

Camp Keyspot 2019 Registration Packet



10% OFF all fees when Paid in Full by May 3, 2019

***Camp Keyspot 2019
1920 Magnolia Way
Walnut Creek CA 94595
(925) 939-1543
www.keyspot.org
info@keyspot.org***

AM Activities = 9:45am - 11:15am

PM Activities = 2:00pm - 3:30pm

Camp Keyspot 2019 Calendar

Swim Day = 1:00pm - 4:30pm

Fieldtrip Day = See weekly Email for details

| | MON | TUE | WED | THU | FRI |
|--------|--|--|--|--|--|
| Week 1 | 17-Jun AM - SUPER STATIONS PM - THEME ACTIVITIES | 18-Jun AM - SUPER STATIONS PM - THEME ACTIVITIES | 19-Jun AM - SUPER STATIONS PM - SWIM DAY | 20-Jun FIELDTRIP DAY Pizza and Bowling | 21-Jun AM - HITS PM - BYOT/BYOW/MOVIE |
| Week 2 | 24-Jun AM - SUPER STATIONS PM - THEME ACTIVITIES | 25-Jun AM - SUPER STATIONS PM - THEME ACTIVITIES | 26-Jun AM - SUPER STATIONS PM - SWIM DAY | 27-Jun FIELDTRIP DAY Alameda County Fair | 28-Jun AM - HITS PM - BYOT/BYOW/MOVIE |
| Week 3 | 1-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 2-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 3-Jul AM - SUPER STATIONS PM - SWIM DAY | 4-Jul CLOSED Independence Day | 5-Jul AM - HITS PM - BYOT/BYOW/MOVIE |
| Week 4 | 8-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 9-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 10-Jul AM - SUPER STATIONS PM - SWIM DAY | 11-Jul FIELDTRIP DAY Discovery Kingdom | 12-Jul AM - HITS PM - BYOT/BYOW/MOVIE |
| Week 5 | 15-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 16-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 17-Jul AM - SUPER STATIONS PM - SWIM DAY | 18-Jul FIELDTRIP DAY Prewitt Water Park | 19-Jul AM - HITS PM - BYOT/BYOW/MOVIE |
| Week 6 | 22-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 23-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 24-Jul AM - SUPER STATIONS PM - SWIM DAY | 25-Jul FIELDTRIP DAY Adventure Day | 26-Jul AM - HITS PM - BYOT/BYOW/MOVIE |
| Week 7 | 29-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 30-Jul AM - SUPER STATIONS PM - THEME ACTIVITIES | 31-Jul AM - SUPER STATIONS PM - SWIM DAY | 1-Aug Keyspot Walk About Discover Walnut Creek | 2-Aug AM - Pool Day PM - KEYSLOT OVERNIGHTER |

| | |
|--|-------------------------|
| CHILD LAST NAME: _____ | CHILD FIRST NAME: _____ |
| DOB: _____ | ENTERING GRADE: _____ |
| KNOWN ALLERGIES: _____ | |
| CHILD IN THE CUSTODY OF: CIRCLE ONE MOTHER FATHER BOTH OTHER: | |

CONTACT INFORMATION

| PARENT/GUARDIAN 1 | PARENT/GUARDIAN 2 |
|--|--|
| LAST NAME: _____ | LAST NAME: _____ |
| FIRST NAME: _____ | FIRST NAME: _____ |
| MOBILE #: (_____) _____ | MOBILE #: (_____) _____ |
| ALT PHONE #: (_____) _____ | ALT PHONE #: (_____) _____ |
| ADDRESS: _____ | ADDRESS: _____ |
| CITY: _____ | CITY: _____ |
| STATE: _____ ZIP: _____ | STATE: _____ ZIP: _____ |
| EMAIL: _____ | EMAIL: _____ |
| RELATIONSHIP TO CHILD: _____ | RELATIONSHIP TO CHILD: _____ |

CHILD MEDICAL INFO

| | |
|---|---|
| INSURANCE CARRIER: _____ POLICY #: _____ DR NAME: _____ DR PHONE #: (_____) _____ DDS NAME: _____ DDS PHONE #: (_____) _____ | <p style="text-align: center;">CONSENT FOR EMERGENCY TREATMENT</p> <p>As the parent or authorized representative, I hereby give consent to Parkmead Keyspot Inc. To obtain all emergency medical or dental care prescribed by a duly LIC physician(MD), Osteopath(DO), or Dentist(DDS) for the above named child. This care may be given under whatever conditions are necessary to preserve life, limb, or well being of the child named above.</p> <p style="text-align: right;">Initial: _____ Date: _____</p> |
|---|---|

EMERGENCY CONTACTS Please list individuals within a 10 mile radius of the site

| EMERGENCY CONTACT 1 | EMERGENCY CONTACT 2 |
|------------------------|------------------------|
| NAME: _____ | NAME: _____ |
| PHONE #: (_____) _____ | PHONE #: (_____) _____ |

AUTHORIZED CHECK OUT PERSONS

| PERSON 1 | PERSON 2 |
|------------------------|------------------------|
| NAME: _____ | NAME: _____ |
| PHONE #: (_____) _____ | PHONE #: (_____) _____ |

DEWING PARK SWIM CLUB WAIVER

Please read and initial

| | | |
|-----------------|--|---|
| INITIALS: _____ | | Parkmead Keyspot Inc. (PKI) swimmers make use of the the Dewing Park Swim Club (DPSC) facilities at their own risk and assume all liability for any harm to them resulting from use of the DPSC facilities. Children under the supervision of PKI must have and prove valid medical insurance to use the facilities. DPSC abides by all the county regulations and will provide certified lifeguards who will be on duty while children supervised by PKI are in the swimming pool. |
|-----------------|--|---|

OFF-SITE PERMISSION

| | | |
|-----------------|--|---|
| INITIALS: _____ | | I give consent for PKI to accompany my child away from the Parkmead School site for such activities as fieldtrips, and swimming. My child may be transported by foot, bike, chartered bus, public transportation, or by private vehicle when notified. I understand that any private automobile and its driver used to transport my child will meet or exceed the insurance guidelines set forth by the Walnut Creek School District. |
|-----------------|--|---|

CAMP KEYSLOT 2019 SUMMER CONTRACT

| Full Week "FW" M-F 7:00am - 6:15pm \$300.00 | Camp Week "CW" M-F 9:30am - 4:30pm \$275.00 | Full Day "FD" No Thu 7:00am - 6:15pm \$70.00 | Half Day "HD" No Thu Any 6 Hrs \$50.00 | Field Trip Day "FT" Thu Only 7:00am - 6:15pm \$90.00 |
|---|---|--|--|--|
|---|---|--|--|--|

CHILD LAST NAME: _____
 CHILD FIRST NAME: _____
 ENTERING GRADE: _____ T-SHIRT SIZE: _____

| | | | WEEKLY | MON | TUE | WED | THU | FRI | TOTAL DUE | |
|--|--------------------|---------------|-------------------------|-------|--------------|--|---------------|-------|--|----|
| WK 1 | 6/17 - 6/21 | Circle Choice | FW CW | FD HD | FD HD | FD HD | FT | FD HD | \$ | |
| WK 2 | 6/24 - 6/28 | Circle Choice | FW CW | FD HD | FD HD | FD HD | FT | FD HD | \$ | |
| WK 3 | 7/1 - 7/5 | Circle Choice | NOT AVAILABLE | FD HD | FD HD | FD HD | CLOSED | FD HD | \$ | |
| WK 4 | 7/8 - 7/12 | Circle Choice | FW CW | FD HD | FD HD | FD HD | FT | FD HD | \$ | |
| WK 5 | 7/15 - 7/19 | Circle Choice | FW CW | FD HD | FD HD | FD HD | FT | FD HD | \$ | |
| WK 6 | 7/22 - 7/26 | Circle Choice | FW CW | FD HD | FD HD | FD HD | FT | FD HD | \$ | |
| WK 7 | 7/29 - 8/2 | Circle Choice | FW CW | FD HD | FD HD | FD HD | FT | FD HD | \$ | |
| <p align="center">IF YOU PAY ALL SUMMER FEES BY MAY 3, 2019 THEN TAKE 10% OFF YOUR TOTAL FEES</p> | | | | | | | | | SUBTOTAL | \$ |
| | | | | | | | | | 10% OFF IF PAID IN FULL BY 5/3/19 | \$ |
| <i>WEEKS 1-4 FEES</i> | | | <i>WEEKS 5-7 FEES</i> | | | \$100 LATE REG FEE AFTER 6/7/19 | | | \$ | |
| <i>DUE May 3, 2019</i> | | | <i>DUE June 7, 2019</i> | | | TOTAL DUE FOR THE SUMMER | | | \$ | |

Office Use Only: Date RCVD: / /

Payments RCVD: