



650 South Avenue 21
Los Angeles, CA 90031
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Climbing Summer Camp 2017 Camp Intake Form

Camper Name:

Camper Age as of Camp Start Date:

Parent/Guardian Name(s):

Week(s) the camper will participate in (indicate all that apply):

Week 1: June 12 – June 16

Week 2: June 19 – June 23

Week 3: June 26 – June 30

Week 4: July 10 – July 14

Week 5: July 17 – July 21

Week 6: July 24 – July 28

Week 7: July 31 – August 4

Week 8: August 7 – August 11

Week 9: August 14 – August 18

Who is authorized to pick up the camper? Please give name and relationship to child, such as babysitter, aunt, mother, etc.

The standard drop-off/pick-up times are 9 AM and 3 PM. However, drop-off and pick-up times are flexible, starting at 7 AM and running until 5 PM; \$25 an hour for extra time.

If you will use a non-standard drop-off or pick-up time for your child's whole week(s) at camp, please indicate this below, (you can let the gym know the day before if you will need a non-standard pick-up or drop-off time on the following day).

Contact number(s) to call if camper is ill or injured, (please give number, name, and relationship to child, such as grandparent, aunt, father, etc.):

Please check which of the following best applies to your child:

- My child is very comfortable climbing.
- My child enjoys climbing but needs some positive reinforcement during instruction.
- My child sometimes needs a little reassurance to overcome her/his anxiety about climbing.
- My child often experiences significant fear/anxiety when climbing.

What is your child's level of climbing experience, (either indoors in a gym or outside)?

- My child has climbed many times.
- My child has climbed a few times.
- My child has climbed one or two times.
- My child has never climbed before.

Does your child have any allergies we should know about?

- No, my child does not have any allergies.
- Yes

If your child has any allergies, please explain:

Is your child currently taking medication? If yes, and the medication needs to be administered during camp, please indicate this here, and we will be in touch with a separate medical release form.

- No, my child is not taking any medication.
- Yes.

List any conditions requiring special consideration, accommodations, or restrictions while at camp:

List any past medical treatment that may affect participation in camp:

List any activities from which the camper should be exempt for health reasons:

Please list any special goals your child has for the camp or any other information that you would like us to know:

Photographic Waiver:

I, _____, give / do not give (circle one) the Stronghold Climbing Gym permission to use photographs of my child in the gym's general publicity campaigns.

Signature/Initials if Electronically Signing:

Date:

Please get this form back to us before the start of camp via one of the following methods:

Email: events@strongholdclimb.com

Mail: The Stronghold Climbing Gym, 650 South Avenue 21, Los Angeles, CA 90031

In-person: Return to the front desk

Thank you!