

# RBAC Anderson Adventure Camp - 2024

APPLICATION # 11

CITY OF PASADENA  
Parks, Recreation &  
Community Services

## CAMPERSHIP APPLICATION

PLEASE PRINT INFORMATION:

Children must live in Pasadena or attend a PUSD school and meet the financial income criteria to qualify. **Scholarship is available for children currently in Kindergarten, who will be in 1<sup>st</sup> grade in 2024-2025 school year.**

Camper's Name: \_\_\_\_\_  
Last Name First Name Sex Age Date of Birth  
Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
School (Currently Attending): \_\_\_\_\_ Grade (Current): \_\_\_\_\_  
Parent/Guardian: \_\_\_\_\_ Email: \_\_\_\_\_  
Last Name First Name  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

I hereby request to be considered for a campership for my child at the following site:

**Scholarship is for a maximum of THREE sessions of camp per camper.**

- Session 1: June 10-14
- Session 2: June 17-21
- Session 3: June 24-28
- Session 4: July 1-3 (No camp July 4 and 5)
- Session 5: July 8-12
- Session 6: July 15-19
- Session 7: July 22-26
- Session 8: July 29-Aug 2
- Session 9: Aug 5-9

THIS REQUEST IS BASED UPON THE FOLLOWING REASONS: (Limited to 50 words or less)


I/we permit my child to attend all planned trips and activities arranged by the RBAC Anderson Adventure Camp, and do hereby release The City of Pasadena, Parks, Recreation and Community Services Department and the RBAC, its officers, agents and employees from any and all liability arising out of my child's participation in such activities.

I further certify that my child is physically able to participate in such activities. In case of accident or illness I give the RBAC Anderson Adventure Camp, and/or its representative's permission to obtain proper aid (hospitalizations, secure treatment, injection, x-ray, etc.) deemed necessary by a physician and agree to pay all expenses incurred. I understand that every attempt will be made to contact the participant's parents and/or personal physician in any emergency that may arise.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

**FOR CAMPERSHIP CONSIDERATION, APPLICATION MUST BE RECEIVED BY  
5:00 PM ON FRIDAY, JUNE 21, 2024. NO EXCEPTIONS!!**

**PLEASE RETURN FORM TO:**  
**CITY OF PASADENA – PARKS, RECREATION & COMMUNITY SERVICES DEPARTMENT**  
**c/o CARMEN RODRIGUEZ**  
**CENTRAL PARK CENTER**  
**37 E Del Mar Blvd, Pasadena, CA 91105**  
**(Supporting documents required: 2022 or 2023 tax returns, proof of City of Pasadena residency or PUSD enrollment)**