



SOMERSET ACADEMY SILVER PALMS SUMMER CAMP

REGISTRATION FORM (Entering PRE-K – Entering 5th grade)

23255 SW 115th Avenue, Miami, Florida 33032

Tel. 305-257-3737 | Fax. 305-257-3751

Last Name:	_____	First Name:	_____	Middle:	_____
Birthdate:	_____	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age:	_____
Address:	_____				
City	_____	State:	_____	Zip:	_____

The \$20.00 registration fee is non-refundable & non-transferable and is in addition to the prices below. PLEASE CHOOSE A SESSION(S):

Camper/Sibling

- ☒ Registration Fee (All Sessions)\$20.00
☐ Weekly Camp (per week)..... \$195.00/\$175.00
☐ Camp paid in full by (06/9/2025).....\$1,229.00/\$1,1030.00

Camp T-shirt Size ☐ Youth S ☐ Youth M ☐ Youth L ☐ Youth XL ☐ Adult S ☐ Adult M

Full Name:	_____	E-Mail:	_____
Home:	_____	Work:	_____
		Mobile:	_____

Full Name:	_____	E-Mail:	_____
Home:	_____	Work:	_____
		Mobile:	_____

Full Name:	_____	Home:	_____
Work:	_____	Mobile:	_____
Doctor Name	_____	Doctors Phone #:	_____

If your son or daughter is taking any medication, has any medical problems, or has any allergies please specify:

If your child is not picked up by 4:00 PM, you will incur a charge of \$5.00 PER MINUTE. Initial _____

I agree to allow my child/ward to participate in the Summer Camp and affirm that my child's/ward's participation is completely voluntary. I understand that there are risks inherent in the activities my child will engage in at the Summer Camp, which may cause serious injury or even death. I also understand that, despite safety precautions, neither the Somerset Summer Camp or Somerset Academy Silver Palms or Somerset Academy, Inc. can guarantee that my child/ward will not be injured. My child/ward and I are willing to assume these risks. To minimize the risk, I have instructed my child/ward to obey all the rules, regulations and instructions of the Summer Camp. ASSUMPTION OF RISK, WAIVER OF LIABILITY, RELEASE AND AGREEMENT NOT TO SUE: In consideration for permitting me/my child/ward to participate in the Summer Camp, I voluntarily agree, for myself, my heirs, executors, and administrators, to the following: TO ASSUME FULL RESPONSIBILITY FOR ANY RISKS OR LOSS, OR PERSONAL INJURY, INCLUDING DEATH that may be sustained by me/my child/ward, or any loss or damage to property owned by me/my child/ward, as a result of training for, participating in, or traveling to or from the Summer Camp. TO RELEASE, WAIVE, HOLD HARMLESS, DISCHARGE AND AGREE NOT TO SUE the person or entity responsible for administering the Summer Camp, Somerset Academy Silver Palms, Somerset Academy, Inc., or its trustees, officers, employees, agents, students, staff, volunteers (hereinafter referred to as "releases") from any and all liability, claims, actions, demands, expenses, attorney's fees, breach of contract actions, breach of statutory duty, or other duty of care, warranty, strict liability actions, and causes of action whatsoever, that I might now have or may acquire in the future, arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, while training for, traveling to or from, or participating in the Summer Camp. I give permission for photographs taken of me/my child/ward while participating in the Summer Camp to be used in marketing/public relation's material in the promotion of Summer Camp. I give my permission to have my child in any media coverage approved by Somerset Summer Camp and any Somerset Summer Camp promotional materials. By signing below, I acknowledge that I have read, understand and agree to the terms outlined above.



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Name of Parent/Guardian

Signature of Parent/Guardian

Date

2025 Summer Camp – Agreement of Terms

PAYMENT OF FEES

1. Fees must be paid according to the payment schedule listed above. The camper may not attend camp until all fees owed are paid in full by the due date.
2. All payments are due prior to the child attending camp.
3. A non-refundable registration fee of \$20.00 must accompany the registration form.
4. No refunds will be issued for missed days or absences from summer camp.
5. Cancellations prior to June 9, 2025 will receive a 100% refund of the camp fee.
6. Payment can be made ONLY online.
7. **Late pick up after 4:00 PM incurs a \$5.00 per minute fee – NO EXCEPTIONS.**

PARENTAL CONSENT

1. If emergency medical care is deemed necessary and listed emergency contacts cannot be contacted, I authorize the Somerset Summer Camp staff to act on my behalf in granting permission for my child to receive emergency treatment.
2. I give permission for my child to participate in all planned activities and field trips.
3. I give permission for my child to be transported to and from any scheduled program activity for which transportation is provided.
4. I give permission for photographs taken of me/my child/ward while participation in the Summer Camp to be used in marketing/public relation's material in the promotion of Summer Camp. I give permission to have my child in any media coverage approved by Somerset Summer Camp and any Somerset Summer Camp promotional materials.
5. I understand the Somerset Summer Camp reserves the right to terminate enrollment. Campers who are dismissed due to conduct that is detrimental to the camp are not entitled to a refund. There are no refunds for campers expelled for inappropriate behavior.

I have read this agreement and understand it and I agree to adhere to the stated policies listed above.

Parent/Guardian's Printed Name

Signature

Date