## **PELHAM PARKS AND RECREATION**

6 Village Green, Pelham, NH 03076

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

## Summer Stem Camp 2024

Cost: \$190.00/child - for ages 6-13

Participant Name:			Age:	DOB:
Address:			Town:	State:
Parent Name:		Pare	nt cell phone:	
Parent Email address:	Home phone:			
	Program Choice (Check one)			
	Circuit Make	<b>ers</b> : (ages 6-8) 9am to 12pm_		
		<b>rs</b> : (ages 9-13) 1PM to 4pm		
entertainment to be con day programs to choose 1, 2024. Must register by This program r abrasions, broken bones Any limitations regardin knowledge or skills are r	sumed but as tools from. Circuit Maker y July 22, 2024.  may pose limited rise, concussions, hear g physical capabil required to take par any physical or other parts.	s to be manipulated and a med rs (ages 6-8) from 9am to 12pm sks to the participants. These art attacks and even death. We lities should be made known rt in this program.	lium to practice creating or App Inventors (against risks may include but advise that all those put to Pelham Parks and the participant is taking the participant is taking or participant is taking the participant is taking or participant is takin	whow to use electronic devices not just as ive design in a fun engaging way. (2) half les 9-13) from 1pm-4pm. Age as of August at are not limited to bumps, bruises, cuts, participating be in good physical condition. In the Recreation Department. No prior and dietary restrictions, allergies, or it safety:
which might affect his/he needed, which will be in which are not specificall. I, the undersign Dept, its employees, agdemands of any kind for leader or resulting from the activity; provided, ho the participant during the me, if it is deemed necessity.	er participation. He good working con y foreseeable. I will ned, hereby agree thents, representative the exercise of judgowever, that nothing e course of the actions and the particles.	e/she meets the standards requidition. I assume all the risks of all the risks of the follow the rules and regulation to release, indemnify, save and es, directors, volunteers, from a corpersonal injury resulting from gment by the leader in good fait grontained herein shall excuse ivity appropriate to the circums	uired for participation of normally incidental to use provided by the act hold harmless the Total and all liability, act failure to obey safet the response to emerge any of the leaders to tance. You have my I understand that pai	all or medical conditions the participant has and will have the necessary equipment, if the nature of this activity, including risks ctivity leaders/directors/supervisors. own of Pelham, the Parks and Recreation ctions, causes of actions, debts, claims or ry regulations and directions of the activity encies and exigencies which occur during a act with reasonable care for the safety of repermission to have a physician attend to rticipation in rehearsals and performances my permission.
Executed this	_ day of	, 20	Signature	e of parent/guardian
In case of emorganou and	the parents/guardians	c cannot he reached places conto	•	, or paroningualulari
	-	s cannot be reached, please contac		Tolonhono
INAILE.		Relation		Telephone: