***Town of Skaneateles Parks Department***

**2021 Playday Dates:**

**June 28 – August 13th**

***Jr. Playday, Playday and Senior Playday***

***2021 REGISTRATION AND MEDICAL AUTHORIZATION***

***Please check the appropriate program:***

\_\_\_\_\_ Junior Playday (entering grades K through 2) –**LOCATION Austin Park (Sims Building)**

\_\_\_\_\_ Playday (entering grades 3 through 5) –**LOCATION** **Austin Park Pavilion (Side A)**

\_\_\_\_\_ Senior Playday (entering grades 6 through 8) **Austin Park Pavilion (Side B)**

Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender:\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade Level Completed: \_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ Family Physician: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_ \_\_\_\_\_\_\_

*SPECIAL INSTRUCTIONS: (*allergies, eye glasses, heart problems, asthma, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If your child is in a sports camp during camp time, please mark where and when for pick up purposes. **\* If a field trip is planned during sports camp, camper may miss the field trip depending on time of departure.**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Updated Immunization Submitted – NO CAMPER will be allowed to attend if immunizations records have not been submitted.**

***Please Circle T-Shirt Size: (2 shirts included in registration price) –tees run small***

Youth MD Youth LG Adult SM Adult MD Adult LG

IN THE CASE OF EMERGENCY WHEN PARENT/GUARDIAN CAN NOT BE REACHED PLEASE CONTACT:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MEDICAL AUTHORIZATION

*This authorizes a licensed physician, surgeon or other recognized hospital staff member to carry out emergency medical care deemed necessary for my child/ward in an emergency when normal permission is unavailable.*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Signature of Parent/Guardian

***Town/School District Resident – Those who pay Skaneateles Town or Skaneateles School Taxes***

$240.00 1st & 2nd Child\_\_\_\_\_\_\_\_ $100.00 3rd Child\_\_\_\_\_\_\_\_\_\_ Total\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Non Resident**

$310.00 1st & 2nd Child \_\_\_\_\_\_\_ $175.00 3rd Child\_\_\_\_\_\_\_\_\_ Total\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Extra T-Shirts** $8.50 Each\_\_\_\_\_ Total\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*Late Fee $15.00 after June 4th \_\_\_\_\_\_\_\_** Total\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*T-shirt may not be available after this date. One will provided when available.*

Mail to: Parks Department, 24 Jordan Street, Skaneateles, NY 13152 or download forms at [**www.townofskaneateles.com**](http://www.townofskaneateles.com)

**Questions or Concerns - Please call Sue Murphy, 315-685-1949**