Fischer Farm Discovery Camp



☐ **Session 4** 06/26-06/30

☐ **Session 5** 07/03-07/07*





Please fill out the registration form completely and return with proper fee to: Bensenville Park District, 1000 W. Wood Street, Bensenville, Illinois 60106 Family Last Name _____ Participant Name _____ Parent's Name _____ _____ Cell # _____ _____ Alternate# _____ Please fill out the following section if requesting inclusion services: ☐ Check this box if inclusion services are needed to participate in our programming. Today's date ______ Address ___ Date of Birth _____ Gender ____ **Fischer Farm Discovery Camp** Meets at Fischer Farm, 16W680 Old Grand Ave from 8:30 a.m. - 3:00 p.m. Monday - Friday. Camp fees by the session: Session 5* (includes 4 days of camp) \$118 / \$98 In-District Session 1-4 / 6-10 (includes 5 days of camp) \$140 / \$120 In-District Session 1 06/05-06/09 Session 6 07/10-07/14 ☐ **Session 2** 06/12-06/16 ☐ **Session 7** 07/17-07/21 ☐ **Session 3** 06/19-06/23 Session 8 07/24-07/28 ☐ **Session 4** 06/26-06/30 ☐ **Session 9** 07/31-08/04 ☐ Session 5 07/03-07/07* Session 10 08/07-08/11 After Camp fees by the session: Session 5 (includes 4 days of camp) \$75 / \$55 In-District Session 1-4 / 6-10 (includes 15 days of camp) \$90 / \$70 In-District Only available for farm camp enrollees. No transportation is avaiable to and from the Deer Grove Leisure Center. Session 1 06/05-06/09 Session 6 07/10-07/14 ☐ **Session 2** 06/12-06/16 ☐ **Session 7** 07/17-07/21 ☐ **Session 3** 06/19-06/23 ☐ **Session 8** 07/24-07/28

☐ **Session 9** 07/31-08/04

☐ **Session 10** 08/07-08/11

As a participant in the program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including loss of life, damage or loss which I may sustain as a result of participating in any and all activities connected with or associated with such programs. I further agree to waive and relinquish all claims, fully release and discharge and agree to indemnify and hold harmless and defend the park district and its officers, agents, servants and employees from any and all claims resulting from injuries including; loss of life, damages and loss sustained by me and arising out of, connected with or in any way associated with the activities of the program. I hereby agree and consent to give the Bensenville Park District unlimited rights to use any photographs or video footage of me (my child), in which I (he/she) may be included in whole or in part, for publication. And I waive all claims for compensation for such use.

Parent or Guardian Signature	Date
Inclusion: Please list any special accommodations that your child may require	
Auto Payment Method Please Note: A \$25 service fee will be required in cash for credit card declinations.	
☐ Yes ☐ No	
□ VISA □ MC □ DISC Card Number	
Expiration Date CVV code # on back Zip Code	Amount \$
Authorized Signature	
Date	
Staff Initials	