

St. Gabriel's Petworth Youth Program

Summer Enrichment 2011

Grades Pk-6

Information Form

Program Coordinator: Mrs. June Felix

Program Director: Mr. Ronald R. Riley

Program Dates: June 20, 2011 - July 29, 2011

Program Hours: 8:30am - 4:00pm

Before Care: 7:00am - 8:30am After care: 4:30pm - 6:00pm

Program Features; Reading and Mathematics Enrichment, Art, Physical Education, Arts and Crafts, Dance, Drama, Basketball, Soccer, Kickball, Flag and Touch Football, Swimming, Bowling, Roller Skating, Movies, Games, Field Trips and More...

Program Fee: \$475 Before and After Care: \$175

Registration Deposit: \$75 Nonrefundable, Due on or before April 15, 2011.
Limited spaces are available, so hurry!

The balance of \$400 is due on or before May 20, 2011. Before and aftercare payment of \$175 is due on or before June 10, 2011. No personal checks accepted. Please make money orders payable to; St. Gabriel's Petworth Youth Program

Fill out and return the registration form and deliver with payment to St. Gabriel's Church Rectory or hand to Mrs. Felix or Mr. Riley. Registration can also be submitted in the school office enclosed in an envelope marked St. Gabriel's Petworth Youth Program.

For more information call 202-726-9092 or 202-246-5233.

ST. GABRIEL'S PETWORTH YOUTH PROGRAM

JULY 2010- JUNE 2011

PLEASE PRINT

Last name _____

\$ 35 Registration Fee

First name _____

(cash, check, or money order)

Address _____

\$ 25 Return Check Fee

City _____ State _____ Postal code _____

Home Phone: () _____ E-Mail: _____

School _____ Grade _____

Birth date ____/____/____

Catholic? _____ Parish _____

Please circle activities that are of interest to you:

Baseball (Boys) T-Ball (B&G) Softball (Girls)	Basketball(Boys) Rookie/Varsity/ Jr.Varsity	Basketball (Girls) Varsity/Jr.Varsity	Tutorial Program
Cheerleaders	Soccer	Flag Football	Movie Club Board Games
Teen Girls Book Club/Support Group (Grades 7-9)	6th Grade Retreat Program (No cost)	Recreational Activities	Liturgical Dance

Activities based on Coach Availability.

First and Second graders are only eligible for T-Ball, Soccer, and Board Games.

With whom does child live? PARENT(S) _____ GUARDIAN _____ OTHER _____

Name _____

Relationship _____ Home phone () _____

Work phone () _____ Cell/Pager () _____

Name _____

Relationship _____ Home phone () _____

Work phone () _____ Cell/Pager () _____

EMERGENCY CONTACT

Name _____ Relationship _____

Home phone () _____ Work phone () _____

MEDICAL INFORMATION

Insurance Carrier/Doctor's Name: _____

Policy Number/or Doctor's Phone #: _____

Medical problems/medications: _____

PLEASE READ AND SIGN OTHER SIDE OF FORM.

PARENTAL AGREEMENT

I HEREBY AUTHORIZE TEACHERS OR OTHER ADULT STAFF TO SEEK IMMEDIATE MEDICAL TREATMENT FOR MY CHILD IF A MEDICAL EMERGENCY ARISES DURING THE HOURS OF THIS PROGRAM AND NEITHER PARENT/GUARDIAN NOR EMERGENCY CONTACT ADULT CAN BE REACHED. I ALSO AUTHORIZE THE ATTENDING PHYSICIAN TO PERFORM ANY EMERGENCY TREATMENT NECESSARY, AFTER CONSULTATION WITH ST. GABRIEL'S PETWORTH YOUTH PROGRAM PROJECT DIRECTOR OR YOUTH COORDINATOR, IF MY DESIGNATED EMERGENCY CONTACT PERSON CANNOT BE REACHED.

I, THE UNDERSIGNED, UNDERSTAND THE RULES OF ELIGIBILITY OF ST. GABRIEL'S PETWORTH YOUTH PROGRAM. I AM AWARE OF THE PENALTIES THAT COULD BE PLACED ON A PARTICIPANT IF THE RULES ARE BROKEN.

ST. GABRIEL'S PETWORTH YOUTH PROGRAM, ITS AGENTS, STAFF, AND VOLUNTEERS ASSUME NO LIABILITY FOR INJURIES OR DAMAGES ARISING OR RESULTING FROM PARTICIPATION, UNLESS DUE TO WILLFUL FAULT OR GROSS NEGLIGENCE ON THE PART OF ST. GABRIEL'S PETWORTH YOUTH PROGRAM, ITS STAFF, AGENTS, OR VOLUNTEERS.

DUE TO THE STRENUOUS NATURE OF SOME ACTIVITIES, THE PARTICIPANT IS URGED TO CONSULT A PHYSICIAN CONCERNING FITNESS AND HEALTH BEFORE PARTICIPATING IN THIS PROGRAM.

ALL ACTIVITIES PRESENT CERTAIN INHERENT RISKS AND HAZARDS WHICH THE PARTICIPANT AND THE PARENT/GUARDIAN ARE URGED TO CONSIDER AND FOR WHICH THE PARENT/GUARDIAN ASSUMES RESPONSIBILITY.

TO THE BEST OF MY KNOWLEDGE, MY CHILD IS MEDICALLY FIT TO PARTICIPATE IN THIS PROGRAM.

I HEREBY APPROVE OF MY CHILD'S PARTICIPATION IN THIS PROGRAM, AND UNDERSTAND AND CONSENT TO MY CHILD'S INVOLVEMENT IN ACTIVITIES WHICH MAY TAKE PLACE AWAY FROM THE CHURCH'S FACILITIES.

ALL OF THE INFORMATION I HAVE GIVEN ON THIS REGISTRATION FORM IS CORRECT.

PARENT/GUARDIAN SIGNATURE _____ DATE _____