Summer Camps Registration Form



Please fill out the registration form completely and return wit 1000 W. Wood Street, Bensenville, Illinois 60106	h proper fee to: Bensenville Park District,		
Family Last Name	Participant Name		
Parent's Name	Cell #		
Email	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 Address			
Date of Birth	Gender		

Adventure, Sports and Teen Camps

Camp fees by the session:

Session 5* (includes 4 days Session 1-4 / 6-10 (includes			/ \$100 In-District / \$125 In-District
Session 1 June 3-7	Adventure	Sports	🗆 Teen
Session 2 June 10-14	□ Adventure	□ Sports	🗆 Teen
Session 3 June 17-21	□ Adventure	□ Sports	🗆 Teen
Session 4 June 24-28	□ Adventure	□ Sports	🗆 Teen
Session 5 July 1-5*	□ Adventure	□ Sports	🗆 Teen
Session 6 July 8-12	□ Adventure	\Box Sports	🗆 Teen
□ Session 7 July 15-19	□ Adventure	□ Sports	🗆 Teen
□ Session 8 July 22-26	□ Adventure	□ Sports	🗆 Teen
Session 9 July 29-Aug. 2	□ Adventure	\Box Sports	🗆 Teen
□ Session 10 Aug. 5-9	□ Adventure	□ Sports	🗆 Teen

Before Camp fees by the session: Session 5 (includes 4 days of camp) Session 1-4 / 6-10 (includes 15 days of camp)	\$70 / \$50 In-District \$100 / \$80 In-District
 Session 1 June 3-7 Session 2 June 10-14 Session 3 June 17-21 Session 4 June 24-28 Session 5 July 1-5* 	 Session 6 July 8-12 Session 7 July 15-19 Session 8 July 22-26 Session 9 July 29-Aug. 2 Session 10 Aug. 5-9
After Camp fees by the session: Session 5 (includes 4 days of camp) Session 1-4 / 6-10 (includes 15 days of camp)	\$85 / \$65 In-District \$100 / \$80 In-District
 Session 1 June 3-7 Session 2 June 10-14 Session 3 June 17-21 Session 4 June 24-28 Session 5 July 1-5* 	 Session 6 July 8-12 Session 7 July 15-19 Session 8 July 22-26 Session 9 July 29-Aug. 2 Session 10 Aug. 5-9

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				