



# Binghamton Police Athletic League

## 2023 PAL Day Camp

### Boys and Girls 5 - 13

#### Camper Information:

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

#### Parent/Guardian Information:

Name \_\_\_\_\_ Email \_\_\_\_\_

Phone Number \_\_\_\_\_ Employer \_\_\_\_\_

Income\* \_\_\_\_\_ Household Size\* \_\_\_\_\_ Ethnicity\* \_\_\_\_\_

\*(Data used for government funding)

#### Emergency Contact:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

(In case of an emergency, and camp personnel are unable to locate designated person(s) to be notified - appropriate emergency measures may be taken by the camp personnel; hospital, physicians, or other emergency care facilities, and shall notify the parent(s)/guardian(s) as soon as possible.)

Signature: \_\_\_\_\_ (Must be signed)

#### Minor (Child) Photo/Video Release:

I, \_\_\_\_\_, the parent/guardian of \_\_\_\_\_ (Child) grant the Police Athletic League/third parent they are working with (eg. Unite Way) my permission to use photographs and/or videos described as for any legal use, including but not limited to: publicity, copyright purposes, illustration, advertising and web content.

Furthermore, I understand that no royalty, fee or compensation shall become payable to me by reason of such use.

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

***CIRCLE YOUR CHOICE OF ONE WEEK ONLY  
MONDAY THROUGH FRIDAY, 9 AM - 2:30 PM***

Monday, July 10

Monday, July 17

Monday, July 24

Monday, July 31

Monday, August 7

**VERY  
IMPORTANT**

PLEASE ATTACH A COPY OF YOUR CHILD'S IMMUNIZATION RECORDS WITH ALL SHOTS AND BOOSTERS WITH DATES. THE STATE OF NEW YORK HEALTH DEPARTMENT PROHIBIS ANY CHILD TO ATTEND SUMMER CAMP WITHOUT COMPLETE IMMUNIZATIONS.

Name of Physician \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Any Allergies to Medications, Food, Insect Stings, etc.: \_\_\_\_\_

List all medications currently being taken (please attach Physician's note) \_\_\_\_\_

Do you give permission for sunscreen and/or bug/tick spray to be used? \_\_\_\_\_

Applied by staff (if needed)? \_\_\_\_\_

***ANY PROBLEMS WITH YOUR CHILD THAT OUR DIRECTOR OR COUNSELORS  
SHOULD BE AWARE OF PLEASE USE A SEPERATE SHEET TO ADD ANYTHING***

***CIRCLE THE BUS STOP WHERE YOUR CHILD/REN WILL BE PICKED UP/DROPPED OFF -  
CHILD/REN SHOULD BE AT THE STOP 10 MINUTES PRIOR TO PICK-UP. ALL TIMES ARE  
APPROX. BASED ON NUMBER OS STOPS.***

Great Beginnings Lot (Conklin Ave.)...8:00	4:00	Woodrow Wilson School (Lot behind School)....8:30	3:20
Ben Franklin School Parking Lot.....8:03	3:55	Valley Street Playground.....8:40	3:17
St. John's Church (Vestal Ave.).....8:07	3:45	Theodore Roosevelt School (Ogden St).....8:45	3:10
Ross Park Zoo Upper Parking Lot.....8:10	3:40	St. Paul's Church (Robinson St. Side).....8:47	3:08
Susq. at Exchange (Woodburn Ct. 1)....8:15	3:35	Robinson at Griswold St.....8:50	3:07
Horace Mann School (Laurel Ave.).....8:20	3:27	Carlise Apts. (Admin. Building).....8:55	3:04
Thomas Jefferson School (Helen St.)...8:25	3:24	Calvin Coolidge School (Moody St.).....9:00	3:00

**Please make sure you are on time for  
the bus and have a plan when your  
child gets on and off.**

I will personally drive my child to and from camp...8:45 2:30  
\_\_\_\_\_ is authorized to pick up my child

**PAL WILL FURNISH -- LUNCH -- MILK -- SNACKS  
CHILDREN MUST BRING THEIR OWN TOWELS AND  
BATHING SUITS (PLEASE LABEL ALL BELONGINGS)**

Please mail application to: Police Athletic League, P.O. Box 1472, Binghamton, NY 13902

Questions: Call the PAL office at 607-723-2766