

# DAYTIME DUNGEON DELVERS

## REGISTRATION AND TERMS OF AGREEMENT

### Participant Information:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Nickname: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Guardian Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Alternative Phone Number: \_\_\_\_\_ Guardian Email: \_\_\_\_\_

### Emergency Contact Information

#### Emergency Contact #1

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email \_\_\_\_\_ Relation to child \_\_\_\_\_

#### Emergency Contact #2

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email \_\_\_\_\_ Relation to child \_\_\_\_\_

### Drop Off/Pick Up Information

Please list those who are permitted to drop off and pick up your child:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

### Medical Release Information

Primary Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list any medical problems, including any requiring maintenance medication (i.e. Diabetic, Asthma, Seizures). Please use back of this page if necessary.

<u>Medical Problem</u>	<u>Required treatment</u>	<u>Should paramedic be called?</u>
_____	_____	Yes/No
_____	_____	Yes/No
_____	_____	Yes/No

Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason?

Yes\_\_ No\_\_ If yes, explain: \_\_\_\_\_

Is your child allergic to any type of food or medication?

Yes\_\_ No\_\_ If yes, explain: \_\_\_\_\_

Does your child require a special diet?

Yes\_\_ No\_\_ If yes, explain: \_\_\_\_\_

Does this child have special needs?

Yes\_\_ No\_\_ If yes, explain: \_\_\_\_\_

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.



I understand that I will be notified in the case of a medical emergency involving my child. In the event that I cannot be reached, I authorize Family Fun Hobbies' (hereafter referred to as FFH) staff to call a doctor or emergency medical services.

Parent's/Guardian's Initials \_\_\_\_\_

I understand that FFH is not responsible for any medical expenses incurred for the care and treatment of my child, and those expenses will be my responsibility as parent/guardian.

Parent's/Guardian's Initials \_\_\_\_\_

## Registration:

Please check off which sessions you would like to sign up for. Your child may take one (1) Beginner and/or one (1) Advanced session.

Sessions are \$399 each. If registration is paid by February 28 2019, sessions are \$299 each. If you pay for both (2) sessions at one time, you will pay a discounted rate of \$599. You have until April 30, 2019 to cancel with a full refund. After April 30, 2019, refunds will be at the discretion of FFH.

Registration Closes March 15, 2019.

If there is a demand, we will add more sessions.

July 8th - 12th	<b>Beginner Session</b>
July 15th - 19th	<b>Advanced Session</b>

FFH will provide during each session one (1) set of dice, one dice pouch, one (1) Name Badge and one Miniature Figurine. In addition, FFH will provide two (2) snacks and drinks per day. Beginner Session players will also receive one (1) D&D Players Handbook. Advanced Session players will receive one (1) D&D hardcover book of their choice. FFH will provide an experienced Dungeon Master (DM) who has undergone a background check. Each session will be no more than six (6) children. The DM will teach the history and rules of D&D, Character Creation and Miniature Painting. The DM will also teach Role Playing, Team Building and Cooperation, all of which are important aspects of the game Dungeons & Dragons. They will also lead a D&D campaign. At least two (2) breaks will be taken including lunch during the day.

# Terms of Agreement:

## Cost Per Session

Each session is \$399 each. There is a discounted rate of \$299 if paid April 15, 2019. Participants have until June 15, 2019 to cancel for a full refund. I understand that the Registration and Terms of Agreement Form must be submitted by June 15, 2019 or my child will not be included in the Daytime Dungeon Delvers program. Full payment is required at time of registration as space is limited per session. Participants may sign up for up to two (2) sessions at one time. All children ages 10 to 17 during the time of the session will be permitted to participate, space permitting.

Parent's/Guardian's Initials \_\_\_\_\_

## Pick-Up and Drop-Off Procedure

Children need to arrive between 8:15am and 8:30am in order to start on time, and must be picked up no later than 4:45pm since the session ends at 4:30pm. No after session care will be provided by FFH. The Parent/Guardian must park their vehicle and walk their child into FFH and check in with FFH staff. The Parent/Guardian must come in to FFH to check their child out.

Parent's/Guardian's Initials \_\_\_\_\_

## Late Pick-Up Fee

There will be a \$25 late fee assessed for children who are picked up after 4:45pm and a \$50 late fee after 5:00pm. Repeated late pick-ups may result in removal of the participant from the session, with no refund.

Parent's/Guardian's Initials \_\_\_\_\_

## Personal Belongings and Lunch

The child's name will be on all lunches, phones, electronic devices, and other personal belongings. FFH is not responsible for the child's belongings. The child must bring their own lunch. Two (2) snacks and drinks will be provided per day. Lunch must be brought from home. Children will not be allowed to leave Family Fun Hobbies to purchase lunch or to order for delivery, since lunch will not be an exact set time each day due to the nature of the game.

Parent's/Guardian's Initials \_\_\_\_\_

## Behavior Management/Discipline Policy

FFH staff will create a fun and safe environment for participants. Praise and positive reinforcement are used as effective methods for behavior management. Children who do not respond to these methods or who are destructive to others or to property will be dealt with in a timely, professional and positive manner. If the child does not react to corrective measures, removal from the session(s) without refund is possible.

Parent's/Guardian's Initials \_\_\_\_\_

## Photo Release

I hereby give permission for my child to be photographed or filmed during the Daytime Dungeon Delvers session(s). I understand the photos will be used for promotional purposes including, but not limited to, flyers, brochures, newspaper ads and articles, and postings on the Internet by Family Fun Hobbies, LLC. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed. I am not entitled to any financial compensation for Family Fun Hobby, L.L.C.'s use of any photographs or videos, and all photos are the property of Family Fun Hobbies, LLC.

Parent's/Guardian's Initials \_\_\_\_\_