

Signature:

ARCHERY MINI-CAMP REGISTRATION

(Payment is paid directly to 1UP Recreation)

Pre-Registration is required for participation, space is limited.

Open to Sequoia's Treehouse Outdoor Adventurers Summer Day Camp @ The Farm participants.

This program occurs during the regular day camp hours and is an optional add-on activity.

Campers will spend 3 hours each day of the session with the Archery instructors reviewing basic skills and working to improve technique. In addition to learning more about archery as a sport and archery equipment, campers will participate in a variety of fun & different approaches to archery. Activities include creating targets, archery art, balloon shoot, tic-tac-toe, and much more.

Information provided will be used to create an account within 1UP Recreation's secure online registration system. **Primary Contact** Last Name: Relationship to Camper: First Name: Address: Email: Cell Phone: Work Phone: Home Phone: **Camper Information** First Name: Last Name: Gender Expression: Nickname: Fall 2023 Grade: Birthdate: Please complete this form for each camper you are registering. **Archery Mini-Camp Sessions** Please check the box in the last column for weeks you wish your child to attend. Week 1 June 26 - 30 \$100/camper (5 days) 9a-12p (Discov.'s); 1p-4p (Expl.'s) Week 5 July 24 - 28 \$40 (Discov.'s 2 days); \$60 (Expl.'s 3 days) 9a-12p daily 9a-12p daily Week 10 August 28 – Sept. 1 | \$40 (Discov.'s 2 days); \$60 (Expl.'s 3 days) П Payment: paid directly to 1UP Recreation please select which form of payment you will be using ☐ Check, make check payable to: 1UP Recreation ☐ CashApp, \$1UPREC When paying via CashApp please add a note for what it's for. Please Register for the corresponding session with Sequoia's Treehouse before making payment. A Signed Waiver Form and Payment must be received to secure a spot for your child. Parent/Guardian Authorization My child/ward has permission to participate in the Archery program as written above. I will assure that my child is properly prepared for activities including having proper clothing, being in good health and willing and able to participate. I understand that reasonable measures will be taken to safeguard the health and safety of all participants and that I will be notified as soon as possible in case of emergency. I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT AND GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN ARCHERY **ACTIVITIES WITH 1UP RECREATION AS WRITTEN ABOVE.** Print Full Name:

1UP Recreation Contact Information- Phone: 360 474-7644 Mailing Address: P.O. Box 47023 Seattle, WA 98146 – 9998 For more information contact Kerrie Sampelayo, kerries@1uprec.org

Date: