



The Dewey School
2025 Summer Camp
Registration Form

Please complete **ONE FORM PER CHILD** and return to Alexis Matthews-Cheney, camp director.

Children will not be permitted to attend camp unless ALL required documentation and forms are complete in full. Once registration is complete, parents/guardians will receive additional forms via email through Lillio.

Camper

First and Last Name: _____
D.O.B.: _____ Age as of 7/01/2025: _____ Grade as of 9/01/2025: _____
Address: _____ City: _____ State: _____ Zip: _____

Parent/Guardian 1

First and Last Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Primary Email: _____ Phone: _____

Parent/Guardian 2

First and Last Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Primary Email: _____ Phone: _____

See page 3 for camp information

Please choose your session below.

Session	Selection
A 7/7-7/11	
B 7/14-7/18	
C 7/21-7/25	

Required Registration Form with \$25.00 enrollment fee is needed to confirm your child(s) camp enrollment. Please submit ONE FORM PER CHILD to Alexis

Matthews-Cheney, camp director.

Forms to be uploaded to HiMama

- Immunization Record: Every camper must have this form or a completed immunization exemption
- A current physical within the last 12 months
- Additional Permissions

In addition, children with medications to be taken at camp or any special conditions must fill out a medication consent form and/or individual health care plan. Please contact The Dewey School office for the form.

Deposit

An enrollment fee of \$25, per child is required at time of registration. The fee is non-refundable and cannot be transferred to other persons or camp sessions.

Payment Due Dates

Payment is due two weeks prior to the camp session start date via HiMama. Check payments must be coordinated with The Dewey School office. Failure to pay on time will result in losing your camp session spot.

Camp Handbook and Policies

Please visit <https://www.deweyschool.net/caregiverinfo> or contact The Dewey School office for individual handbooks and policies.

Cancellations, Refunds and Withdrawals

A written 2 week notice is required to withdraw your child from camp sessions. Cancellations less than 2 weeks prior to the start of camp sessions are only permitted if a child has an illness/injury requiring doctor's care and a note from a physician stating that they are unable to participate. Refunds will not be permitted otherwise.

Camp Hours

Camp hours are Monday thru Friday from 8:00am - 3:00pm.

Camp Sessions
A 7/7 - 7/11 B 7/14 - 7/18 C 7/21 - 7/25 D 7/28 - 8/1

Camp Tuition (C= 2024 Enrolled Dewey Children, CP= Camp Participant)
Ages 4 years 8 months - 9 years of age C \$265 CP \$275

MEDICAL CERTIFICATION AND AUTHORIZATION

I certify that I have informed the School of any mental, physical, or behavioral challenges that may interfere with my child's ability to participate in School activities. I have disclosed to the School all of my child's allergies to food, chemicals, or other substances.

I authorize the School to obtain or provide emergency medical care for my child and I accept financial responsibility for those services. I hereby release and hold the School harmless from any liability that might arise from such care.

FIELD TRIPS

I understand that access to the Canterbury Shaker Village is an integral part of education at the School. I authorize the School's teachers and other School personnel to escort my child on walking field trips in and around the land and structures of the Canterbury Shaker Village property.

RELEASE

I hereby release and hold harmless the School, Canterbury Shaker Village, and its officers, directors, employees, agents, and assigns from any and all liability, claims, or demands for personal injury, illness, damages, or expenses of any nature that I or my child may incur while participating in School activities. I, **on behalf of my child**, assume all risk of personal injury, illness, damage, and expense and the result of participation in School activities and give my child permission to participate in School activities.

ACKNOWLEDGED AND AGREED:

Parent/Guardian 1:

Signature: _____

Print Name: _____

Date: _____

_____ I have read the Caregiver Handbook @ www.deweyschool.net/caregiverinfo

Initials

Parent/Guardian 2:

Signature: _____

Print Name: _____

Date: _____

_____ I have read the Caregiver Handbook @ www.deweyschool.net/caregiverinfo

Initials