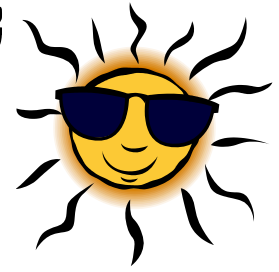


City of Independence

SUMMER PROGRAMS



2009

The City of Independence will be sponsoring youth programs throughout the summer months. These programs are for children ages **6 to 13**. Please check all programs that you plan to attend, fill out the form on the reverse side of this paper and **make checks for art supplies payable to Creative Expressions and for Basketball & Karate Camp fees make checks payable to the City of Independence.** Registration is required. Should you have any questions call Nita Brake, Parks & Recreation Director at 356-5302.

_____ June 22 to 25



Basketball Camp at Summit View Middle School Time: 8 a.m. to 11 a.m.
Fee: \$30 first child/\$25 each additional child from same family before June 10th.
After June 10th registration fee is \$35 for the first child and \$30 for each additional child. Checks made payable to "City of Independence"

Staff: Wayne Wiggins, Colerain High School- Assistant Varsity Boy's Basketball coach will be assisted by former & current college basketball players. Each camper will receive a t- shirt as well as daily instruction on the fundamentals of basketball. Awards will be given in each age group for the following: Hot Shot Champion, Knock-out Champion, Free Throw Champion, & Team Champs. Awards will be given in each age group for camper of the day as well as camper of the week.

T shirt size -Youth: M L Adult: M L XL

_____ July 10

Clay Pot Bubblegum Machine Time: 10 a.m. to noon.
Materials Fee: \$8.00 Place: Memorial Park Shelter

_____ July 13 & 14

Karate Camp at the Senior Center Time: 7 to 8:30 p.m.
Instructor Tom Turner with Kenton County Martial Arts Academy
Registration fee: \$20 per child July 3rd. After July 3rd registration fee is \$25. Awards will be given for camper of the day

_____ July 17

Sand Casting- Arts & Crafts Time: 10 a.m. to noon.
Materials Fee: \$5.00 Place: Memorial Park Shelter

_____ July 24

Bird Houses Time: 10 a.m. to noon.
Materials Fee: \$8.00 Place: Memorial Park Shelter

_____ July 31

Shoe Bird Feeder Time 10 a.m. to noon
Materials Fee: \$8.00 Place: Memorial Park Shelter

_____ Aug 3, 4 & 5

Soccer Camp at Sterling Staggs Park Time 6 to 8:30 p.m.
Staff: Independence Soccer Club Coaches Fee: \$25 per child before July 20th. After July 13th fee is \$30 per child. Each camper will receive a t-shirt as well as daily instructions on the fundamentals of soccer. Awards will be given to camper of the day and camper of the week.
 T shirt size - Youth: M L Adult: M L XL

_____ August 7

Jean Purse or backpack Time: 10 a.m. to noon
Materials Fee: \$7.00 Place: Memorial Park Shelter



Mail to: Nita Brake, Recreation Director, 5409 Madison Pike, Independence, KY 41051

Name: _____ Male ___ Female ___ Age ___

Address: _____ City _____

State: _____ Zip _____ Day Phone Number _____ Evening _____



Person to notify in case of emergency

Name _____

Telephone number _____ Relationship to Child _____



Person responsible for picking up your child must sign your child into the program when entering and sign your child out of the program when leaving. They must show I.D. in order to leave with your child.

Name _____ Telephone Number _____



Medical Consent and Waiver Form

Medical Consent Agreement

I hereby authorize the City of Independence, the Recreation Staff, or their designate to treat the above participant for any injury or illness they sustain during the summer youth program. I authorize all necessary medical treatment and admission to any hospital designated by the recreation staff if advanced care (x-rays test, etc.) is required. It is understood that the patient and their parent/guardian will be notified to grant additional authorization for any special treatment or surgical procedures if necessary.

Participant Waiver

WAIVER in consideration of my entry into this summer youth program: I, intending to be legally bound, do hereby for myself, my heirs, executors, and administrators, waiver release and forever discharge any and all rights and claims for damages, including any claims for loss damages, or injury to my person or property arising out of performance or failure of performance of the City of Independence staff, or others involved in this summer youth program and assigns of the parties named above, for any and all damages which may be sustained and suffered by me in connection with my association or entry in, and/or arising out of my traveling to, participation in and returning from this summer youth program.

Participant agrees to abide by any rules the recreation staff may have.

Participant signature _____ Date _____

Parent/Guardian signature _____ Date _____

