



Foster City Parks and Recreation Presents

KAMP KOALA

Summer camp for ages 4 and 5 years old

June 22-August 7, 2015

Monday-Friday from 9am-12pm

\$100/week

Location: Preschool Room, Recreation Center

Kamp Koala is the perfect place for the busy 4-5 year old this summer! Mornings are filled with stories, songs, games and crafts, and interacting with other children their age. Our camp staff will provide a nurturing environment as your child discovers the joys of day camp. Children must be fully toilet trained.

*For more information,
please contact
dlandwehr@fostercity.org
or call (650) 286-3387.*



Kamp Koala (Ages 4 and 5 years old)

Kamp Koala (4 & 5 yr. old) Activity # 105071	Monday - Friday 9:00am - 12:00pm	Non Resident Fee	REGISTRATION TOTAL
Session 1 ♦ 6/22-6/26 Activity # 105071-A	\$100 ○	\$10 ○	
Session 2 ♦ 6/29-7/3 Activity # 105071-B	\$80 ○	\$10 ○	
Session 3 ♦ 7/6-7/10 Activity # 105071-C	\$100 ○	\$10 ○	
Session 4 ♦ 7/13-7/17 Activity # 105071-D	\$100 ○	\$10 ○	
Session 5 ♦ 7/20-7/24 Activity # 105071-E	\$100 ○	\$10 ○	
Session 6 ♦ 7/27-7/31 Activity # 105071-F	\$100 ○	\$10 ○	
Session 7 ♦ 8/3-8/7 Activity # 105071-G	\$100 ○	\$10 ○	

Total: _____

I have read and understand the Camp Refund Policy

Inclusion Services Requested

Child's Name: _____ Age: _____ D/O/B: _____

PARENT/GUARDIAN NAME: _____

ADDRESS: _____ CITY: _____ ZIP: _____

WORK #: _____ HOME #: _____

Recreation Staff must be notified by April 24, 2015 to request reasonable accommodations for Summer Camp.

I hereby agree to hold the City of Foster City, the Estero Municipal Improvement District, their employees, officers, and program and activity instructors harmless from all liability which may arise as a result of my participation in the above activities. In the event that the above named participant is a minor I hereby give my permission for his/her participation in the above listed activities and also agree to hold the City of Foster City, the Estero Municipal Improvement District, their employees, officers, and program and activity instructors harmless from all liability which may arise from said minor's participation in such activities. I understand that the above named activities may involve risk or accidental injury and hereby voluntarily assume such risks. I/we agree to allow use of my/our photo for program publicity. If the participant is a minor the parent or guardian must sign below.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

I hereby authorize the use of my MasterCard or Visa account. PRINT NAME AS IT APPEARS ON CARD: _____
Signature: _____ Expiration Date (00/00): _____

MasterCard or Visa #: _____ Security Code #: _____