

MARINWOOD CAMPS REGISTRATION FORM

775 Miller Creek Road, San Rafael, CA 94903; Phone: (415) 479-0775; Fax: (415) 479-7759

Child's Name - first & last	Child's DOB	List Camp Name & Before/After Care	List Session #'s of Camp & or Before/After Care	Fee
		1.		
If registering for Camp Pine Cone, please check appropriate boxes: M/W/F <input type="checkbox"/> T <input type="checkbox"/> 9:00 am-12:00 pm <input type="checkbox"/> M-F <input type="checkbox"/> TH <input type="checkbox"/> 9:00 am-3:00 pm <input type="checkbox"/>		2.		
		3.		
FULL PAYMENT DUE AT TIME OF REGISTRATION REFUNDS: Cancellations made more than one week prior to camp will result in a \$25 (B&A Care \$5) per sess., per camper fee. Cancellations made less than one week prior to camp will result in forfeiture of half the camp (B&A care) fee, per sess., per camper. No refunds once a session has begun.		Save \$10/sess. off if camper is a 2011 pool member. Camper's Name on membership: _____ \$10 x ____ sessions = _____ (valid for Full-Day, Full-Week Day Camps only. Does not apply to Specialty Camps.)		-
		"Help a Camper" Scholarship Fund (optional)		+ \$1.00
PRIMARY ADULT CONTACT:				TOTAL FEES \$

First Name _____ Last Name _____

Residence Address _____ City _____ State/Zip _____

Home Phone _____ Cell Phone _____

Email _____ Emergency Contact & #: _____

Additional Information (drug, food, bee sting allergies or special needs/accommodations) Describe below:

How did you hear about our camps?

Marinwood Review Marinwood Website Facebook/Twitter Flyer Email Referral

Search Engine (please specify) _____ Banner/Sign Board Other (please specify) _____

Other Publication (please specify) _____

I hereby agree to indemnify and hold harmless the Marinwood Community Services District and its officers, employees and volunteers from and against any and all liability for any injury which may be suffered by me or by my child arising out of or in any way connected with participation in the program noted above. I recognize that bodily injury may be sustained through participation in this activity and acknowledge that I/we voluntarily accept all risks of injury. In case of emergency, my child may be treated by a qualified physician. I give permission to use my or my child's photograph in the Marinwood Review brochure or publicity.

Signature _____ Parent Guardian Date _____

The Marinwood CSD programs and facilities are available to the public without regard for race, color, national origin, or disability. Any individual that believes he/she has been subjected to discrimination, may file a complaint alleging discrimination with the Marinwood CSD to U.S. Dept. of Interior, Washington D.C., 20240.

<input type="checkbox"/> Cash	<input type="checkbox"/> Check (payable to MCSD)
Credit Card Authorization <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> American Express	
Card No.: <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	Expiration Date <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> - <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
Billing Zip Code: <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	
_____ Authorized Signature (as shown on credit card)	