



TOWN OF PELHAM
PARKS & RECREATION
DEPARTMENT



6 Village Green
Pelham, NH 03076

Email: recreation@pelhamweb.com
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(603) 635-2721
Fax (603) 508-3094

SUMMER CAMP REGISTRATION FORM

Circle your choice and indicate weeks:

- **6-week camp:** July 6–August 14, 2026
- **3-week option(s):** _____
- **1-week option(s):** _____

Week 1: 7/06-07/10 **Week 2:** 7/13-07/17 **Week 3:** 7/20-07/24 **Week 4:** 7/27-07/31

Week 5: 8/03-08/07 **Week 6:** 8/10-08/14

There is no attendance requirement for your chosen week(s) and no proration of fees beyond what is outlined here.

CIRCLE one: **Juniors** (ages 6-7) **Middies** (ages 8-9) **Intermediates** (ages 10-11)
Seniors (ages 12-13/14)

CHILD NAME: _____ **AGE (as of 7/1/26):** _____

ADDRESS: _____ **Town/State** _____

PHONE: _____ **Email address:** _____ **Parents Names:** _____

T-shirt Size: (circle one) Youth Small - Youth Med - Youth Large - Youth XL - Adult Small - Adult Med.

NOTE REGARDING T-SHIRTS: The camp tees will be passed out the first day they attend camp. One per camper.

Friend Request: (Maximum friend request is two-**Not Guaranteed**-): _____

While we understand the importance of campers wanting to be with friends, it can be very difficult to accommodate friend requests. We will do our best but cannot guarantee placement.

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration of the permission granted to the participant named in the Pelham Parks and Recreation Summer Camp, I/we shall release, waive, discharge and covenant not to sue the Town of Pelham, Parks and Recreation Dept., their agents and employees, from all liability from any and all loss or damage and any claim or demands thereon on account of injury to the person or property or resulting in death of the name participant except in the case of gross or willful wanton negligence of the Town of Pelham, Parks and Recreation Dept., its agents and employees or otherwise while the named participant participates in the Pelham Parks and Recreation Summer Camp at any of the Town's park facilities.

I/we further agree to indemnify the Town of Pelham, Parks and agents, Recreation Dept, their agents and employees from any and all liability, loss or damage including but not limited to bodily injury, illness, death or property damage which the Town of Pelham, Parks and Recreation Dept, their agents and employees become legally obligated to pay, including reasonable attorney's fees and costs, as a result of claims, demands, costs or judgments against the Town of Pelham, Parks and Recreation Dept., their agents and employees on account of injury to the person or property or resulting in the death of the named participant, except in the case of gross or willful wanton negligence of the Town of Pelham, Parks and Recreation Dept., their agents or employees and whether or not such liability is sole, joint or several.

I/we am aware that participation in this program may present a strain on my child's body, or its parts and there I represent to the Town of Pelham, Parks and Recreation Dept. that to the best of my knowledge, my child is in proper physical condition to allow him/her to participate and that I/we assume the risk of participating. I acknowledge that I have received and read the General Information form given with registration, including but not limited to the zero-tolerance policy and absence of medical personnel as it pertains to the playground and other programs.

I/we understand that the above program may involve traveling to various activity sites. I/we accept full responsibility for the transportation of my child to and from these activities and I/we release, indemnify and hold harmless persons providing such transportation.

I/we understand that in case of injury or illness, I/we will be notified. If it is impossible to contact me and it's an emergency, I/we hereby give permission to the attending physician to treat, hospitalize, administer anesthesia, or to order injections or surgery for the safety of my child. I/we understand that the outline of this program is subject to change without notice and that my child may be videotaped or photographed during participation. Photos and/or videos may be added to our internet sites. I/we further agree the privileges may be revoked upon any participants at the sole discretion of the Director of Parks and Recreation.

I/we, the parent or legal guardian, the undersigned, have read this release and understand all its terms. I/we execute it voluntarily and with willful knowledge of its significance. I/we have executed this release on this date indicated next to my name.

Signature of Parent/Legal Guardian

Date

Costs for PVMP 6-wk camp: \$625/one child, \$475 for each add'l child in same family; any 3 weeks \$415, add'l child \$315; 1 week \$215, add'l child \$170. Checks payable to Town of Pelham. We accept charge cards MC/VISA/AMEX/Discover. 2.97% processing fee will apply for credit card transactions. Online registration is open for 1, 3 & 6 weeks only.