



## **Sportsplex at Metuchen**

### **2024 Multi-Sport Camp Registration Packet**



**Website: [www.sportsplexatmetuchen.com](http://www.sportsplexatmetuchen.com)**

**Email: [info@sportsplexatmetuchen.com](mailto:info@sportsplexatmetuchen.com)**

**Phone: 732-494-3000**



## Summer Camp Parent Checklist

### Your weekly camp fee includes:

- Sports & developmental games
- Snacks for full day campers
- Sportsplex Summer Camp T-Shirt
- Field Trips

### MULTI-SPORT CAMP POLICIES:

- Any child who is picked up after 6:00pm and is not enrolled in the aftercare program from 6:00pm - 7:00pm will be required to pay the flat after care rate of \$15 per camper.
- Any child who is picked up after 7:00pm and is enrolled in the aftercare program from 6:00pm - 7:00pm will receive a \$5 late fee per 10 minutes of lateness. For example, if you pick your child up between 7:00pm and 7:30pm, it will incur a \$30 late fee. If you pick your child up between 7:30pm and 8:00pm, it will incur a \$60 late fee and so on.
- **There are no refunds for camp. You will be granted a facility credit under management's approval, which can be used for a future camp or birthday party.**
- Any changes to your child's camp schedule must be submitted by email one week prior to the change. The Sportsplex at Metuchen cannot guarantee the availability of your new selection.
- All electronics, games, cell phones and any other items of value will not be brought to camp and **I understand the Sportsplex at Metuchen will not be held responsible for lost, broken, or stolen items brought to camp.**
- I received the Parent Handbook and give consent for all Sportsplex at Metuchen policies and procedures.

**No child will be admitted into camp until all paperwork is completed and returned to the Sportsplex at Metuchen. I have read, understand and will abide by the above policies. I have retained a copy for my records.**

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**Parent Name**

**Parent Signature**

**Date**

## EMERGENCY CONTACT/PARENTAL CONSENT FORM

<b>Child's Name</b>	<b>Birthdate</b>
<b>Home Address</b>	<b>Email Address</b>
<b>Mother's Name/Legal Guardian</b>	<b>Home Phone</b>
<b>Home Address</b>	<b>Cell Phone</b>
<b>Father's Name/Legal Guardian</b>	<b>Home Phone</b>
<b>Home Address</b>	<b>Cell Phone</b>
<b>Emergency Contact Person(s) - Name</b>	<b>Phone Number when child is in care</b>
1.)	
2.)	
<b>Person(s) to Whom Child may be released - Name/Address</b>	<b>Phone number when child is in care</b>
1.)	
2.)	
<b>Name of child's Physician/Medical Care Provider</b>	<b>Phone Number</b>
<b>Address</b>	
<b>Medical Conditions</b>	<b>Allergies (including medicine reaction)</b>
<b>Medical or Dietary Information Necessary in an Emergency Situation</b>	<b>Medication/ Special Conditions</b>
<b>Health Insurance Coverage for Child or Medical Assistance Benefits</b>	<b>Policy Number (required)</b>

**PLEASE SEE NEXT PAGE FOR THE SECOND PORTION OF THIS FORM**

**Please be sure to bring a current and valid state photo ID when picking up your child. The ID should match designated release names above.**

**PARENT OR GUARDIAN'S SIGNATURE INSIDE EACH BOX REQUIRED FOR EACH ITEM  
BELOW TO INDICATE PARENTAL CONSENT**

<b>Obtaining Emergency Medical Care</b>	<b>Administration of Minor Medical First Aid Procedures</b>
<b>Walks and Trips</b>	<b>Swimming</b>
<b>Transportation by the facility</b>	<b>Wading</b>
<b>Photographs are permitted to be taken of my child &amp; used on behalf of Sportsplex at Metuchen</b>	<b>I received a Family Handbook - Initial Here</b>

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**Printed Name of Parent/Guardian**

**Date**

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**Signature of Parent/Guardian**

**Date**



**Sportsplex at Metuchen  
Authorization for Emergency Hospital or Medical Treatment**

**All families are required to complete this form for each child.  
Children will not be permitted to attend field trips without a completed  
form.**

In case of an emergency due to illness or accident, when it is thought advisable to have immediate medical attention for my child; I hereby authorize the Sportsplex at Metuchen Summer Camp to send my child to the nearest hospital.

I agree to meet the Sportsplex at Metuchen staff at the hospital as soon as possible after being notified.

I understand that I must bear all expenses involved, including those incurred to transport my child to the hospital.

In the event of minor injury, I authorize the Sportsplex at Metuchen Summer Camp staff to administer minor first aid services to my child.

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**Child's Name**

**Date of Birth**

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**Parent/Guardian Name Printed**

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**Parent/Guardian Signature**

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**Date**

**Relationship to Child**



### Summer Camp Authorization Form

Please sign all spaces and fill in your child's name for those activities you authorize.

#### Transportation and Planned Field Trips/Unscheduled Walking Trips

I, \_\_\_\_\_, the parent/legal guardian of \_\_\_\_\_, who is my minor child, hereby give permission for my child to be transported to and from off-site locations and attend planned scheduled field trips. I agree that they may be transported by the Sportsplex at Metuchen rented Bus, rented van, or a private bus company on said trips. I also give permission for my child to go on unscheduled walking trips.

#### Unscheduled Emergency Evacuation

I, \_\_\_\_\_, the parent/legal guardian of \_\_\_\_\_, who is my minor child, hereby give permission for my child to be transported in the event of inclement weather or for the purpose of emergency evacuation.

#### Photo Release

I, \_\_\_\_\_, the parent/legal guardian of \_\_\_\_\_, who is my minor child, hereby give permission for my child's image, photograph, or other production to be taken without reimbursement for the sole purpose of advertising Sportsplex at Metuchen programs.

#### Swimming

I, \_\_\_\_\_, the parent/legal guardian of \_\_\_\_\_, who is my minor child, hereby give permission for my child to participate in recreational/instructional swimming as a part of the Sportsplex at Metuchen Camp Program. My child's swimming ability is that of (check one) \_\_\_ non-swimmer or \_\_\_ swimmer. I understand that my child will be taking part in recreational swim time.

#### Use of Hand Sanitizer/Sunscreen

I, \_\_\_\_\_, the parent/legal guardian of \_\_\_\_\_, who is my minor child, hereby (check them)  
 \_\_\_ give permission for my child to use liquid hand sanitizer containing alcohol for the purpose of removing germs during their time participating in Sportsplex at Metuchen Camp Programs.  
 \_\_\_ give permission for my child to use sunscreen (parent provided or otherwise if forgotten) for the purpose of reducing chances of sunburn during their time participating in Sportsplex at Metuchen camp programs.

#### Lost or Broken Items

I, \_\_\_\_\_, the parent/legal guardian of \_\_\_\_\_, who is my minor child, hereby agree to be aware that toys, games, electronics, and or any other items of value are not brought to the Sportsplex at Metuchen camp programs. I am aware that the Sportsplex at Metuchen will not be held responsible for lost, broken, or stolen items brought from home to camp.

\_\_\_\_\_  
Parent/Legal Guardian Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

# SportsPlex Maven LLC

## d/b/a SPORTSPLEX METUCHEN GROUP, LLC

### RELEASE AND WAIVER OF LIABILITY AGREEMENT

\*\*\*\*\* READ BEFORE SIGNING\*\*\*\*\*

Organization/Team Name \_\_\_\_\_

Participant Name \_\_\_\_\_

In consideration of being allowed to participate in any way in the program, related events and activities, I the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death.
2. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES** or others, and assume full responsibility for my participation.
3. I willingly agree to comply with terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Sportsplex Metuchen Group, LLC**, its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any **INJURY, DISABILITY OR DEATH** I may suffer, or loss or damage to person or property, **WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.**

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

X \_\_\_\_\_  
**Participant's Signature** **Age** **Date**

X \_\_\_\_\_  
**Printed Name**

**FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releases from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES**, to the fullest extent permitted by law.

X \_\_\_\_\_  
**Parent/Guardian Signature** **Date** **Emergency Phone Number(s)**

X \_\_\_\_\_  
**Printed Name**



**(PRINT WITH PACKET)**

**FOR OFFICE USE ONLY (DO NOT WRITE ON THIS PAGE):**

**PLEASE CHECK EACH ITEM AS IT WAS RECEIVED AT REGISTRATION**

- Summer Camp Parent Checklist - Signed**
- Emergency Contact form - Completed; check each line and signatures**
- Emergency Hospital or Medical Treatment - Completed by Parent**
- Authorization Form**
- Waiver of Liability**

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**Staff Name**

**Date**



