

2021 Summer Nature Camp Registration Contract

There may be a material's charge for frontier skills or the art program, depending on the project.

Child's Name:	Method of Payment:
Address:	Check /Money Order
City, State, Zip:	Check/Money Order #
Email:	Cash:
Phone:	Credit Card:
Parent/Guardian Name:	Total Paid:
Grade: Age: DOB:	_

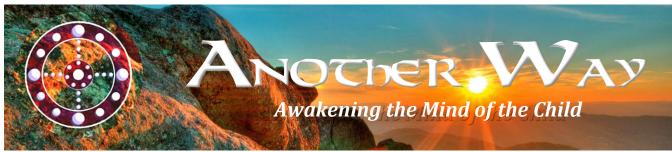
Please select Camp Session(s) ~ Camp tuition must be paid upon submission of enrollment form.

Summer Camp Monday – Thursday Children ages 4-6

Select	Camp Dates	Daily Schedule	Camp tuition
0	June 28 – July 1	9 am to 1 pm	\$625.00
0	July 5 – 8	9 am to 1 pm	\$625.00
0	July 12 – 15	9 am to 1 pm	\$625.00
0	July 19 -22	9 am to 1 pm	\$625.00
0	July 26 - 29	9 am to 1 pm	\$625.00
0	Aug 2 - 5	9 am to 1 pm	\$625.00
0	Aug 9 - 12	9 am to 1 pm	\$625.00

Emergency Contact:

Name:	Name:
Relationship:	Relationship:
Day Phone:	Day Phone:
Are there any physical concerns? No Yes	
If yes, please identify the concerns:	
Signature of Parent/Legal Guardian:	Date



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There may be a material's charge for frontier skills or the art program, depending on the project.

Youth's Name:	Method of Payment:
Address:	Check /Money Order
City, State, Zip:	Check/Money Order #
Email:	Cash:
Phone:	Credid Card:
Parent/Guardian Name:	Total Paid
Grade: Age: DOB:	

Please select Camp Session(s) ~ Camp tuition must be paid upon submission of enrollment form.

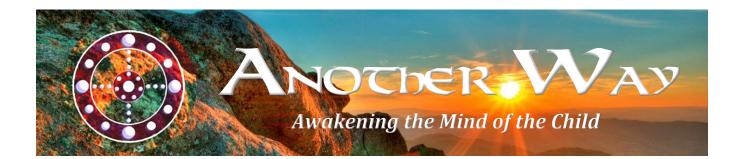
Summer Camp: Monday – Thursday Youth ages 7 - 11

Select	Camp Dates	Daily Schedule	Camp tuition
0	June 28 – July 1	9 am to 3 pm	\$750.00
0	Jul 5 - 8	9 am to 3 pm	\$750.00
0	July 12 – 15	9 am to 3 pm	\$750.00
0	July 19 - 22	9 am to 3 pm	\$750.00
0	July 26 - 29	9 am to 3 pm	\$750.00
0	Aug 2 - 5	9 am to 3 pm	\$750.00
0	Aug 9 - 12	9 am to 3 pm	\$750.00

Emergency Contact:

Name:	Name:
Relationship: Day Phone:	Relationship: Day Phone:
Are there any physical concerns? NoYes	
If yes, please identify the concerns:	

Date:



Authorization for Emergency Medical Treatment

In the event emergency medical treatment is required due to illness or injury during the process of participating in Another Way School programs or being on the property of Another Way School, I authorize Another Way staff to:

1. Secure and retain medical treatment and transportation if needed.

2. Release participant records upon request to the authorized individual or agency involved in medical emergency treatment.

Student's name:	
Address:	
City, State, and Zip:	

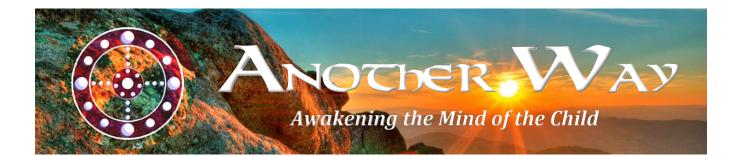
In the event of emergency, contact:

Name:	Phone:	
Relationship:		
Physician's name:		
Preferred Medical Facility:		
Health Insurance Company:		
Policy #:		

Consent Plan

This authorization includes x-ray, surgery, hospitalization, medication, and any procedure deemed "life saving" by the physician. This provision will only be invoked if the person listed below is unable to respond.

Consent Signature:		Date:	
	(Parent/Guardian)		
Print Name:		Phone:	
Address:			
City, State, Zip:			



Hiking and Equine Release Form

I give permission for my child________ to participate in the Norwegian Friluftsliv hiking and to (*interact with and ride*) the horses/ponies at **Another Way School**.

I understand that by signing this paper I am releasing Another Way School and those acting as its agents from any and all liability for both accidentally and negligently occurring injuries. In other words, I agree to hold **Another Way School and its agents** harmless for any injuries that may occur while my child interacts with and rides the horses/ponies at **Another Way**. I understand that there are inherent risks of injury involved in interacting with and riding horses and/or ponies whether or not the utmost care is taken or attention paid.

Signature Parent/guardian: ______

Date: _____

Photo/Videos Release Form

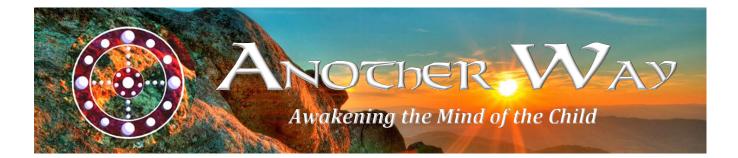
Photo/Film Release: During the course of the school day or summer camps at Another Way, photos, and videos are used for many purposes, including marketing and/or advertising. For example, on the slopes we film students skiing to see body posture and technique. Photos and videos of classroom activities are a vital part of our curriculum.

Photographic images, including both still and video, taken of the student(s) while participating in activities for and relating to **Another Way School** become the sole property of **Another Way School** including the right to assign copyrights to another entity. By signing this release form, the Parent/Guardian hereby consents to and authorizes the use and reproduction of any and all photographs, still and video, taken of the Student while participating in activities for and relating to **Another Way School**.

Parent/Guardian further understands that **Another Way School** may use photographs and videos for marketing and advertising purposes, including use on social media websites, and Parent/Guardian hereby consents to such use and waives all rights and recourse against Another Way School related to such use.

Signature Parent/guardian: ______

Date: _____



Consent for Private Transportation

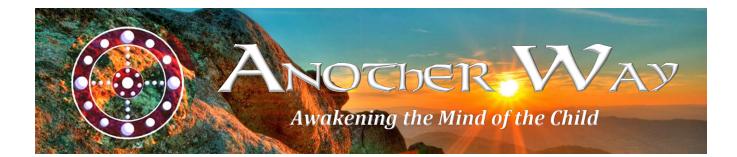
I give my child permission for my child, in attendance at **Another Way School**, to participate in local field trip activities, in private transportation.

By signing this contract I understand that I am releasing Another Way School, its employees, volunteers, board members, or any other agents, and assigns from any and all liability for both accidentally and negligently occurring injuries or loses. In other words, I agree to hold Another Way and its agents harmless for any injuries or loss that may occur while riding private vehicles connected to my child's enrollment and attendance at **Another Way School**. I understand that there are inherent risks of injury or loss involved whether or not the utmost care is taken or attention is paid.

I grant **Another Way School** permission to administer first aid or to obtain emergency medical treatment in my child's best interest. All employees are CPR certified and will administer CPR if it appears necessary as Good Samaritans with the protection of the Good Samaritan Act. Costs incurred, as a result of injury or treatment, occurring to my child within the program are my, the parent or guardian's, sole responsibility

Student Name:	
Parent/Guardian Signature:	
Printed Name:	Date:
Parent/Guardian Signature:	
Printed Name:	Date:
Accepted: Another Way School,	
Ву	Title:
Printed Name:	Date:

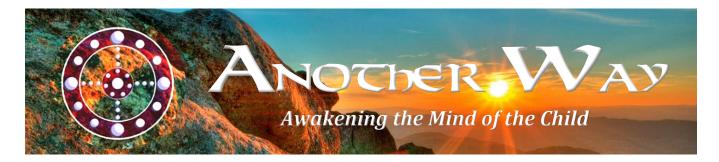
6587 Mountain View Drive * Park City, Utah 84098 * 435.615.1429 info@anotherwayschool.org * www.anotherwayschool.org



Parent/ Guardian Approval Pick Up List

I,	give my permission for,	
	to be picked up from school by:	
Name	Phone	
Name	Phone	
Name	Phone	
Photo ID is require	d when they come to pick up your child	
Sign Parent	Date /Guardian	
Sign	Date	

Parent/Guardian



Proper attire is required when at camp, not only for the safety of the camper but their comfort. *No tank tops or other inappropriate attire.*

Equestrian Checklist

What to bring:

- Leather shoes or boot with minimum one half inch heel
- Appropriate shirt (light in color and can be tucked into pants)
- Long Leg Pants (preferable no heavy inseams as in Levis)
- Sunglasses
- Sunscreen
- Jacket shell
- Water bottle (prefilled 16 ounce water bottle)
- Riding or mountain bike gloves

If you have this item, please bring it: Equestrian Helmet (mountain bike helmet acceptable). Please make sure all related camp items fit into a youth or small child's backpack.

Norwegian Friluftsliv Checklist Outdoor Nature Day hikes

- Large sport whistle
- Water bottle (16 ounces)
- Compass
- Sunglasses and sunscreen
- Bugspray
- Light rain gear or Poncho (small and compact)
- Small flashlight or headlamp
- Small First Aid Kit
- A youth or small child's backpack with chest strap and water pouch
- Light colored, durable clothing (full length pants & light colored shirt for hiking)
- Jacket or shell appropriate to that day's weather and temperature
- Appropriate hiking shoes (no court style tennis shoes as must have off trail tread)
- Extra snacks along with their packed lunch

PLEASE PUT YOUR CHILD'S NAME ON EVERYTHING! Children bring their own lunches and snacks.