

**DREAM DAY ON CAPE COD  
Holiday Weekend 2008  
December 12<sup>th</sup>-14<sup>th</sup>  
Family Application**

Dream Day on Cape Cod is an organization dedicated to children with life threatening illnesses and their families. We are excited to announce that this year's annual Holiday Weekend will again be held at the All Seasons Motel in South Yarmouth. We are grateful to the All Seasons for their continued support and partnership.

The goal of Dream Day's Holiday Weekend is like all Dream Day events: *fun and respite for the special families we serve*. A light schedule of programming is offered, including a special holiday party on Saturday from 12 to 3pm. This year's party will be held at the Dennis Union Church. Dream Day activities are family-focused and we remind families that supervision is essential for safety and all-in-all family enjoyment. Please note that for the 2008 Dream Day Holiday Weekend, we can allow immediate family members only. Unfortunately we are unable to serve cousins, aunts, uncles, and other extended family. Siblings must be youth age 18 and under.

Family arrival is on Friday, December 12<sup>th</sup> anytime after 3pm. A casual pizza dinner is offered poolside Friday, along with crafts and games for those interested in partaking. Saturday is the annual family party – complete with lunch, entertainment, and Santa! Saturday evening, families enjoy downtime on their own – and can explore the area for dinner and also relax back at the All Seasons. Continental breakfast is served both Saturday and Sunday mornings. Family departure and checkout is 10:30am Sunday morning.

Please contact Director Kathleen Giorgio with any questions or concerns, via email at [kgiorgio@verizon.net](mailto:kgiorgio@verizon.net) or 774-994-7346

**Completed family forms can be sent by November 30<sup>th</sup> to:**

**Kathleen Giorgio  
Dream Day on Cape Cod  
12 Depot Road  
Harwich, MA 02645**

## Dream Day Family Information

Child's Full Name: \_\_\_\_\_ M\_\_\_\_ F\_\_\_\_

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

Diagnosis: \_\_\_\_\_ Date of Diagnosis \_\_\_\_\_

In remission? Y \_\_\_ N \_\_\_ If yes, since when: \_\_\_\_\_

Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Grade in School: \_\_\_\_\_

Child's primary language: \_\_\_\_\_ Can he/ she speak English: Y\_\_\_\_ N\_\_

Would your family need a wheelchair accessible room? Y \_\_\_\_\_ N\_\_\_\_\_

***Please note that for the 2008 Dream Day Holiday Weekend, we can allow immediate family members only. Unfortunately we are unable to serve cousins, aunts, uncles, and other extended family.***

Parent/Guardian Name(s): \_\_\_\_\_

Phone: H \_\_\_\_\_ W \_\_\_\_\_ C \_\_\_\_\_

Email: \_\_\_\_\_

Please list youth siblings [18 and under] planning to attend:

Siblings Name: \_\_\_\_\_ Age: \_\_\_\_\_ M\_\_\_\_ F\_\_\_\_

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Siblings Name: \_\_\_\_\_ Age: \_\_\_\_\_ M\_\_\_\_ F\_\_\_\_

## GENERAL INFORMATION

How did you hear about Dream Day on Cape Cod?

Internet \_\_\_\_\_ \*\*Hospital \_\_\_\_\_ Other \_\_\_\_\_

\*\* Medical Personnel Name \_\_\_\_\_ Position \_\_\_\_\_ Hospital \_\_\_\_\_

Have you ever been to Dream Day Holiday Weekend before? \_\_\_\_ Yes \_\_\_\_ No

if yes, how many times? \_\_\_\_

**Family Agreement**

WE ASK THAT ALL FAMILY MEMBERS READ THE BELOW AGREEMENT. BY INITIALING AND SIGNING BELOW, ALL FAMILY MEMBERS UNDERSTAND THE RULES AND WILL ABIDE BY THEM AT ALL TIMES.

**OUR FAMILY UNDERSTANDS AND AGREES TO ALL OF THE FOLLOWING RULES:**

- Underage campers will not bring alcohol to Dream Day Holiday Weekend \_\_\_\_\_
- We will not bring illegal drugs to Dream Day Holiday Weekend \_\_\_\_\_
- We will not bring knives or potentially dangerous items to Holiday Weekend \_\_\_\_\_
- We will not swear or use foul language at Holiday Weekend \_\_\_\_\_
- We will treat all fellow families and staff members with respect at all times \_\_\_\_\_
- We will follow staff/hotel instructions regarding any out of bound areas \_\_\_\_\_
- We will observe designated quiet times \_\_\_\_\_
- We will respect Dream Day and All Seasons property and equipment at all times \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/ guardian

**RELEASE OF LIABILITY**

The undersigned parent/ guardian understands that occasionally accidents occur during activities and that participants may sustain serious personal injury and property damage as a consequence thereof. Knowing the risk of weekend activities, nevertheless, and in consideration of my family's acceptance for participation in Holiday Weekend, the undersigned agrees to assume those risks and to hold harmless Dream Day on Cape Cod, and all organizations agents, representatives, employees and volunteers. Further, the undersigned acknowledges that Dream Day on Cape Cod accepts no responsibility for the loss, damage or theft of my family's property.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PHOTO AND INFORMATION RELEASE**

I give Dream Day on Cape Cod permission to photograph and use pictures or visual and audiotapes of my child and family in professional and fundraising activities. Dream Day respects the privacy of its families and does not allow unauthorized visitors to photograph the premises or families.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE: ALL APPLICATIONS MUST BE COMPLETED IN FULL. PARTIALLY COMPLETED APPLICATIONS WILL BE RETURNED**