

2026 SUMMER CAMP REGISTRATION FORM

Family Name _____ # of Children to Enroll _____

Home Phone _____ Cell Phone _____ Email _____

Street Address _____ City _____ Zip Code _____ Payment Plan Y N

Parent/Guardian Names _____ Resident NR

Participant Names	Gender	DOB	Shirt Size

Shirt Size Options

Youth Small	Adult Small
Youth Medium	Adult Medium
Youth Large	Adult Large

CAMP WEEK	LOCATION/THEME	BEFORE / AFTER CAMP CARE	TOTAL \$
WEEK #1 June 8-12	<input type="checkbox"/> Green Isle Park (All Aboard Adventure)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #2 June 15-19	<input type="checkbox"/> Green Isle Park (Reach New Heights)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #3 June 22-26	<input type="checkbox"/> Green Isle Park (Nature Navigators)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #4 July 6-10	<input type="checkbox"/> Green Isle Park (Gravity Defiers)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #5 July 13-17	<input type="checkbox"/> Green Isle Park (The Great Camp Carnival)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #6 July 20-24	<input type="checkbox"/> Green Isle Park (Christmas in July)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #7 July 27-31	<input type="checkbox"/> Green Isle Park (Camp Olympics)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #8 Aug. 3-7	<input type="checkbox"/> Green Isle Park (Superstar Showdown)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #9 Aug. 10-14	<input type="checkbox"/> Green Isle Park (Splashtastic Summer)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
WEEK #10 Aug. 17-21	<input type="checkbox"/> Green Isle Park (Camp Rewind)	<input type="checkbox"/> Before Camp <input type="checkbox"/> After Camp	\$ _____
Total:			\$ _____

Payment: When paying by mail or online, all fees are due at time of registration. **If paying in person** (1900 Libal St) the first week's fees must be paid for each child registered as well as a Bank/Credit Card Authorization form must be completed at time of registration. Balance of camp registration fees must be paid by May 10 (remaining balance on account will be deducted from bank/credit card on file on May 11). Outstanding balances after May 10 will result in forfeiture of your child's registration in unpaid weeks.

Liability Waiver: I understand participation in parks and recreation program involves elements of risk or danger for all participants and may cause serious injury, death or property loss. I agree to assume these risks for my family and release the Village of Allouez, its employees, volunteers agents and other participants from any liability for injuries and damages sustained while participating in these programs.

Signature _____ Date _____