

# Star Hill Summer Recreation Camp

## 2026 Registration Form

Please fill out one form per camper



First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Camper's School District \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Parent's Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Is the camper a Star Hill member (Y/N)? \_\_\_\_\_ Campers who are Star Hill members will earn a membership credit of \$25/week for each week they are registered for camp. CREDIT to be applied beginning Sept<sup>1</sup>

### I am registering my child as a (please check one):

- Full-Time Summer Camper: \$290/week for 7-13 year olds, \$340/week for 5-6 year olds** with 2-week vacation allowance. Full-time commitment are campers who are registered at camp every day during the summer that camp is open, and their school is not in session. Families can take 2 weeks (10 days) as vacation that they do not have to pay for. 10% sibling discounts available to full-time campers only.
- Part-time Summer Camper: \$340/week for 7-13 year olds, \$390/week for 5-6 year olds**  
Part-time commitment are campers registering for 1-8 weeks of camp during the summer.
- Partial Week Registration: \$80/day/camper.** 2 or 3 days per week option only. 6-week minimum commitment required. Please write the days the camper will be attending camp each week:  
\_\_\_\_\_

**Required Deposit** Registration will not be processed without deposit. Deposits are non-refundable and will be applied to the **last** registered week. **Deposits = 1 week full payment per camper** (full, part-time or partial week)

Please indicate (X) the weeks your child will be attending camp. Also indicate (X) if you want to register your child for swimming lessons each week (swim lessons are an additional charge of \$65/wk). Swim lessons are not available weeks 1 & 10.

		Camp	Swim Lessons
Week 1	6/22 – 6/26	_____	_____
Week 2	6/29 – 7/3	_____	_____
Week 3	7/6 – 7/10	_____	_____
Week 4	7/13 – 7/17*	_____	_____
Week 5	7/20 – 7/24	_____	_____
Week 6	7/27 – 7/31	_____	_____
Week 7	8/3 – 8/7	_____	_____
Week 8	8/10 – 8/14	_____	_____
Week 9	8/17 – 8/21	_____	_____
Week 10	8/24 – 8/28	_____	_____

\* Denotes weeks with a field trip. See Field Trip flyer

See Swim Lesson flyer for more details. Swim lessons are an additional fee.

**Participation Waiver:** In participating at Star Hill Family Athletic Center, participant/parent/guardian understands that he/she will be using Star Hill Family Athletic Center and the facilities and does so at his/her own risk. Star Hill Family Athletic Center and its owners, employees or agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant with his/her family in or about any programs on the premises. Participants and parents assume full responsibility for all injuries and damages which occur in or about any programs on the premises, he/she does hereby fully and forever release discharged hold harmless Star Hill Family Athletic Center, all associated facilities and its owner, employees, and agents from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility. In addition, he/she agree(s) to follow the rules of conduct and play set by Star Hill Family Athletic Center. Failure to do so may result in suspension from participation.

**Consent:** I the parent, guardian, or participant by signing do hereby grant authority to the staff at Star Hill Family Athletic Center to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby authorize Star Hill Family Athletic Center and its assigns to utilize any and all photographs, pictures or other likeness of campers or staff as Star Hill deems appropriate in its promotional materials.

Print Parent/Guardian Name

Signature (Parent/Guardian)



Star Hill Family Athletic Center

2026 Summer Recreation Program

**Weekly Billing Agreement**

I agree to allow Star Hill to bill my credit card every Monday for any associated fees with Star Hill's Summer Recreation Camp for that week for my child(ren). Please bill:

The credit card I have on file

The credit card below

Credit card #: \_\_\_\_\_

Expiration date: \_\_\_\_\_

Billing zip code for card: \_\_\_\_\_

CIV# (3 digits): \_\_\_\_\_

Camper's name(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date

Star Hill Admin Use (billing history)

Week 1 (6/17) \_\_\_\_\_ Week 7

(7/29)

Week 2 (6/24) \_\_\_\_\_ Week 8

(8/5)

Week 3 (7/1) \_\_\_\_\_ Week 9

(8/12)



Star Hill Family Athletic Center

*2026 Summer Recreation Program*

**Weekly Billing Agreement**

Week 4 (7/8)

Week

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10 (8/19)

Week 5 (7/15)

Week

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11 (8/26)

Week 6 (7/22)

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