

**Hester's Fitness Camp**  
**2009 Registration Form**

To register for camp, please submit the completed registration form along with the payment to Hester's Family Fitness & Recreation Center. You can drop off, mail, or e-mail in your registration form to 4300 Blue Lick Road, Louisville, KY 40229.

**The daily / weekly payments are due on the first day you arrive for that camp week.**

Please fill out all pages completely.

Are you a member at Hester's: YES \_\_\_ or NO \_\_\_      Would you like some information about Hester's: YES \_\_\_ or NO \_\_\_

**Camper's Information**

Camper's Name: \_\_\_\_\_ DOB \_\_\_ / \_\_\_ / \_\_\_ shirt size \_\_\_\_\_ School: \_\_\_\_\_  
Camper's Name: \_\_\_\_\_ DOB \_\_\_ / \_\_\_ / \_\_\_ shirt size \_\_\_\_\_ School: \_\_\_\_\_  
Camper's Name: \_\_\_\_\_ DOB \_\_\_ / \_\_\_ / \_\_\_ shirt size \_\_\_\_\_ School: \_\_\_\_\_  
Camper's Name: \_\_\_\_\_ DOB \_\_\_ / \_\_\_ / \_\_\_ shirt size \_\_\_\_\_ School: \_\_\_\_\_

**Parent/ Guardian Information**

Parent / Guardian Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

**Emergency Contacts/Authorized pick-up information**

In addition to the parents/guardians listed above, I authorize the following people to pick up the child/children and/or be contacted in an emergency:

Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

**Physician/Insurance information**

Name of Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_  
Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

**Medical Information**

Does your child have any physical conditions or medical problems that we should know about? \_\_\_\_\_

Does your child have any Allergies? \_\_\_\_\_

Does your child require special medication or routines? \_\_\_\_\_

Please give instructions: \_\_\_\_\_

Does your child have any physical conditions or medical problems that we should know about? \_\_\_\_\_

Does your child have any Allergies? \_\_\_\_\_

Does your child require special medication or routines? \_\_\_\_\_

Please give instructions: \_\_\_\_\_

<p><b>Price Information</b> \$25.00 daily / \$90.00 a week = 1 child \$40.00 daily/ \$145.00 a week = 2 children \$50.00 daily / \$180.00 a week = 3 children \$50.00 Registration Fee / Family</p>
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**NOTE: Registration Fee is good for the entire year.**  
**All campers who paid Registration in Summer of 2008 will need to pay the Registration Fee starting March 30, 2009.**

**Parent/Guardian agreement**

I have the legal authority to sign up the child/children named on this form and to the best of my knowledge, the information on this application form is complete and accurate. I further understand that this is an application and the named child/children's participation is contingent upon space being available in the programs in which I want the child/children to participate. I also understand that once my application is confirmed, I must complete payments by the deadlines of said programs. I understand that Hester's prohibits any type of marital or custody disputes to happen on the premisses. The health history is correct to my knowledge, and the aforementioned child/children have my permission to be cared for and by the director of the program.

**Signature of Parent/Guardian:** \_\_\_\_\_

I give Hester's Permission to take my child's photo for promotional use while attending camp:(Initial)\_\_\_\_\_

Please write the child/children's name in the box provided, if they plan on attending that week of camp:

Dates	Description	Child/ Children's Name
March 30 - April 3, 2009	Spring Break Camp	
May 1, 2009	Racing Day	
June 3 - June 5, 2009	Basketball Week	
June 8 - June 12, 2009	Rock Climbing Week	
June 15 - June 19, 2009	Karate Week	
June 22 - June 26, 2009	Health & Fitness Week	
June 29 - July 3, 2009	Adventure Week	
July 6 - July 10, 2009	Multiple Sports Week	
July 13 - July 17, 2009	Baseball / Softball Week	
July 20 - July 24, 2009	Health & Fitness Week	
July 27 - July 31, 2009	Entertainment Week	
August 3 - August 7, 2009	Football & Soccer Week	
August 10 - August 14, 2009	Multiple Sports Week	

**Hours of operation:** Monday - Friday 6am - 6pm You may pick up and drop off at anytime.

**Payment:** Parent or Guardian is responsible for paying on the first day of attendance for each week.

**Lunch and snacks:** Each child is responsible for their own lunch and two (2) snacks everyday.

**Items to bring:** Plastic tote to hold a blanket, pillow, and extra change of clothes (please mark with child's name).

**Camp Attire:** Please remember to wear comfortable and appropriate attire; this is a sports/fitness camp.

**Field trips:** Information will be sent home regarding field trips. Please note that there will be an additional charge for these events.

**Hester's T-shirts:** Every child will receive one shirt, and is recommended to wear it on field trips. **(ONLY APPLIES DURING SUMMER CAMP)**