

# S'Camp Registration Form 2010

To register online go to  
[www.oldtrail.org](http://www.oldtrail.org)

OR Complete form and remit with payment to:  
Old Trail School/S'Camp  
P.O. Box 827  
Bath OH 44210-0827

**No phone registrations**

Please feel free to copy this form if you need to register more S'Campers

Parent or Guardian

Address

City State Zip

Bus. Phone (mother) Bus. Phone (father)

Cell Phone (mother) Cell Phone (father)

Home Phone Email address

## Register for Camp Sessions

Camper 1

Camper 2

Name: \_\_\_\_\_

Age: \_\_\_\_\_ T-Shirt Size: (circle one) Toddler Youth S Youth M  
Youth L Adult S Adult M Adult L Adult XL

Grade in Fall 2010: \_\_\_\_\_

School Attended: \_\_\_\_\_

S'Camp Class/Cost

S'Camp Class/Cost

Week 1: _____ A.M./All Day/P.M.	_____ A.M./All Day/P.M.
Week 2: _____ A.M./All Day/P.M.	_____ A.M./All Day/P.M.
Week 3: _____ A.M./All Day/P.M.	_____ A.M./All Day/P.M.
Week 4: _____ A.M./All Day/P.M.	_____ A.M./All Day/P.M.
Week 5: _____ A.M./All Day/P.M.	_____ A.M./All Day/P.M.
Week 6: _____ A.M./All Day/P.M.	_____ A.M./All Day/P.M.

**Transportation Option** \$25 per week for unlimited use per camper. See page 2 for details.

Circle week(s) that your camper(s) needs transportation 1 2 3 4 5 6

Check location  Hudson – Hudson Evangelical Church, 190 W. Streetsboro Rd.  
 Brecksville – Saint Basil the Great Catholic Church, 8700 Brecksville Rd.

**Lunch Option** \$20 per week per camper

Circle week(s) that your camper needs lunch 1 2 3 4 5 6 Camper 1 \_\_\_\_\_ weeks x \$20 week = \_\_\_\_\_

Circle week(s) that your camper needs lunch 1 2 3 4 5 6 Camper 2 \_\_\_\_\_ weeks x \$20 week = \_\_\_\_\_

**Grand Total: \$** \_\_\_\_\_

Please make checks payable to Old Trail School. If you wish to pay by MasterCard or VISA, include the following information:

Card # Card holder name Expiration date

Please see page 2 for extended day care options.

To register for Blue Streak, Great Britain-Buckeye Soccer and Liberty Soccer FC Camps, contact the number listed in the camp descriptions.

Thank you. We are looking forward to seeing you at S'Camp this summer!

# Authorization Form 2010

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## Medical Authorization

In the event of a child's serious illness or accident while she/he is at camp or elsewhere under camp supervision, S'Camp's policy is first to notify the camper's parent/guardian, then his/her physician, as designated below, as soon as reasonably possible. However, if the camp staff is unable to locate such designees and considers immediate treatment necessary, then I, the undersigned parent/guardian, hereby authorize the camp to take such emergency measures as seem reasonably necessary under the circumstances, including treatment and/or surgery by an available physician and/or nearby hospital.

Camper 1

Camper 2

Name: \_\_\_\_\_  
Height/Weight: \_\_\_\_\_  
Last Tetanus: \_\_\_\_\_  
Immunizations: \_\_\_\_\_  
Conditions currently  
under treatment for: \_\_\_\_\_  
Name/Dosage  
of medicines: \_\_\_\_\_  
Allergies: \_\_\_\_\_

Physician's name/phone: \_\_\_\_\_

Dentist's name/phone: \_\_\_\_\_

Medical carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Emergency contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## Authorization to Pick Up a Camper

My child may be released to: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## Photo Authorization

I hereby authorize and give full consent to Old Trail School to publish and copyright all photographs in which my child/children appear(s) while enrolled as a camper. I further agree that Old Trail School may transfer, use or cause to be used, these photos in School brochures, website, newsletter, advertising, posters, displays, slide shows, videotapes, catalogues and like publications or literature without limitations or reservations. I hereby consent to the use of photographs subject to the terms mentioned above. I am the parent or guardian of the above-listed camper(s).

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

How did you hear about S'Camp? (please check all that apply)

- Mailing       Library       OTS Parent       Friend       Other  
 Postcard       School       Newspaper       Internet

Please send this form with completed registration form on previous page to  
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