

Day Camp Registration for 2012

THE COLORADO MOUNTAIN RANCH ** 10063 Gold Hill Road, Boulder, CO 80302 ** 303-442-4557

Your Satisfaction is Guaranteed ** Fax: 303-417-9114 ** Email: Office@ColoradoMountainRanch.com

Camper's Name _____ Likes To Be Called _____ M _____ F _____ Birthdate _____

One child per registration form please. Copy this packet if you are registering more than one child.

Address _____ City _____ State _____ Zip _____ Phone _____

Age at camp time _____ School _____ Grade in the Fall _____

Father's Name _____ Cell _____ Business Phone _____

Father's Work: Name & Address _____

Mother's Name _____ Cell _____ Business Phone _____

Mother's Work: Name & Address _____

Child lives with: Both parents _____ Mom _____ Dad _____ Grandparents _____ Other (whom?) _____

Siblings: Names and ages: _____

Your Email address: _____

In addition to those already listed above, two more contacts are required by the State of Colorado Department of Child Care. The following have my permission to sign my child out from the park or camp and may be contacted when I cannot be reached.

Name _____ Phone _____ Cell _____ Relationship _____

Address _____

Name _____ Phone _____ Cell _____ Relationship _____

Address _____

Beside the WEEKLY SESSION print the appropriate CAMP PROGRAM letter code (Please choose Camp Program with your child.)

Weekly Sessions

June 4-8 _____	Overnight _____
June 11-15 _____	Overnight _____
June 18-22 _____	Overnight _____
June 25-29 _____	Overnight _____
July 2,3,5&6* _____	Overnight _____
July 9-13 _____	Overnight _____
July 16-20 _____	Overnight _____
July 23-27 _____	Overnight _____
July 30-August 3 _____	Overnight _____
August 6-10 _____	Overnight _____

Camp Programs - Each is available every week

A)	Mountain Adventure – Ages 7-13.....	\$425 per week
H)	Horses! Focus – Ages 10-15.....	\$525 per week
M)	Mountainboarding! Focus -- Ages 10-15.....	\$475 per week
T)	Trail Blazers! Focus – Ages 10-15.....	\$475 per week
W)	Water! Focus – Ages 7-15.....	\$475 per week
G)	Gymnastics! Focus – Ages 10-15.....	\$475 per week
E)	Earth! Focus – Ages 10-15.....	\$475 per week
F)	FROLF! Focus – Frisbee Golf -- Ages 10-15..	\$475 per week
C)	CIT's! Counselors-in-Training –Ages 13-16+..	rates are per week
	Age 13 - \$475; Ages 14&15 - \$400; Age 16 \$300; Age 17 Free	

Overnights: Early enrollment for overnights is **not** necessary. Earth, Trail Blazers & CIT's may also camp out Wednesday night. All are \$55 per child per night and will be charged the week your child attends. If child has food allergies, please send special food(s) for your child. For any or all overnights my child chooses, this is my authorization for participation: Yes _____ Exceptions _____

Rates: *The July 5 week is 4 days and the Mountain Adventure rate is \$340. Along with the Registration, include either: **(1)** A \$45.00 non-refundable registration fee per family plus a \$50.00 non-refundable deposit for each week, which will be credited to the weekly rate. **OR (2)** You may pay the entire amount: (Weekly Fees plus \$45 Registration Fee). Campers may enroll for a week or more (no daily rates or make-up days). \$10 will be charged for each switched week. NOTE: Tuition is due at least 10 days in advance for each week. Please notify the office of changes or cancellations.

Please credit my account as follows: Number (1) _____ or (2) _____ above. A check for \$ _____ is enclosed. Note child's name and the week(s) you are paying for on every check. **Or** Charge my Visa _____ or Master Card _____ for \$ _____ now and in June, July or August for balances due in those months. I would also like to make a contribution to the **Mountain Summers Scholarship Fund** \$ _____.

Camper's Name _____

At North Boulder Park all children must be signed in and out. My child: May____May Not____sign himself/herself out.

Child wishes to be in group with: Name AND age_____
No more than 3 choices - must be same age – thanks. Groups are arranged in advance.

Past history of lacerations, injuries or illnesses: _____

Allergies (food, animals, etc.): _____ Activity Restrictions: _____

Special medication taken outside of camp _____ Reason _____

Medication to be taken at Camp _____ Reason _____

Medication must be in original containers and accompanied by Medication Administration Form(s) signed by you and your doctor indicating time and dosage. Please give to our staff at the park check-in table. Children need to go to the Camp Office to take their medication. Most of our activities will take place in an outdoor environment. At this altitude the sun is stronger. Send a hat and sunscreen and encourage your child to use them both.

To help keep sickness out of camp PLEASE do not send your child to camp if he/she is ill.

Any other helpful information _____

Your insurance carrier: _____ Policy# _____

Name Address Phone

Family Doctor _____

Family Dentist _____

Hospital of Choice _____

How did you hear about The Ranch? _____ Has your child attended before? _____

Acknowledgement of Risks and Agreement for Participation at The Colorado Mountain Ranch:

- I understand that there are numerous risks associated with participation in any camping activities including but not limited to hiking, horses, small farm animals, target sports, ropes courses, gymnastics, swimming, trampoline, crafts and vehicles. Activities will take place in an outdoor environment in mountainous terrain. For this and other reasons, the risks cannot be eliminated, altered or completely controlled. Some but not all of the risks include: Horses and other camp animals which are involved in some activities are sometimes unpredictable, may step on, kick or bite, may act and respond in unexpected ways to such things as sounds, movement, unfamiliar objects, persons, other animals, automobiles and weather conditions. Counselors, guides and administrators who try and use their best judgment in determining how to react to circumstances may sometimes misjudge. Weather conditions may change rapidly and cause injury directly (hail, lightning, sunburn, etc.). Equipment used may break, fail or malfunction despite reasonable maintenance and use. Natural environment and weather in connection with horses or any outdoor activity can create risk or injury from tree branches, falling, tripping, insect or animal contact, unstable surface conditions, rocks and dirt.
I give my permission for my child to ride in camp vehicles.
I give my permission to use any individual or group photographs showing my child in camp activities for publicity and other purposes.
I give my permission for my child to enter into all camp activities other than any restrictions listed, including trips away from camp premises whether on foot, horseback or by camp vehicle. I also give my permission for camp staff to apply sunscreen to my child.
I understand that in the event that my child has a medical emergency, if I cannot be reached by phone this constitutes a release for the treating physician(s) and guarantees payment. I understand The Ranch does not provide medical insurance and I am responsible for all medical bills.
I understand that any part of The Colorado Mountain Ranch program may take place on public land. I agree to indemnify and hold harmless the Department of the Interior, The United States Forest Service and the Bureau of Land Management.
I agree that my child and I will assume all of the risks whether known or unknown and do hereby release and forever discharge The Colorado Mountain Ranch, its administrators, employees and agents of any liability, with respect to any injury, illness, damage or death, occurring to my child while he/she participates in any and all camp programs, activities and transportation.
I agree that the law of the State of Colorado shall govern this document and all other aspects of my and my child's relationship with The Colorado Mountain Ranch and its agents and employees. Further, I agree that any legal proceeding concerning such relationship must be filed exclusively in the State of Colorado.

I have full custody of this child and am authorized to sign this agreement. I have read and understand the above and agree to be bound by the terms of this document.

Signature of Parent or Guardian _____ Date _____

I authorize a facsimile or email of this completed registration to serve as an original.

2012 Day Camp Registration ** The Colorado Mountain Ranch ** A Family Owned Company Since 1927

Inspected and licensed by the Colorado Department of Human Services, Child Care Division

Name _____ Date of Birth _____
 Parent/Guardian _____

COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT—CERTIFICATE OF IMMUNIZATION

VACCINE		Enter date each immunization was given				
DTP/DTaP	Diphtheria-Tetanus-Pertussis (see footnote "c" below)					
Td/DT	Tetanus-Diphtheria					
OPV/IPV	Polio					
Hib	<i>Haemophilus influenzae</i> type b					Required for children < 5 yrs of age. See footnote "j" below
Measles	Measles					The first MMR must have been given on or after the first birthday. Effective 7/1/2000, the second dose of MMR is required for Kindergarten. Written evidence of laboratory tests showing immunity to measles, mumps, rubella, polio and hepatitis B is acceptable. Attach written proof to this Certificate, or record test results and dates in the boxes at left.
Mumps	Mumps					
Rubella	Rubella					
HB	Hepatitis B					
Varicella	Chickenpox					History of disease Yes _____ year (optional) _____ (See footnote "e" below)
Other						

To the best of my knowledge, the person named above has received the above immunizations.

DO NOT SIGN UNLESS MINIMUM IMMUNIZATION REQUIREMENTS ARE MET

Signed _____ Title _____ Date _____
 (Physician, nurse or school health authority)

Name _____ Date of Birth _____

STATEMENT OF EXEMPTION TO IMMUNIZATION LAW

IN THE EVENT OF AN OUTBREAK, EXEMPTED PERSONS WILL BE SUBJECT TO EXCLUSION FROM SCHOOL AND QUARANTINE.

MEDICAL EXEMPTION: The physical condition of the above named person is such that immunization would endanger life or health, or is medically contraindicated due to other medical conditions.

Medical exemption to the following vaccine(s)

Signed _____ Date _____ Optional to list: _____
 (Physician)

RELIGIOUS EXEMPTION: Parent or guardian of the above named person or the person himself/herself is an adherent to a religious belief opposed to immunizations

Religious exemption to the following vaccine(s)

Signed _____ Date _____ Optional to list: _____
 (Parent, guardian, emancipated student/consenting minor)

PERSONAL EXEMPTION: Parent or guardian of the above named person or the person himself/herself is an adherent to a personal belief opposed to immunizations

Personal exemption to the following vaccine(s)

Signed _____ Date _____ Optional to list: _____
 (Parent, guardian, emancipated student/consenting minor)

**Administration of Medication
Provided by The Colorado Mountain Ranch**

Health issues may arise while your child is at The Ranch. Your child will be doing activities at a high altitude and may be exposed to different grasses, trees, and dust. Your child may come into The Office with an upset stomach, an unexpected allergy to horses, a cut, scrape, or splinter; or could even be in pain from constipation. With this in mind, we offer the following solutions so that we may treat your child as needed for pain and discomfort. Without this form in place, you will be asked to come up to The Ranch to administer the treatment that you prefer.

Our first line of defense is always to wash hands and face, assess the situation and proceed.

We authorize the certified medication administrator at The Colorado Mountain Ranch to use the following medications in the standard dosage for age and weight. For administration, this form must be initialed beside each authorized medication by both parent or guardian and doctor and signed and dated by both.

Child's Name _____

Initial below for each that you approve
Parent or Guardian Doctor

Bactine – topical for cuts and scrapes _____

Claritin by mouth for allergies _____

Mylanta by mouth for stomach upset _____

Tylenol by mouth for pain _____

Aloe Vera, topical for burns _____

Splinter Removal for alleviation of pain _____

Benadryl gel, topical for bites or stings _____

Parent or Guardian's Name
Address
Phone Number

Doctor's Name
Address
Phone Number

Signature of Parent or Guardian

Date

Signature of Doctor

Date

**Administration of Personally Provided Medication
At The Colorado Mountain Ranch (CMR)**

Separate forms are required for each medication

The parent/guardian of _____ asks that CMR Office Staff
(please print child's name)

give to my child, according to the Health Care Provider's signed instructions on the lower part of this form:

_____ at _____
(name of medication & dosage) (dates and times)

The Colorado Mountain Ranch agrees to administer medication prescribed by a licensed health care provider. Any unused medications will be available for parent pickup at North Boulder Park each Friday afternoon.

Prescription medications must come in a container labeled with: child's name, name of medicine, time medicine is to be given, dosage, date medicine is to be stopped, along with the licensed health care provider's name. The pharmacy name and phone number must also be included on the label. Pharmacists may provide a separate bottle with a complete printed label to keep at The Ranch.

Over the counter medication must be labeled with child's name. Dosage must match the signed health care provider authorization, and medicine must be packaged in original container.

By signing this document, I give permission for my child's health care provider to share information about the administration of this medication with staff delegated to administer medication.

Print Parent/Legal Guardian's Name Parent/Legal Guardian Signature Date
Work Phone _____ Home Phone _____

**Health Care Provider Authorization to Administer Medication at
The Colorado Mountain Ranch**

Child's Name: _____ Birthdate _____

Medication: _____

Dosage: _____ Route _____

To be given at the following time(s): _____

Special Instructions _____

Purpose of Medication: _____

Side effects that need to be reported: _____

Starting Date: _____ Ending Date: _____

Signature of Health Care Provider with Prescriptive Authority Date

Clinic Name and Phone Number _____

The Colorado Mountain Ranch

Quick Answers!

North Boulder Park:

Our staff and busses are at The Park at 7:45 each morning.

Have your child at the park no later than 8:15.

Every Child Must Be signed In and Out!

In the afternoon we arrive at 4:30 with supervision till 5:15.

What To Bring:

Every Day - your child will need to bring: Long pants, socks and shoes (no sandals, please) a light jacket or sweatshirt, water bottle, sunscreen, lunch, and other snacks, if desired. Day packs help children keep their things together.

Horse Focus Riders - along with everything listed above, bring a rain jacket and pants (not a poncho) and a water bottle that attaches around the waist or a Camelbak. Long pants and long socks are a must for all horseback riding. If you have a helmet or boots that you would like to bring, please mark them and you may keep them in the barn for the week.

Mountainboarders - yep, everything above and you must wear long pants and shoes that lace while boarding. Although The Ranch provides it, if you would like to bring your own safety equipment, please mark it with your name and you may leave it at Camp during the week.

Water Focus Campers - also, bring your bathing suit and towel every day.

Final Payment: Due 10 days before your child attends. If you registered with a credit card, we will charge your weekly balance automatically.

Refunds: If you have paid in full and need to cancel, we will refund everything except the \$45 Registration Fee and the \$50 Weekly Deposit(s).

Rates: Children may enroll one week or more. - Sorry, no daily rates or make-up days.

If you want to know more:

The complete Parent Handbook is available online at

www.ColoradoMountainRanch.com

Communications: Please call us! If you send us anything by fax or email, don't forget to check to be sure that we received it.

Phone: 303-442-4557 Fax: 303-417-9114 Email: Office@ColoradoMountainRanch.com

The Colorado Mountain Ranch

Bus Schedule

WHERE: Pick Up and Drop Off is at North Boulder Park (9th and Balsam) near the parking lot (7th and Dellwood.)

➤ Please leave the south side of Dellwood open for our busses.

WHEN: **Morning:** Supervising staff arrive at 7:45 AM. Please arrive before 8:15. The bus aims to leave for The Ranch at 8:30 AM after cross-referencing sign-ins and bus check-ons.

Afternoon: The bus arrives at North Boulder Park at 4:30 PM. Staff supervise until 5:15 PM each evening. **Please be sure to sign out** and have your child with you when you do. We try to call all parents who don't sign out to be sure that you have your child.

Park Sign In and Sign Out

Mornings: Please sign your child(ren) in, and indicate the time. Bathroom Call and Bus Loading begin at 8:10. Once a child is on the bus, he/she must stay there. Sign-ins before 8:15 are cross-referenced. Parents who sign in a child after 8:15 are responsible for being sure the child is on the bus.

Afternoons: SIGN YOUR CHILD OUT on the same sheet you signed in on. Have your child with you when you sign out with our staff. A child may sign him/herself in or out with written permission from the parent. Your child may only be released to those you have indicated on your original registration. If there are changes, please let us know in writing. If you have last minute emergency changes in plans, call us before 3:30 so that the office can let your child and the park staff know. Only those authorized to sign out your child may do so.

Bus Safety: Please ask your child to: 1) Remain seated, facing forward and keep the aisles clear; 2) Not throw any objects; 3) Use inside voices, don't distract the driver, 4) Keep head, arms and any trash inside the bus; 5) Be courteous - keep your hands and feet to yourself; 6) Be alert to traffic when leaving the bus; 7) Ask for help from the bus supervisor if needed.

The complete Parent Handbook is available online at

www.ColoradoMountainRanch.com

Save, Save, Save!!

Discounts for 2012

If your completed Registration is received with tuition paid in full by:

January 1, 2012	Take off \$40.00 per week per child
February 1, 2012	Take off \$30.00 per week per child
March 1, 2012	Take off \$20.00 per week per child
April 1, 2012	Take off \$10.00 per week per child

For all of the 2012 Camp Information

Please visit our web site at www.ColoradoMountainRanch.com