



2019 JR LIFEGUARD CAMP REGISTRATION



Sign up for a week of coaching in first aid, water safety, team building, CPR, and rescue techniques! Sessions fill up quickly!

Participant Name _____ DOB _____ Age _____

Guardian Name _____ Phone # _____

Alternate Phone # _____ Email _____

Street Address _____

City, ST Zip _____

Please note: Camper must be capable of keeping their heads above water, treading and swimming in deep water without assistance, and swimming under water. If not, they cannot participate in Junior Lifeguard Camp.

Session	Date Range	
A (ages 9-11)	June 10 - 14	* Each camper will receive two snacks per day, a camp t-shirt, sunglasses, whistle, lanyard, and group photo. * Campers will need to bring lunch or purchase the meal plan. * Sessions require minimum of 10 participants. * Max of 15 participants for 9-11 y.o., 20 for 12-15 y.o. group. * Campers must be between the ages of 9 and 15 years old. * Registration closes May 3, 2019!
B (ages 12-15)	July 8 - 12	
C (ages 9-11)	June 24 - 28	
D (ages 12-15)	June 24 - 28	

Circle the session(s) the camper will attend A B C D

Circle the shirt size for the camper (adult sizing) XS S M L XL

WAYS TO SAVE

- **Season Pass/Membership Discount:** receive \$20 off their camp registration with 2019 ID!
- **Sibling Discount:** Save \$10 off registration for each additional sibling!
- **Returner Discount:** Campers from 2018 save \$10 off registration! Discount also applies to additional sessions when booking multiple sessions in the 2019 Season.
- **Multiple Session Discount:** Save \$100 off registration by adding a second session for the same child.

ADDITIONAL OPTIONS

- **Camper Meal Plan:** Save time & money with our discounted Meal Plan! This provides your camper lunch and a bottled water each day of camp!
- **Camper Bundle:** Includes White Water Bay drawstring bag, water bottle, and visor.
BONUS! Register by March 15, 2019 and receive a free bundle!

Registration continued next page...



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Item	Qty	Price	Total
Primary Session		\$299.00	\$
Additional Session		\$199.00	\$
2019 Pass/Membership Discount		-\$20.00	\$
Sibling Discount		-\$10.00	\$
Returner Discount		-\$10.00	\$
Camper Meal Deal		\$54.30	\$
Camper Bundle <i>(free if registered by 3/15/19)</i>		\$23.90	\$
WWB Backpack		\$5.43	\$
Lifeguard Visor		\$16.29	\$
Lifeguard Water Bottle		\$5.43	\$
		TOTAL AMT	\$

Refunds & Cancellation Policy:

- A nonrefundable \$150.00 deposit is required to secure a spot per child per session.
- Cancellation: While the deposit is non-refundable, any additional payments may be refunded if the cancellation is made at least 5 business days prior to the camp start date.
- If selected session does not have at least 10 participants, registrants will be asked to switch sessions or a full refund will be issued.

Registration & Payment Submission:

- Registration and deposit must be received by May 3, 2019. Final payment due June 3, 2019.
- Session spots are not secured until all forms and deposit are processed.

Submit all completed forms to:

Email: sfwwbgroupsales@sftp.com
 Fax: 405-478-2118
 Mail: White Water Bay, Attn: Jr Lifeguard
 11501 N I-35 Service Rd, OKC OK 73131

Accepted Payment Forms: Credit Card

In office: Monday – Friday 10:00am – 4:00pm
 11501 N. I-35 Svc Rd, OKC OK 73131
 Phone: 405-478-2140 x214

Signature of Guardian

Printed Name

Date



2019 JR LIFEGUARD MEDICAL RELEASE FORM



Participant Name _____ DOB _____ Age _____

Guardian Name _____ Phone # _____

Alternate Phone # _____ Email _____

Street Address _____

City, ST Zip _____

Emergency Contacts

Name _____ Relation _____ Phone # _____

Name _____ Relation _____ Phone # _____

Any known medical conditions?

Are there any special precautions to be observed during training?

MEDICATIONS

Medication(s) needed during camp will need to be provided to Six Flags WW Bay staff in the correct dosage amounts. These medications will be kept in our First Aid Station to be self-administered by participant according to the times and dosage listed below. Medications must be properly labeled with the participant's name and the information listed below.

1. Type _____ Dosage & Time _____

2. Type _____ Dosage & Time _____

3. Type _____ Dosage & Time _____

Additional Notes _____

Continue Medical Release on the next page...



2019 JR LIFEGUARD MEDICAL RELEASE FORM



Allergies

Does the participant have any known allergies? Yes No

Please list all that apply:

Food Related Allergies

All camp participants can pack their lunches for the camp week in which they are participating. No glass containers are allowed and their lunch should be packed in an insulated container with some type of ice pack. Two snacks are provided for every participant each day.

Food & Beverage: The park has a wide assortment of foods and beverages available, including bottled water.

Allergies: Six Flags WW Bay is not the food manufacturers/suppliers (all food and beverage product comes from third parties), and as such, we regret to inform you that Six Flags WW Bay CANNOT, AND DOES NOT, MAKE ANY REPRESENTATIONS OR GUARANTIES WHATSOEVER REGARDING THE ALLERGY-FREE CONTENTS OF ANY FOODS OR BEVERAGES. At a minimum, guests with allergy concerns should avoid any foods or beverages unless they are packaged, and you are 100% confident in the manufacturer/supplier which has provided the park with such food or beverage. Foods that are in any way unpackaged, prepared, or handled by Six Flags WW Bay (as opposed to packaged goods, provided to you in a sealed package), have a higher risk of contamination with other products containing allergens, so in the interests of your safety, we strongly urge you to avoid all such unpackaged products provided by Six Flags WW Bay.

Epi-Pen

Does the participant have an Epi-Pen prescribed by a physician? Yes No

White Water Bay staff is willing to assist with the administration of the Epi-Pen under the following conditions:

- The Epi-Pen must be provided to Six Flags WW Bay staff.
- Six Flags WW Bay staff will not administer unless it is a life-threatening situation and the participant is unable to self-administer the injection.

You acknowledge that there are certain side effects and risk associated with administration of the Epi-Pen. You agree to release from any and all liability of cause of action Six Flags WW Bay and its employees from any and every claim, demand, action or right of action, or whatsoever kind of nature, either in law or in equity arising from or by reason of any bodily injury or personal injuries known or unknown or death resulting on account of the Epi-Pen injection administered to the participant while participating in the program.

In case of a medical emergency, I hereby give my permission to Six Flags WW Bay to administer emergency care and to secure proper treatment, transportation and/or Emergency Room treatment for my child/camp participant from the dates of _____ through _____

Signature of Guardian

Printed Name

Date



2019 JR LIFEGUARD WAIVER FOR PARTICIPATION



Participant Name _____

DOB _____

I, _____ (Participant’s Guardian) do hereby agree to allow the child named here to participate in Junior Lifeguard Camp conducted by Six Flags WW Bay (“the park”). I understand there is risk inherent in the activities at the park premises and I, for myself and/or dependents, assert responsibility and assume all such risks inherent in the participation of activities, the use of the facilities, the conduct of other parties, and the amenities available on the park premises. I am aware of the possibility of accidental or other physical injury which may befall my child during their use of the facility, equipment and participation in Junior Lifeguard Camp conducted by the park. I further agree to indemnify, hold harmless the park and its affiliated companies, their agents, employees, and volunteers from and to waive any and all claims, causes of action, demands, and liabilities for any personal injury or property damage, which may be suffered by the aforementioned individual arising out of or in any way connected with their participation in this activity. I understand that my child must abide by all rules and policies of the park, as well as the instructions of the park staff. The park is not liable for any lost or stolen objects. I grant the park the right to film/videotape/photograph the participant on park property for any purpose without payment or consideration thereof.

Swimming Ability: To participate and enjoy camp to the fullest, participants should be capable of keeping their heads above water, treading and swimming in deep water without assistance, and swimming under water. Regardless of their swimming ability, participants will be required to wear a lifejacket when their instructor deems it necessary. If participant cannot meet above requirements, they cannot participate.

Signature of Guardian _____

Printed Name _____

Date _____

Additional Contact Information

Other than the guardian, the following people are allowed to pick-up the participant:

Name _____ Relation _____ Phone _____

Name _____ Relation _____ Phone _____

Name _____ Relation _____ Phone _____

The following people ARE NOT ALLOWED to pick-up the participant:

Name _____ Relation _____ Phone _____

Name _____ Relation _____ Phone _____

ID’s are required and each participant must be signed daily out only by authorized person(s).
Pick-up contacts must be added in person by the guardian with ID, and not over the phone.