


**KENMORE WATERFRONT ACTIVITIES CENTER (KWAC)
SUMMER YOUTH DAY CAMP 2026 –Camper Registration Form**



 Tl' awh-ah-dees Park, Kenmore, WA

 **July 20–24 (Mon-Fri)**

 **1:00 PM – 5:00 PM**

Campers will participate in exciting water activities including Kayaking, Stand-up Paddleboarding (SUP), Outrigger Canoeing, and Dragon Boating! A BBQ celebration will be held on the final day.

Please print clearly

Camper Full Name:		Preferred Name (if different):
Date of Birth:	Age (as of July 20):	T-Shirt Size (state youth/M/W size):
Grade (entering):		Gender (female/male/unspecified):
Home Address (street):		City, State, Zip:
Parent/Guardian Name:		Relationship to Camper:
Phone Number:		Email Address:
Alternate Emergency Contact Name:		Relationship to Camper:
Phone Number:		

MEDICAL & HEALTH INFORMATION

Please list any **medical conditions, allergies, medications, dietary restrictions, or physical limitations** that camp staff should be aware of.

Physician Name:	Health Insurance Provider:
Physician Phone Number:	Policy Number:

Medical Treatment Authorization

In the event of an emergency, I authorize camp staff to obtain medical treatment for my child if I cannot be reached.

Parent/Guardian Initials: _____

**All campers are required to wear life vests (provided) while in watercraft. Campers are required to be able to swim.
Can your camper swim independently?**

- Yes
- No

Parent/Guardian Initials: _____

I give permission for photos or videos of my child taken during camp activities to be used by the Kenmore Waterfront Activities Center or the City of Kenmore for promotional purposes (including website, social media, and printed materials).

Yes

No

Parent/Guardian Initials: _____

CAMPER BEHAVIOR EXPECTATIONS

To ensure a safe and positive experience for all campers, participants are expected to:

- Follow instructions from camp staff and safety leaders
- Treat other campers, staff, and equipment with respect
- Follow all safety rules during water activities
- Wear required safety gear (including life jackets)
- Use appropriate language and behavior
- Stay with their group and within designated camp areas

Campers who repeatedly fail to follow these expectations may be removed from activities or asked to leave camp.

Camper Initials: _____

Parent/Guardian Initials: _____

ADDITIONAL NOTES

Please share anything else you would like camp staff to know about your camper.

SIGNATURES

I confirm that the information provided on this form is accurate and complete.

Camper Name: _____

Camper Signature & Date: _____

Parent/Guardian Name: _____

Parent/Guardian Signature & Date: _____

PAYMENT - \$150 (scholarships are available)

Online: navigate to <https://kenmorewac.org/kwac-membership/> and select **Other Payment**. Use PayPal or a credit card and enter "camper" and your camper's name in the box that asks what the payment is for.

By check: make out the check to "Kenmore Waterfront Activities Center" and send to: KWAC Summer Youth Camp, 7353 NE 175th Street, Kenmore, WA 98028. Write your camper's name on the check in the Memo line.

Scholarship: download a scholarship form at <https://kenmorewac.org/#about-kwac>

*10 Slots are available for camp. Slots will be assigned on a first-come, first-served basis. Your camper's registration will be considered complete when the registration has been emailed to info@kenmorewac.org and *either* payment received or a scholarship application sent to the same address. If paying by check, receipt of your check must be within 14 days of registration email date. A waitlist will be maintained.