



2023 Registration Form - Specialized Programs Camps

Please fill out entire registration form.

Reminder: ALL forms must be received to register for camp. Parent/Guardian must sign the Liability Waiver and the Medical Release. If medication is given at camp, a doctor's signature is also required on the Medical Release Form (this can be turned in after initial paperwork). I understand I will need to provide an aide if my child requires 1-on-1 supervision. Initial here _____

Registration limited to 6 camp sessions per camper

Camper can sign up for 3 weeks of day camp, waitlist for 2. Campers can sign up for 3 weeks of overnight camp and waitlist for 1.

Please "Check" (✓) the desired camp session(s), as well as if any of the below applies to the camper registering.

Camper uses wheelchair/walker Camper is tube-fed Camper uses Access Aide will accompany camper

DAY CAMPS: Campers can sign up for 3 weeks of day camp and waitlist for 2

RAVENNA PARK DAY CAMP SESSIONS – Please check desired session(s)

Ravenna Park 1	July 5-7	Galaxy Week	\$60 (3 days only)
Ravenna Park 2	July 31-Aug 4	Disney Week	\$100
Ravenna Park 3	Aug 28-Sept 1	Inclusion Week	\$100

SEWARD PARK DAY CAMP SESSIONS – Please check desired session(s)

Seward Park 1	July 24-28	Science and Magic Week	\$100
Seward Park 2	Aug 21-25	Fairytale and Fantasy Week	\$100

OVERNIGHT CAMPS: Campers can sign up for 3 weeks of overnight camp and waitlist for 1

CAMP LONG OVERNIGHT SESSIONS – Please check desired session(s)

Camp Long 1	July 11-14	Mystery Week	\$130
Camp Long 2	July 18-21	Spirit Week	\$130
Camp Long 3	Aug 8-11	Talent Week	\$130
Camp Long 4	Aug 15-18	Tropical Week	\$130

Camper's name: (First) _____ (Last) _____ Age: _____

Sex: Female Male Gender: _____

Address: _____ City: _____ Zip: _____

Home Phone (include area code): _____ Cell Phone: _____

Email Address: _____

Parent / Guardian Name (please print): _____

Camper Uses DDA Funding: If yes, please fill out the following information:

Case Manager Name: _____ Phone: _____

Case Manager Email: _____

Camper is approved for Scholarship.

Payment enclosed - Check payable to: City of Seattle \$ _____

Mail to: Specialized Programs • 4554 NE 41st St. • Seattle, WA 98105

Credit Card Payment - Specialized Programs staff will reach out to you by phone to take payment.

Additional Information

- Registration will be done on a first come, first served basis.
- If your camper takes medication at camp, a doctor's signature is required and will be needed two weeks prior to attending camp; registration and the rest of the Participant information Forms can be sent in before signature is acquired, so everyone gets a fair chance for getting into camp.