



# SUMMER SIZZLERS - 2025

Ages 12 - 15  
8:30 am – 3:00 pm

Child's Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ ZIP \_\_\_\_\_

Parent or Guardian's Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Contact 1/Relationship/Phone \_\_\_\_\_

Emergency Contact 2/Relationship/Phone \_\_\_\_\_

Medical Condition/ Allergies \_\_\_\_\_ Medication \_\_\_\_\_

\*\*\*Any child requiring an epi-pen needs to complete a Doctors order form prior to the start of the program. Please note staff are unable to dispense any medication other than an Epi-pen if needed. This includes sunblock.

Does your child require any supportive services? Yes \_\_\_ No \_\_\_

Summer Sizzlers will meet on Monday - Thursday from 8:30am – 3:00pm (unless otherwise noted) at the Rec. Dept. 6 Fairfield Blvd. Sizzlers will go on daily trips throughout CT and surrounding areas.

- Program will start on Monday June 30th and end on Thursday August 7th, 2025.
- **Program fee: \$900 per child (\$800 on March 10th only). (Non-Res Fee is \$925).** Non residents may register beginning May 1st. Fee includes bus ride to and from trip, trip admission price and activities. Participants should provide their own lunch (unless provided at location - will be noted on calendar), juice, snack, water, sunscreen and any additional spending money for trips. Please note there will be no refrigeration available for lunches. **Some venues do not allow outside food and do not accept cash. It is the participants' responsibility to have a credit/debit card to purchase food and/or cash that can be used to purchase a gift card at the venue. Participants are responsible for all cash, credit/debit cards, and gift cards.**
- Checks should be made payable to Treasurer Town of Wallingford.
- PLEASE NOTE THERE WILL BE NO REFUNDS ISSUED DUE TO WEATHER AND CHANGE OF SCHEDULE. IF OUTDOOR PROGRAM CHANGES TO INDOOR GYM GAMES, ALTERNATIVE TRIP LOCATION etc.
- We do not register on a day to day basis, must register for entire program.

I authorize all representatives of the Wallingford Recreation Department to administer basic first aid to the registrant.

Yes \_\_\_ No \_\_\_

My child has permission to swim Yes \_\_\_ No \_\_\_

Hospital Registrant should be taken to \_\_\_\_\_

Family Physician \_\_\_\_\_ Physician Phone \_\_\_\_\_ Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_

**I have read the code of conduct (attached) and understand the rules and the consequences that will take place if my child behaves inappropriately. I have also read the Trip/Injury/ Photo Release and agree to the terms presented on the following page.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only: Amount: _____ Cash _____ Check _____ Made payable to <u>Treasurer Town of Wallingford</u>
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# SUMMER SIZZLER PARTICIPANT CODE OF CONDUCT

Below is the Summer Sizzler Participant Code of Conduct.

Parent /Guardian and Participant are to review the Code of Conduct. The bottom of the front page must be signed by the Parent/Guardian. This acknowledges you are aware of the expectations of the program and the proper conduct expected by participants.

- Have fun/be safe.
- **ALL CELL PHONES ARE TO BE TURNED OFF FOR THE DURATION OF THE TRIP AND PLACED INSIDE OF PARTICIPANTS BAG.**
- Always travel in at least groups of two.
- **It is very important to show up to all “check-ins” ON TIME.**
- Never throw anything while on the bus or out a bus window.
- It is your responsibility to make sure you know what time you need to be someplace. ***If you are unsure ASK.***
- No endangering other person’s well being.
- No swearing, verbal abuse, bullying or fighting
- No disrespectful behavior to peers, staff and/or staff at trip locations
- No leaving field trip boundaries unsupervised
- No stealing or destruction of property
- No illegal substances
- If you or a friend is injured please report it to a counselor immediately.
- Make sure that your ride knows what time they need to pick you up before we leave for a trip.
- ***Violation of any of the above could lead to dismissal of the program without refund. If you are suspended for a period of time, or for the remainder of the camp, there will be no refunds for missed trips.***

**NO REFUND will be given if a participant does not attend the remainder of the session due to inappropriate behaviors.**

By signing on the front, the parent/guardian acknowledges they understand the expectations of the participant in the Summer Sizzler Program. The parent agrees they will go over the rules of Summer Sizzlers and ensure their child is aware and understands the rules as well. It is also acknowledged, failure to comply with any of the above rules, can result in a suspension or expulsion from the program.

## SUMMER SIZZLER PARTICIPANT Trip/Injury/Photo Release

I, THE PARENT/GUARDIAN OF THE ABOVE NAMED CHILD, WHO PARTICIPATES IN THE WALLINGFORD RECREATION SUMMER SIZZLERS PROGRAM, ASSUME ALL RISKS AND HAZARDS INCIDENTAL TO THE CONDUCT OF THE ACTIVITY AND TRANSPORTATION TO AND FROM THE ACTIVITY. I AM AWARE THAT PARTICIPATION IN ANY RECREATIONAL PROGRAM CAN BE DANGEROUS INCLUDING MANY RISKS AND OR INJURY. I DO FURTHER RELEASE, ABSOLVE, INDEMNIFY AND WAIVE ANY CLAIMS AGAINST THE RECREATION DEPARTMENT, ITS ORGANIZERS, SPONSORS, AND ANY SUPERVISOR APPOINTED BY THEM.

I, THE PARENT/GUARDIAN OF THE ABOVE NAMED CHILD, WHO PARTICIPATES IN THE WALLINGFORD RECREATION SUMMER PROGRAM, AUTHORIZE THE WALLINGFORD PARKS & RECREATION DEPARTMENT TO USE ANY PHOTOS OR VIDEOS TAKEN OF MY CHILD TO BE USED IN MARKETING MATERIALS INCLUDING SOCIAL MEDIA.