THERAPEUTIC RECREATION
YOUTH SUMMER DAY CAMP
REGISTRATION FORM

Registration begins April 6th, 2020
NO APPLICATIONS WILL BE ACCEPTED BEFORE THAT TIME!

Date: ______________

Participant’s Name: __________________________________________ Male or Female____________

Address/ City/ Zip: __________________________________________

Email address: __________________________________________

Parent /Guardians Name: __________________________________________

Participant’s Phone: ___________________ Age_________ Date of Birth: ___________________

Primary Diagnosis: __________________________________________

Wheelchair Accommodations: ____Yes Does participant require an aide/assistant: ____Yes _____No

*If yes, assistance must be provided by participant

*Sign up for all 6 weeks or choose which weeks you prefer.

**If you are going to be on vacation or attending another camp for a week, please be considerate and do not sign up for that particular week. Partial week/individual days are not available.

___Summer Day Camp June 8th – July 17th (6 weeks)......................... $100.00

___Week 1 June 8-12 $20.00 ___Week 4 June 29- July 3 $20.00
___Week 2 June 15-19 $20.00 ___Week 5 July 6-10 $20.00
___Week 3 June 22-26 $20.00 ___Week 6 July 13-17 $20.00

**If submitting program fees for payment by Medicaid Waiver please provide the following information:

Agency Name ________________________________ Case Manager __________________

*This price includes most outings. The camper will need money occasionally.
*This camp is active and days are filled with games, swimming, field trips, arts and crafts etc.
*Camp applications will be on a first come first serve basis, Space is very limited.
You will be notified of an accepted enrollment.

Return with check or money order. Please make checks payable to Little Rock Parks and Recreation.
You will receive additional information as camp nears including assessment information, policies and procedures, camp schedule, and other pertinent information.
If you have any questions please contact Marshall Dickey at 501-570-1131.

Little Rock Parks and Recreation
Therapeutic Recreation Division
7201 Dahlia Drive
Little Rock, AR 72209
Phone: 501-570-1131 Fax: 501-570-1139