



## SummerEscape 2025

SummerEscape is designed to get back to the basics of summer time fun for kids. One of our goals is to provide outdoor fun in a relaxed, safe and caring environment while allowing children to be children and learn through play.

We are excited to announce that **Katelynne Jones**, will be returning as our director this summer. This will be her third year with us and we are so excited.

Our calendar will be full of Theme Weeks, Water Play Days, GaGa court, Arts & Crafts, Sports, Dance Parties and so much more. We are also excited to expand our field trip schedule.

SummerEscape is open to children ages **5yrs to 12yr** and it is based out of the Holderness Central School. We have set enrollment maximums to ensure an adequate staff to camper ratio. Program hours are **Monday through Friday, 8:00 AM to 4:30 PM.**

**Program Fees:** The Resident tuition is \$165 per week. Non-Resident tuition is \$185 per week. The attached registration form and a **\$50 deposit** must be received to reserve your spot.

Fees must be paid in full prior to the start of the program unless other arrangements have been made through the recreation office.

### Program dates:

- |                          |                   |
|--------------------------|-------------------|
| Wk 1                     | June 23 – June 27 |
| Wk 2                     | June 30– July 2   |
| (No program July 3 or 4) |                   |
| Wk 3                     | July 7 – July 11  |
| Wk 4                     | July 14 – July 18 |
| Wk 5                     | July 21 – July 25 |
| Wk 6                     | July 28 – Aug. 1  |
| Wk 7                     | Aug. 4 – Aug. 8   |



**Registration dates:** Residents may register starting March 17<sup>th</sup> and Non-residents may start registering on April 1<sup>st</sup>.

### Registration Open Dates

**Residents 3/17**  
**Non-residents 4/1**

**All summer discount:** A discount of 5% may be applied to families that register for the whole program. The discount will not be combined with other discounts and the program fee must be paid in full to receive the discount.

**Sibling discounts:** Additional children in a family receive 10% off the program fee, not to be combined with any other discounts. Discount will be applied to sibling with lower fee.

**Scholarships:** Several sources of scholarships are available and a scholarship packet can be requested through Wendy at the recreation office. If you or anyone you know needs financial assistance, please do not hesitate to let us know. You may call 603-968-3700 or email [recreation@holderness-nh.gov](mailto:recreation@holderness-nh.gov) for more information.

**Program balances must be paid prior to the start of the program. If you need to make other payment arrangements, please speak to Wendy in the recreation office.**

**Make Check Payable and mail to:**  
**Holderness Recreation**  
**PO Box 203**  
**Holderness NH 03245**

**Parent Packets:** Packets will be available in April. You may pick up your parent packet at Town Hall or ask that one be mailed or emailed to you. You may also download the parent packet from the town website once they are available. This packet includes information on policies, procedures, additional forms and other topics relevant to a successful summer with Holderness Recreation.

**For more information please contact:**  
**Wendy Werner, C.P.R.P.**  
**Holderness Recreation Director**  
**Ph 603-968-3700 email: [recreation@holderness-nh.gov](mailto:recreation@holderness-nh.gov)**

### Three more things:

1. Please provide a photo of your child for our records this summer. This photo can be returned at the end of the summer upon request.
2. Online registration is available by clicking [Here](#). Sibling discounts may not be reflected through the online registration and need to be done through the office.
3. There are additional forms that will be included with the parent packet. These forms include a photo release, medical release, things you would like us to know about your child, sun screen release and behavior policy.



<input type="checkbox"/>	<b>All Summer</b>	2025 SummerEscape	6/23 – 8/8	Resident 1,089.00	Non Res. 1,229.00	Notes
<input type="checkbox"/>	<b>Week 1</b>	SummerEscape	6/23-6/27	165	185	<b>Week 1 dates</b>
<input type="checkbox"/>	<b>Week 2</b>	SummerEscape (closed July 3 <sup>rd</sup> & 4 <sup>th</sup> )	6/30-7/2	99	119	<b>may change if the</b>
<input type="checkbox"/>	<b>Week 3</b>	SummerEscape	7/7-7/11	165	185	<b>last day of school</b>
<input type="checkbox"/>	<b>Week 4</b>	SummerEscape	7/14-7/18	165	185	<b>Changes.</b>
<input type="checkbox"/>	<b>Week 5</b>	SummerEscape	7/21-7/25	165	185	
<input type="checkbox"/>	<b>Week 6</b>	SummerEscape	7/28-8/1	165	185	
<input type="checkbox"/>	<b>Week 7</b>	SummerEscape	8/4-8/8	165	185	

Sub Total: \_\_\_\_\_

Would you like to round up and have the difference go towards our scholarship fund?

Scholarship Contribution \_\_\_\_\_

Total: \_\_\_\_\_

Child's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Physical Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade(in Fall) \_\_\_\_\_ Sex M F

Swimming Ability \_\_\_\_\_ None \_\_\_\_\_ Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advance

### **EMERGENCY / MEDICAL INFORMATION**

**1<sup>st</sup> Parent/Guardian Name** \_\_\_\_\_

Relation to child \_\_\_\_\_ Email: \_\_\_\_\_

Address if different from child \_\_\_\_\_

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

Number for text messages \_\_\_\_\_ Carrier \_\_\_\_\_

**2<sup>nd</sup> Parent/Guardian Name** \_\_\_\_\_

Relation to child \_\_\_\_\_ Email: \_\_\_\_\_

Address if different from child \_\_\_\_\_

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

Number for text messages \_\_\_\_\_ Carrier \_\_\_\_\_

**\*Parents will be contacted first in an emergency - please list two additional contacts**

#1 Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

#2 Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Medical Ins. \_\_\_\_\_ Policy# \_\_\_\_\_

Medication \_\_\_\_\_ Allergies \_\_\_\_\_

Physician \_\_\_\_\_ Phone \_\_\_\_\_

**The following people have permission to pick up my child:** \_\_\_\_\_

**The following people may NOT pick up my child:** \_\_\_\_\_

**Shirt Size: Adult S M Lg Youth S M Lg {Circle One}**

### **RELEASE OF ALL CLAIMS & PHOTO RELEASE**

In consideration of the permission granted for the above named participant to take part in the above named Holderness Recreation program, I hereby release for myself and my heirs, the Town of Holderness, its agents, employees, volunteers, and other program participants, from all actions, damages, and claims that may result in personal injuries and property damages.

I recognize there may be inherent dangers in participating in Holderness Recreation Programs which may present a strain on the body and its parts, and furthermore, I represent that to the best of my knowledge the participant is in proper physical condition to allow participation. I therefore assume all risks associated with participation in said program.

I understand that, in case of injury or illness, Holderness Recreation will attempt to contact the person identified above as the "emergency contact". In the event of a medical emergency, I consent to the participant's treatment by a medical doctor and I agree to pay all costs associated with said treatment, including transportation to the medical facility.

I also understand that **Holderness Recreation may take pictures/video of my child** while enrolled in this program and that these pictures may be used by Holderness Recreation for advertisement and SummerEscape promotions, some of which may be online. I give my permission for my child's picture to be taken and photos to be used by Holderness Recreation for promotion in flyers, on Facebook and the town website. I also understand that Holderness Recreation reserves the right to dismiss campers with extreme discipline problems from the program.

I, the undersigned, have read this release and understand all its terms and implications and I hereby execute this release of my own free will and with full knowledge of its significance.

Signature Parent / Guardian

Date

(name of parent, please print)