

Send registration and payment to:  
**Pearl City Foundation**  
 P.O. Box 114  
 Pearl City, HI 96782  
 Return check fee: \$25

**Pearl City Foundation**  
 Spring Fun Days 2019 Registration  
 Last day for registration: March 11, 2019

**Office Use:** Date Rcvd: \_\_\_\_\_  
 Input \_\_\_\_\_ Conf Ltr \_\_\_\_\_  
 Chk # \_\_\_\_\_ Amt: \_\_\_\_\_  
 CC Inv # \_\_\_\_\_ Grade \_\_\_\_\_

Participant's Last Name		First Name		Gender M / F	
Mailing Address			City		State/Zip
Daytime Phone #		<b>EMAIL: REQUIRED FOR CREDIT CARD PAYMENTS</b>			
<input type="checkbox"/> New enrollment <input type="checkbox"/> Returning Student		Swimming Ability <input type="checkbox"/> Swims Independently <input type="checkbox"/> Unable to swim		SCHOOL ATTENDING	
Current Grade		Child resides with: Father _____ Mother _____ Both Parents _____ Other: _____		Birthdate	
Allergies/Medical Conditions/Other Special Concerns					
Physician		Physician Phone		Medical Ins. Carrier	
				Choice of Hospital	
Mother/Legal Guardian's Name			Cell Phone #		Work Phone #
Father/Legal Guardian's Name			Cell Phone #		Work Phone #
In addition to the parents/legal guardians, I authorize the following people to pick up my child and/or be contacted in an emergency if the parent/legal guardian cannot be contacted. Attach additional sheet if needed.					
Name/ Relation		Phone		Name/ Relation	
Name/ Relation		Phone		Name/ Relation	

<b><u>FULL DAY PROGRAM:</u></b> <b><u>DISCOUNT FOR EARLY ENROLLMENT!</u></b> March 18-22, 2019 <b>6am-6pm.</b> Includes field trip and bus fees	<b>\$160</b>  <b>OR</b>  <b>\$175</b>
<i><b>\$160 if received BEFORE March 1, 2019</b></i> <i><b>\$175 if received AFTER March 1, 2019</b></i>	
<b>HALF DAY PROGRAM:</b> March 18-22, 2019 <b>6am-2pm.</b> Includes field trip	<b>\$135</b>
<b>CATERED LUNCH:</b> optional lunch from A Catered Experience Mon, Tues, Wed, Thurs. (no catered lunch on Friday due to field trip) 4 lunches @ \$5/each	<b>\$20</b>
<b>MOVIE SNACK PACK (optional)-</b> popcorn, candy and drink for March 22 movie field trip	<b>6.50</b>
<b>DAILY OPTIONS</b>	
Monday, March 18, 2019	\$ 35
Tuesday, March 19, 2019	\$ 35
Wednesday, March 20, 2019	\$ 35
Thursday, March 21, 2019	\$ 35
Friday, March 22, 2019- field trip movie "Wonder Park" at Ward Consolidated Theater	\$ 45
<b>Total Amount Due \$ _____</b>	

**Medical & Video-Photo Waiver/Release**

In case of accident or need for medical attention, I hereby give permission to Pearl City Foundation, its employees, agents or assigns to have my child taken to the nearest emergency medical facility for medical care. I further agree to pay any and all such medical expenses, costs and other charges and to release, discharge and hold harmless Pearl City Foundation, its officers, employees, agents and assigns from and against any liability or any claims or demands arising from or connected with such medical care.

I hereby give my child permission to attend and participate in the activities conducted by PCF's program. These activities include aquatics, off-property excursions, bus transportation, and enrichment activities. I hereby defend, hold harmless, indemnify, release Pearl City Foundation and all its officers, employees, agents, and assigns from any and all claims or actions for property damage, personal injury and/or death arising from my child's participation in any Pearl City Foundation programs

I hereby authorize PCF to use to my child's name and video or photograph at any time and in any manner in connection with its advertising, publicity, and public relation programs. No further claims will be made by me.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**PAYMENT OPTIONS**

\_\_\_\_\_**CHECK, MONEY ORDER OR CASHIERS CHECK**

\_\_\_\_\_**CREDIT CARD:**

An invoice will be **emailed** to you via PayPal and online payment must be made within 10 days of invoice date to ensure enrollment. Valid email required.

**Questions? Contact Naomi (Program Director) at 456-2073 or email [pearlcityfoundation@gmail.com](mailto:pearlcityfoundation@gmail.com)**