



2017 Summer Camp Camper Change Form



Camper's First and Last Name: _____

Currently Registered For (circle all that apply):

Summer Adventure Summer Swim Camp Camp Clubhouse

Parent/Guardian E-Mail Address: _____

Parent/Guardian Phone Number: _____

Please check all that apply.

_____ *I would like to switch my child from _____
to _____.*

_____ *I would like to add my child to _____.*

_____ *I would like to remove my child from _____.*

By signing this, I confirm that I would like to remove/add/switch my child's week(s) of camp as stated above. I agree that my child will attend camp only on the weeks for which I have registered him/her. I understand that if I would like to remove/add/switch another week of camp that I will be asked to complete this form again.

Parent/Guardian Signature: _____

Date: _____

_____ *I would like to add my child to "Camp Clubhouse" for
Monday, August 21st to Friday, August 25th.*

"Camp Clubhouse" Only: I understand that this camp is held at Watertown Boys & Girls Club. I understand that the camp runs from 8:00 a.m. to 5:30 p.m. and that I may be charged a late fee if I pick my child up after 5:30 p.m. I understand that all statements initialed and signed on the "Summer Adventure Registration Form" also apply to "Camp Clubhouse". I agree to pay \$195.00 for "Camp Clubhouse" and \$10.00 for a summer membership, unless otherwise specified by WBGC Staff.

Parent/Guardian Signature: _____

Date: _____