read the above discipline plan and agree to all rules and consequences. I also agree to go over the importance of this plan with \_\_\_\_\_.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date