School of FISH day camp
Registration and Release of Liability Waiver

Registration due 2 weeks prior to the camp start date.
Submit form to: Portage Parks Dept. • 7719 S. Westnedge Ave • Portage, MI 49002

◯ Little Lunkers (Ages 7-12)	July 14 - 17 *one day will be off site - TBD	M-TH 9:00 am - 1:00pm	*Ramona Park
◯ Advanced Anglers (Ages 9-14)	August 11 - 14 *one day will be off site - TBD	M-TH 9:00 am - 1:00pm	*Ramona Park

All campers should bring a snack or lunch, hat and eye protection such as sunglasses, have sunscreen applied and arrive dressed for the weather. Please label items with child's name or initials.
Camp fee includes a fishing rod to take home at the end of camp. *Space is limited to 20 campers or less per session*

Participant Information

Name: _____ Age: ____ DOB: ____ Allergies: _____

Name (2): _____ Age: ____ DOB: ____ Allergies: _____

Address: _____

City, State, Zip: _____

Special Needs: _____

Emergency Contact Information

Parent Name: _____ Phone: _____

O/ Emergency Contact: _____ Phone: _____

Doctor: _____ Phone: _____

Registration Fees / Quantity / Payment

Registration Fees	Quantity
Little Lunkers July 14-17 $85	
Adv. Anglers Aug 11-14 $85	

Date Pd: ____ Total Pd: ____

Payment: ◯ Cash ◯ Check

TAKE ME FISHING™
takemefishing.org

Cancelation Policy: Requests for refunds must be received in writing by the Parks Office no less than 10 days prior to the camp start date.

Release of Liability Waiver

In consideration of your accepting this registration, I, intending to be legally bound waive and release all rights and claims for damages I may have against the City of Portage, its elected or appointed officials, employees, volunteers, representatives and agents for any and all injuries suffered by me and/or above participants at said activity, or which may arise out of traveling to, participating in and returning from said activity.

Parent/Guardian Signature: _____ Date: ____

Photo Permission

I, _____ give my permission for representatives of the Angling Adventures program to take photos of my child/children,
(parent or guardian)

_____ ,during daily activities. I understand the photos may be used for publicity and/or training purposes.
(child / children)

Parent/Guardian Signature: _____ Date: ____