

# Liquid Planet Cosmic Day Camp Registration Form



Liquid Planet Water Park  
446 Raymond Road (Rte 27)  
Candia, NH 03034

**Please check the preferred week or weeks & appropriate camp:**

06/21-06-25 _____	06/28-07/02 _____	07/05-07/09 _____
Lil Dipper Big Dipper	Lil Dipper Big Dipper	Lil Dipper Big Dipper
07/12-07/16 _____	07/19-07/23 _____	07/26-07/30 _____
Lil Dipper Big Dipper	Lil Dipper Big Dipper	Lil Dipper Big Dipper
08/02-08/06 _____	08/09-08/13 _____	08/16-08/20 _____
Lil Dipper Big Dipper	Lil Dipper Big Dipper	Lil Dipper Big Dipper
08/23-08/27 _____		
Lil Dipper Big Dipper		

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Parent's Name \_\_\_\_\_ Address \_\_\_\_\_

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

E-mail \_\_\_\_\_

*I accept full responsibility for my child's/children's use of any and all apparatus, appliances, facility privilege whatsoever owned and operated by Liquid Planet LLC at their own risk and shall hold Liquid Planet LLC, it's shareholders, directors, officers, employees, representatives and agents harmless from any and all loss, claim injuries, damages or liability sustained or incurred by my child/children resulting therefrom.*

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE MAKE CHECKS PAYABLE TO "LIQUID PLANET, LLC" AND SEND TO:  
LIQUID PLANET WATER PARK \* 446 RAYMOND ROAD \* CANDIA, NH 03034  
Refunds allowed only if cancellation is confirmed with the Camp 2 weeks prior to the first day

Amount \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check# \_\_\_\_\_ LWPW Initials \_\_\_\_\_

**\*\*\*Please have proof of latest PHYSICAL and IMMUNIZATION PAPERS on first day of camp\*\*\***