

Montville Parks & Recreation Department Summer Camp 2019



Seven Weeks June 24th – Aug 9th
Register for all the weeks you need!

LOCATION: Tyl Middle School

Registration will open on
Monday, May 13th for Summer Camp

Montville Residents Only

We will accept registrations weekdays from 8am – 4pm at the Montville Parks & Recreation office or you can mail, stop in or register online. A receipt will be mail to you promptly.

Camp is offered to MONTVILLE RESIDENTS ONLY! Camp is offered to boys and girls ages 5 – 12. Children must be five years old by the start of camp. A birth certificate will be required as proof of age. Camp is held every Monday through Friday from 8am – 4pm. The fee for camp is **\$60 per week per child**. Fees must be paid in full at time of registration. Come every day or only on the days you want, you still pay the same price. We accept cash, checks, debit/credit cards or money orders as form of payment.

Camp will not be held on Wednesday July 4th or July 5th in observance of the Independence Day Holiday. Field trips are offered for additional fees. If registering for any field trips the coinciding week (s) must be paid for otherwise the trip (s) will be removed from your household.

There is no before or after care. There is free breakfast and lunch available to all campers or children can bring their lunches to camp every day. There is no refrigeration for lunches. Water and juice are available for purchase each day for \$1.00 in the cafeteria as is ice cream also for \$1.00.

Age groups fill up fast so don't delay in registering your child.

Camp Bus Schedule – Schedules for each pick-up and drop-off site are below. There is no fee for bus rides to summer camp. **Times are approximate.**

Mohegan/Palmer Schools pick up site:

Picks up at Mohegan at 7:30am then to Palmer at 7:45am
Returns to Palmer at 3:50pm then to Mohegan at 4:05pm

Murphy/Oakdale Schools pick up site:

Picks up at Murphy at 8:05am then to Oakdale at 8:10am
Returns to Murphy at 4:35pm then to Oakdale at 4:40pm

WEEKLY CAMP AT A GLANCE

- Week 1** Adventure Week
Trips: Roller Skating 5-12 Years Old
- Week 2** Holiday Week
Trips: Bowling 9-12 Years Old
Bowling 5-8 Years Old
- Week 3** Olympic Week
Trips: Jump Off Trampoline Park
5-12 Years Old
- Week 4** Shark Week
Trips: Ocean Beach 5-12 Years Old
Aquarium 5-12 Years Old
- Week 5** Spirit Week
Trips: CT Tiger Game 5-12 Years Old
Bounce Fun Center 5-8 Years Old
- Week 6** Wet and Wild Week
Trips: Quassy Amusement Park 5-12 Years Old
Lisbon Landing Movie 5-12 Years Old
Talent Show: August 2nd
- Week 7** Disney Week
Trips: Nomads 9-12 Years Old
Carnival Day: August 8th

Camp Bus Trips

Please check our schedule for the optional field trips on the registration form when signing up your child for camp. There are some fun choices you may want to add to your camp weeks. Be sure to check the appropriate age group for your child's trips.

If registering for any field trips the coinciding week (s) must be paid for otherwise the trip (s) will be removed from your household. Wait list will require payment up front and if you don't get put on the trip money is refunded.



Camp Dismissal Form

Childs Name _____

Parent/Guardian Signature _____

By signing this form, I agree to the dismissal policy set by the Montville Parks & Recreation Department.

Please select only one means of dismissal for your child. This needs to remain consistent for the entire duration of the summer camp program. It cannot change daily.

Parent Pick-up _____ (Please check here)

Bus Transportation _____ (Please circle below which bus child will use)

Mohegan/Palmer Bus or Murphy/Oakdale Bus (Choose One/Please Circle)

Picks up at Mohegan at 7:30am then to Palmer at 7:45am – Returns to Palmer at 3:50pm then to Mohegan at 4:05pm

Picks up at Murphy at 8:05am then to Oakdale at 8:10am - Returns to Murphy at 4:35pm then to Oakdale at 4:40pm

(Times are approximate)

Please list the names of all individuals that have permission to pick-up your child.

Please list a home or cell phone also, ID is required for all names on the list.

No child will be released to anyone other than the names on the list.

1. _____

2. _____

3. _____

4. _____

5. _____

**YOU MUST MAIL THIS FORM TO OUR OFFICE AT
310 NORWICH-NEW LONDON TPKE.UNCASVILLE, CT 06382
OR EMAIL TO: cbunnell@montville-ct.org**

FLIGHT FIT N FUN (MANCHESTER) LLC d/b/a JUMP OFF

PERPETUAL PARTICIPANT AGREEMENT, ACKNOWLEDGEMENT OF RISK, ASSUMPTION OF RISK RELEASE OF LIABILITY AND CONSENT TO USE OF LIKENESS AND PHOTOGRAPHS

NOTICE: READ THIS FORM COMPLETELY AND CAREFULLY.

In consideration of being allowed to use the facility and to participate in the services and activities, including, but not limited to, trampoline park access, trampoline dodge ball, trampoline basketball, aerial training, fitness classes, trampoline courts, laser race, ninja warrior obstacle course, foam pit activities, snack bar access and any other amusement activities (collectively, "ACTIVITIES") provided by FLIGHT FIT N FUN LLC, its agents, owners, affiliates, franchisors, franchisees, officers, directors, volunteers, participants, employees, suppliers, vendors, landlords, insurers and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "FFF"), I, on behalf of myself, my spouse, my children, my parents, my heirs, assigns personal representatives, estate, insurers, and on behalf of any minor on whose behalf I sign this Agreement, hereby acknowledge, affirm, and agree to the following:

_____(INITIAL) (1) AFFIRMATION OF AUTHORITY: Under penalty of perjury, by signing below, I hereby represent and affirm that I am the parent/legal guardian of the minor(s) listed herein, or otherwise have the legal authority to sign this Agreement on behalf of any minors whose names appear on this Agreement. I further acknowledge, understand and appreciate that FFF is relying upon this representation in allowing any such minor to participate in the ACTIVITIES.

_____(INITIAL) (2) ACKNOWLEDGEMENT, UNDERSTANDING AND APPRECIATION OF THE RISKS: I acknowledge, understand and appreciate that my participation, and/or the participation of my child(ren) and/or ward(s), in the ACTIVITIES entails known as well as unanticipated risks that could result in death, serious physical or emotional injury, paralysis, or damage to me, my child(ren), my ward(s) and to any minors on whose behalf I sign this Agreement, to property, or to third parties. I further acknowledge, understand and appreciate that such risks simply cannot be eliminated without jeopardizing the essential qualities of the ACTIVITIES. These risks include, among other things: slipping and falling; collision with fixed objects or people; injuries caused by stepping on or falling on equipment or items that have fallen from or were dropped by myself or another participant; injuries including, sprains, fractures, scrapes, bruises and cuts, dislocations, pinched fingers and serious injuries to the head, back, or neck; injuries arising out of the negligence of or otherwise caused by other participants, myself, my child(ren), my ward(s) and any minor upon whose behalf I sign this Agreement; injuries due to the physical or mental condition or any medical condition that I, my child(ren), my ward(s), or any minor on whose behalf I sign this Agreement may have whether known or unknown; injuries due to physical contact with others, including the risk of contracting illness or coming into contact with germs, bacteria or fungi whether by contact with equipment or with another participant, and any and all risks associated with exercise, physical exertion and physical activities (hereinafter referred to collectively as the "RISKS").

_____(INITIAL) (3) ASSUMPTION OF THE RISKS: I expressly agree and promise to accept and assume all the RISKS arising from my participation in the ACTIVITIES. My participation in the ACTIVITIES at FFF is purely voluntary, and I elect to participate despite the RISKS.

I AGREE THAT MY AND MY MINOR CHILD(REN)/WARD(S) PARTICIPATION AT FFF INVOLVES ENGAGING IN POTENTIALLY DANGEROUS ACTIVITIES. I FURTHER AGREE ON BEHALF OF MYSELF AND MY MINOR CHILD(REN)/WARD(S) THAT, EVEN IF FFF USES REASONABLE CARE IN PROVIDING ACCESS TO THESE ACTIVITIES, THERE IS A CHANCE I OR MY MINOR CHILD(REN)/WARD(S) OR ANY CHILD ON WHOSE BEHALF I SIGN THIS AGREEMENT MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THE ACTIVITIES BECAUSE THERE ARE DANGERS INHERENT IN THE ACTIVITIES. BY SIGNING THIS AGREEMENT, I AM GIVING UP MY MINOR CHILD(REN)'S/WARD(S)' RIGHT, THE RIGHT OF ANY MINOR ON WHOSE BEHALF I SIGN THIS AGREEMENT, AND MY OWN RIGHT TO RECOVER FROM FFF IN A LAWSUIT FOR ANY DAMAGES, INCLUDING PERSONAL INJURY, BODILY INJURY, OR DEATH TO ME OR MY CHILD(REN)/WARD(S), OR MINORS ON WHOSE BEHALF I SIGN THIS AGREEMENT, OR ANY PROPERTY DAMAGE, THAT RESULTS FROM THESE RISKS. I HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND FFF HAS THE RIGHT TO REFUSE TO LET ME OR MY CHILD(REN)/WARD(S)/MINORS PARTICIPATE IF I DO NOT SIGN THIS FORM.

_____(INITIAL) (4) WARRANTY: I certify and warrant that I and/or my minor child(ren)/wards, or any child on whose behalf I sign this agreement, are physically able to participate in all activities at FFF without aid or assistance. I am willing to assume the risk of any medical or physical condition that I and/or my child(ren), or any child on whose behalf I sign this agreement, may have. I acknowledge that I have read the rules (the "FFF Rules") governing my and/or my child(ren)'s participation in any activities and that I have explained the FFF Rules to any child(ren) listed herein. I understand that the FFF Rules have been implemented for the safety of all guests, including myself any children. I acknowledge that failure to follow the rules could result in the expulsion of myself and/or my child(ren) from FFF.

_____(INITIAL) (5) RELEASE OF LIABILITY: I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless FFF from any and all claims, demands, or causes of action, which are in any way connected with me or my child(ren)/ward(s)/minors on whose behalf I sign this Agreement participation in ACTIVITIES at FFF or me or my child(ren)'s/ward(s)'s/minor(s)' use of FFF's equipment or facilities, including, to the extent permitted by law, any such claims that allege negligent acts or omissions of FFF. I understand that this perpetual release/waiver will apply to each occasion that I or my child(ren)/ward(s) visit an FFF facility.

_____(INITIAL) (6) ATTORNEYS' FEES, INSURANCE: Should FFF, or anyone acting on its behalf, be required to incur attorneys' fees and costs to enforce this Agreement, including but not limited to, attorneys' fees and costs incurred to defend against claims brought by me, or on behalf of my child(ren)/ward(s), minors on whose behalf I sign this Agreement, or by third parties, I agree to indemnify and hold FFF or anyone acting on its behalf harmless for all such fees and costs. I warrant that I have adequate insurance to cover any injury or damage I may cause or suffer while participating in the ACTIVITIES, or else I agree to bear the costs of such injury or damage myself. By signing this agreement, I agree that I and/or my personal insurance carrier will be responsible for injury or damages caused by myself and/or any minors listed on the waiver.

_____(INITIAL) (7) PHOTO RELEASE: By entering FFF and participating in the ACTIVITIES, I hereby grant FFF on behalf of myself and on behalf of my child(ren)/ward(s), the irrevocable right and permission to photograph and/or record me or my child(ren)/ward(s) in connection with FFF and to use the photograph and/or recording for all purposes, including advertising and promotional purposes, in any manner and in any media now or hereafter known, in perpetuity throughout the world, without restriction as to alteration. I waive any right to inspect or approve the use of the photograph and/or recording and acknowledge and agree that the rights granted to this release are without compensation of any kind.

____(INITIAL) (8) PERSONAL PROPERTY: I understand that FFF is not responsible for any property brought onto the premises. This includes the use of lockers and cubby storage. By signing this form, you release FFF from all liability of property and monetary loss of all personal property lost or stolen on our premises.

____(INITIAL) (9) APPLICABLE LAW/VENUE/ARBITRATION: Any controversy between the parties hereto involving any claim arising out of or relating to use of the facilities, participation in the ACTIVITIES, or otherwise arising out of or relating to this agreement shall be submitted to and be settled by final and binding arbitration in Hartford County, Connecticut, in accordance with the then current Commercial Arbitration Rules of the American Arbitration Association. In the event of litigation to enforce arbitration or settlement between the parties to this agreement, or in the event arbitration is not available, then I agree to venue in the Courts of Hartford County in the State of Connecticut. I agree that the substantive law of Connecticut shall apply in that action without regard to the conflict of law rules of that state, and I agree to, and hereby do, waive the right to a trial by jury. If, despite the representations made herein, I or anyone on behalf of myself and/or minors identified in this waiver, file or otherwise initiate a lawsuit against FFF, in addition to my agreement to defend and indemnify FFF, I agree to pay within 60 days liquidated damages in the amount of \$5,000 to FFF. Should I fail to pay this liquidated damage amount within the 60-day time period provided by this Agreement, I further agree to pay interest on the \$5,000 amount calculated at 12% per annum.

____(INITIAL) (10) SEVERABILITY: I agree and understand that this agreement is intended to be as broad and as inclusive as permitted by law in the state of Connecticut and if any portion of this agreement is found to be void or unenforceable, the remaining document shall remain in full force and effect.

____(INITIAL) (11) NO OTHER REPRESENTATIONS, WARRANTIES, PROMISES, ETC.: I understand and affirm that there are no other representations, warranties, promises, or understandings, written or oral, regarding the subject matter of this Agreement, and that I will bound by the terms of this Agreement. I further understand that any amendment, change, or modification of this Agreement must be in writing and signed by FFF to change any term contained herein.

By signing this document, I understand that I may be found by a court of law to have forever waived me and my child(ren)/ward(s) and minors on whose behalf I have signed this Agreement right to maintain any action against FFF based on any claim from which I have released FFF and any released party herein. I have had reasonable and sufficient opportunity to read and understand this entire document and consult with legal counsel or have voluntarily waived my right to do so. I knowingly and voluntarily agree to be bound by all the terms and conditions set forth herein. I represent that I have the actual authority to and do hereby enter into this agreement on behalf of, and as an authorized agent of, the parents of any minor on whose behalf I am signing this Agreement, or as the parent or legal guardian of any child(ren)/ward(s) listed on this agreement. I have read and knowingly and voluntarily have signed this agreement and specifically the release contained herein and further agree that no oral representations, statements or inducements have been made to me.

By signing below, I affirm, understand and agree to the above terms in their entirety.

Parent or Legal Guardian Signature (Only 18 or Older can sign for themselves)

First Name: _____ Last Name: _____ Date: _____

Birth Date: _____ Phone: _____ Email: _____

Signature: _____

ENTER FULL NAME AND BIRTH DATE OF ALL FAMILY MEMBERS UNDER THE AGE OF 18

First Name #1: _____ Last Name #1 _____ Birth Date _____

First Name #2: _____ Last Name #2 _____ Birth Date _____

First Name #3: _____ Last Name #3 _____ Birth Date _____

First Name #4: _____ Last Name #4 _____ Birth Date _____

First Name #5: _____ Last Name #5 _____ Birth Date _____