



## 2025 Summer Camp Registration Form

Please write legibly. You can return this form and your camp tuition in 2 ways:

Email this form to [farmschoolpreschool@gmail.com](mailto:farmschoolpreschool@gmail.com) and pay your camp tuition online by clicking "pay online" or return this registration form and your \$85 camp tuition to 175 Skalkaho Hwy, Hamilton MT 59840.

We will email to confirm your child's spot in the camp. In the unlikely event that the camp is cancelled, your camp tuition will be refunded. If you choose to cancel your registration, your camp tuition (minus any PayPal processing fees, if paid online) will be refunded if the space can be filled by another child.

Child's Full Name \_\_\_\_\_ Gender \_\_\_\_\_

Name child prefers to be called \_\_\_\_\_

Child's Birthday \_\_\_\_\_ Child's Current Age \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City/State/ZIP)

Phone # \_\_\_\_\_ Okay to Text to this number? Yes/No Email \_\_\_\_\_

Additional Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City/State/ZIP)

Phone # \_\_\_\_\_ Okay to Text to this number? Yes/No Email \_\_\_\_\_

Please list any existing allergies, medical conditions and/or special attention your child may require \_\_\_\_\_

Is there anything else you would like us to know about your child/family? \_\_\_\_\_

*I am interested in enrolling my child in the following camp:*

\_\_\_\_\_ **It's all about the MUD...Soil!**

Ages 3-5  
June 16-19, 2025  
9am-noon  
\$85

\_\_\_\_\_ **How does your Garden Grow?**

Ages 3-5  
July 14-17, 2025  
9am-noon  
\$85

I will provide my child with a nutritious snack and a water bottle for each day my child attends the Farm School Summer Camp. Whenever possible, I will use reusable containers. I understand that my child may be tasting, baking and cooking with organic produce grown on Homestead Organic Farm and other purchased ingredients. Whenever possible, organic and local ingredients will be used.

I **DO / DO NOT** (circle one) give my permission for photographs or videos of my child to be used publicly. I understand that photos may be taken of my child to display on Farm School and Cultivating Connections websites, Facebook and/or Instagram accounts. The photographs/videos are taken by Farm School staff and Cultivating Connections staff.

**I give permission for the following people to pick my child up from Farm Camp:**

1. \_\_\_\_\_ 2. \_\_\_\_\_

**In the event of an emergency, if I am not available, please call the following emergency contacts (if parent/guardian cannot be reached):**

**Name:** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **relationship to child:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **relationship to child:** \_\_\_\_\_

#### RELEASE and WAIVER OF LIABILITY

I have read this form carefully and I am aware that by registering my child for participation in the Farm School summer camp program, I am waiving and releasing all claims for injuries my child might sustain while participating in the program.

I recognize and acknowledge that there are certain risks of physical injury to participants in programs and I agree to assume the full risk of any such injuries, damages or losses regardless of severity which my child may sustain as a result of participating in any activities connected or associated with any such program.

I, on behalf of myself and my child, agree to waive, release, indemnify, hold harmless, and forever discharge any and all claims, demands, damages, lawsuits, liabilities, and related causes of action of every kind and nature, which I and/or my child have or may have in the future, against The Farm School preschool and Homestead Organics Farm, their employees, volunteers, agents and students for injury, loss, death, costs or other damages to me or my child or our property arising from or otherwise related to participation in Farm School programs or activities.

In the event that emergency treatment is needed, I give my permission and will assume financial responsibility for my child's medical care.

I have read and fully understand the above release and waiver form.

\_\_\_\_\_  
Child's name (please print)

\_\_\_\_\_  
Parent's name (please print)

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

The Farm School does not discriminate in its admission policies or in the administration of its programs.