

Putnam Valley Cheer Camp

Sponsored by the Putnam Valley Parks and Recreation Department

Who: Students who are entering grades **1-8**

When: Monday June **27th** through Friday July **1st**

Time: 9:00 am to 2:00 pm

Where: Putnam Valley Middle School Gym

Cost: \$200 per camper/\$175 for each additional child

Cost includes T-Shirt for Camper

Campers should wear sneakers and bring a bagged lunch with a water bottle daily. There will be available snacks for purchase.

Camp Directors

Kelly Wilson, Nicole D'Addona, & Amanda D'Addona
Putnam Valley Varsity Cheer Coaches

Get ready to learn the fundamentals of cheerleading! Campers will learn daily cheers, dances, and work on stunting & tumbling. Campers will be placed into appropriate groups to learn these different skills.

For additional questions please contact Coach Wilson: kwilson@pvcsd.org

Please complete the Emergency Contact and Consent Form below to be submitted with your payment.

Payment Information:

Checks payable to Putnam Valley Parks and Recreation or call the PVPR office 845-526-3292 to pay with a Credit Card.

Putnam Valley Cheer Camp Informed Consent Form

I hereby give my permission for _____ to participate in 2022 Putnam Valley Cheer Camp and my child is in good health, and does not have any health related restraints that would not allow him/her to participate in such physical activity. It is my understanding that my child will comply with the policies of the Putnam Valley Parks and Recreations Department and the program instructors. My child and I are aware that participating in the Cheer Camp is a potentially hazardous activity. We assume all risks associated with participation in this sport or activity. I acknowledge that even with the best coaching, supervision, and observance of rules, injuries are still a possibility. I also understand that I have to either pick my child up or arrange to have transportation for my child each day. Further, I authorize the Program Director(s) to provide emergency treatment of any injury or illness my child may experience if qualified personnel consider treatment necessary and perform the treatment. This authorization is granted only if I cannot be reached and a reasonable effort has been made to do so.

Emergency Contact Information:

Parent/Guardian: _____ Email: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Family Physician: _____ Telephone Number: _____

Medical Conditions: _____

Any known Allergies (Medical, food, or other): _____

Child's Date of Birth: _____ Child's grade: _____

Other Person to Contact in Case of Emergency: _____

Relationship with person: _____

Home Phone: _____ Cell Phone: _____

I understand this informed consent form and agree to its conditions.

Parent/Guardian: _____ Date: _____

Program Refund Policy

A credit or refund will be given for any program canceled by the Putnam Valley Parks & Recreation Department. Once a participant has been enrolled in a particular program, refunds will not be considered, as these programs are dependent upon structure and pre-arrangement. Therefore, anyone signing up pays a non-refundable fee. Refunds would only be granted if the participant were to miss a prolonged period of time (more than half the program) due to injury/illness and is no longer able to participate for the remainder of the program. When the participant becomes ill/injured, a doctor's statement must be presented for verification. All refunds given will be prorated from the date of notification to the Recreation Department.

Note: All fees are 100% refundable if requested ten days prior to program start dates. Requested refund checks take at least two to four weeks to process. The Town of Putnam Valley will charge a \$20 service for returned checks. Inquiries regarding refunds should be directed to: Putnam Valley Parks & Recreation Department.

T-Shirt Size Selection Size

Campers Name: _____

Please Circle Size of Shirt Below:

Youth Small Adult Small

Youth Medium Adult Medium

Youth Large Adult Large

Youth X-Large Adult X-Large