



South Florida Canoe Kayak Club  
 2018 Summer Day Camp Registration  
 418 SW 3<sup>rd</sup> Place, Cape Coral, FL 33991  
 239-443-6527

<http://www.sfckc.org>

Registration closes at noon on Friday for the following week – minimum 10 campers

**Camp Weeks: June 4, June 11, June 18, June 25, July 9, July 16**

Camper Name: \_\_\_\_\_ Local School \_\_\_\_\_

Age of Camper: \_\_\_\_\_ Gender: Male Female

Parent/Guardian Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

How did you find out about SFCKC Camp? *Previous Camper, Friend, Flyer, Internet, School, Other* \_\_\_\_\_

T-shirt size: Youth: S M L Adult: S M L XL

**Emergency Information**

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Special Concerns or History: \_\_\_\_\_

Primary Physician's Name and Phone Number: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Name of Policy Holder: \_\_\_\_\_

Policy Group Number: \_\_\_\_\_

*In the event that I cannot be reached during an emergency, permission is given to the SFCKC staff to transport my child as named above to the hospital and/or secure the intervention of treatments deemed to be necessary by a medical professional.*

Emergency Authorization Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

**10 campers per week are required – register by Friday of Previous Week.**  
**Money refunded if camp is cancelled - campers may reschedule to another week**

Weekly Fee (\$150) Camp Hours: Mon – Thurs 9-3, Fri 9-2	10% Sibling Discount (\$135)	Before Care 7-9 AM (\$15)
Camp Weeks: 6/4, 6/11, 6/18, 6/25, 7/9, 7/16	( ) x \$150.00 = _____	( ) x \$135.00 = _____
		<i>Minimum of three campers must be signed up for extended care availability</i> \$15.00 Per Day ( ) x \$15.00

CIRCLE WEEK(S) OF CAMP TO BE ATTENDED: 6/4, 6/11, 6/18, 6/25, 7/9, 7/16 Total Due: \_\_\_\_\_

**Pay Online at [www.sfckc.org](http://www.sfckc.org) (bottom of home screen) or Check payable to SFCKC**