



APPLICATION FORM FOR PARTICIPANTS ENTERING GRADES 7-8

Registration is confirmed upon receipt of applicant's completed form and deposit.

Read carefully. Applicants need to complete all parts according to directions.

ADDITIONAL APPLICATIONS AND ONLINE ENROLLMENT FORM AVAILABLE AT WWW.SUMMERQUEST.ORG

PART 1 (Please Print)

Participant Name _____ Gender _____ Date of Birth _____
Address _____ Phone _____
City _____ Entering Grade (Fall 2012) _____
State _____ Zip _____ School _____
Parent 1 Name _____ Work Phone _____ Cell Phone/Pager _____
Parent 2 Name _____ Work Phone _____ Cell Phone/Pager _____
Parent 1 Email _____ Parent 2 Email _____
Special Grouping Requests: _____

PLEASE CIRCLE ALL APPROPRIATE SECTIONS

Before Care: Yes No

After Care: Yes No

T-Shirt Size: Child: L (14-16) Adult: S M L

A registration deposit of \$445 is required with enrollment. Make checks payable to SummerQuest.
Mail form, along with deposit, to: SummerQuest • 50 Gay Ave. • Clayton, MO • 63105

PART 2 (Please Print) **SUMMERQUEST EMERGENCY and MEDICAL INFORMATION**

Emergency Contacts: (IN THE EVENT THAT PARENTS ARE UNREACHABLE)

Name _____ Phone _____ Cell Phone _____
Name _____ Phone _____ Cell Phone _____

Physician _____ Phone _____

Dentist _____ Phone _____

Insurance Company: _____

Subscriber: _____ Policy#: _____

If your child is on medication, please specify: _____

Please list any of your child's known allergies (include medications, foods, insects) _____

Please circle the medication(s) below that you give consent for SummerQuest staff to administer to your child:

Acetaminophen Ibuprofen Benadryl

SummerQuest does not discriminate based on race, color, religion or national/ethnic origin in its employment or admitting practices.

PART 3 Indicate your top six activity choices.

Please rank your top **SIX** choices (#1 = first choice, etc.) after reading the descriptions of the activities in the brochure. Design the perfect two-week session with your friends!

Fine and Performing Arts

- _____ Canvas Art
- _____ Confections et la Patisserie
- _____ Dance
- _____ Iron Chef
- _____ Jewelry Making
- _____ Photography
- _____ Theater
- _____ Thread, Yarn and Fabrics

Science and Technology

- _____ Chemistry Blow Out
- _____ Claymation
- _____ Math, Patterns and Codes
- _____ Mini Med School
- _____ Moving Physics
- _____ Robotics
- _____ Rocketry

PART 4

IF APPLICABLE, PLEASE CHECK

- Special Education Services:** SummerQuest wishes to plan appropriate services and staff for all campers. Please check this box if your child receives services from the Special School District through an IEP or has a 504 plan.

PLEASE READ AND SIGN BELOW TO NOTE AGREEMENT TO TERMS

- If this application is accepted, the above parent/guardian agrees to pay all fees associated with this summer program as outlined above.
- In the event that my child needs emergency medical treatment and you are unable to reach the contacts listed above, I give my consent for SummerQuest to obtain, through a licensed medical professional and hospital of choice, such medical care that is reasonably necessary for the welfare of my child. I also agree to assume the cost for transport and treatment in such an emergency situation.
- I give permission for the image or likeness of my child to be used by SummerQuest on the camp Web site, in various camp-related publications and in media releases.

SIGNATURE OF PARENT OR GUARDIAN: _____ DATE: _____