

Camp Sertoma Registration

July 11-16, 2021

Deaf / Hard of Hearing Children
Completing Grades 2nd-8th

Camper Name _____ Gender _____ Age _____

Grade Completed Spring 2021 _____ Birthday ____/____/____

First time Camp Sertoma Camper? yes no

Parent/Guardian

Name _____

Address _____

City _____ State _____ Zip _____

E-Mail _____

Day Phone/ VP (_____) Voice Text Cell Phone(_____) Voice Text

Eve Phone (_____) Voice Text

Second Parent/Guardian or Emergency Contact _____

Address _____

City _____ State _____ Zip _____

Day Phone/ VP (_____) Voice Text Cell Phone _____ Voice Text

Eve Phone (_____) Voice Text

Payment:

____ \$125 registration fee for campers in the Great Plains Region (MN, IA, NE, SD, ND) mailed by June 15.

____ \$150 registration fee for campers in the Great Plains Region (MN, IA, NE, SD, ND) mailed after June 15.

____ \$680 registration fee for campers outside the Great Plains Region (MN, IA, NE, SD, ND).

____ \$0 registration fee for camper with financial need. Please include a copy of an acceptance letter for 2020-2021 for the free or reduced lunch program to receive a deposit waiver.

Camp Sertoma

Registration

2021

Camper Name: _____

All campers will be exposed to an environment rich in culture and FUN. Campers will be in cabins according to gender. (please check all that apply)

- ____ Camper is Deaf
- ____ Camper is hard of hearing
- ____ Camper attends a Deaf school
- ____ Camper has a cochlear implant
- ____ Camper uses an ASL interpreter in school
- ____ Camper knows some ASL
- ____ Camper is trying to learn more ASL
- ____ Camper uses ASL for communication
- ____ Camper uses Cued Speech
- ____ Camper communication is primarily oral
- ____ Other communication _____

Allergies Yes No
If Yes, allergies to: Food Medications
 Environment Other _____
 A representative from Camp Sertoma may contact you for additional information

Children requiring one-on-one attention with personal hygiene or behaviors must have a PCA (personal care attendant) attend Camp with them. There is no additional charge for this person while at Camp.

Parent/Guardian Authorization:

- Should my child need to leave camp for behavioral or medical reasons I agree to pick him/her up or make arrangements for transportation within a timely matter or may be charged an additional fee for my child’s care.
- We practice safety at all times, to the best of our ability; however, participation in camp life and activities has inherent risks and injuries sometimes do occur. With enrollment, parents acknowledge and assume financial responsibility for medical expenses and agree to hold harmless Confidence Learning Center, Sertoma Inc., its employees, and agents against any and all claims, damages and injuries.
- Camp Sertoma/ Confidence Learning Center are not responsible for the stolen/loss or breakage of clothing and equipment, including hearing equipment, and we encourage you to only bring items that would not upset the family if lost.

I hereby grant permission for the above named camper to participate in the Camp Sertoma session listed above.

 (Parent/ Guardian Signature)

 (Date)

I grant permission to Camp Sertoma to take and utilize photographs or likeness of above named camper for the use of Camp Sertoma promotions and/or future fundraising activities.

 (Parent/Guardian Signature)

 (Date)

Mail All Forms to: **Camp Sertoma**
 C/O Janeen Kleffman
 P.O. Box 944
 Grand Rapids, MN 55744

Please contact Camp Director, Janeen Kleffman, with any questions: jkleffmancampsertoma@gmail.com

Cell: voice/text/facetime: (218) 244-0538