



Registration Form 2018 Young Explorer Camps

Child's Information

Note: Children must be 3 years old on/before June 1, 2018 and toilet trained in order to register for a Young Explorer Camp.

Child's name _____
last first middle nickname

Child's date of birth ____ / ____ / ____ Male _____ Female _____

Child lives with: _____ Mother _____ Father _____ Both _____ Other _____

My child may be released to the following people (please print name and relationship):

Other information that might help us to meet the needs of your child (fears, ways to soothe him/her, special likes/dislikes, etc.):

What school does your child currently attend? _____

Parent/Guardian Information

Mother's name _____
last first middle initial

Address _____
street apartment/p.o. box

city state zip code e-mail address

home phone number work phone number cell phone number

Employer (mother) _____

Father's name _____
last first middle initial

Address (if different from mother) _____
street apartment/P.O. box

city state zip code e-mail address

home phone number work phone number cell phone number

Employer (father) _____

Emergency Information:

In case of emergency, please call _____ at this number _____.

List two people to contact if you cannot be reached in case of emergency:

Name _____ Home Phone _____ Cell Phone _____

Name _____ Home Phone _____ Cell Phone _____

(continued on next page>>>)

Child's age on/before June 1, 2018:

_____ 3 years old _____ 5 years old
_____ 4 years old _____ 6 years old

Please check the camps in which you are registering your child:

		<i>Camp fees</i>	<i>Amount due</i>
Non-refundable Registration Fee		<u>X</u> \$ 25.00	<i>due upon registration</i> \$ <u>25.00</u>
Camp #1, June 18 - 22 <i>9:00 – 12:00 noon</i>	The Ultimate Summer Vacation	_____ \$ 100.00	<i>due June 1</i> \$ _____
Camp #2, June 25 – 29 <i>9:00 – 12:00 noon</i>	Read Your Way Through Summer's Treats	_____ \$ 100.00	<i>due June 1</i> \$ _____

Total amount paid at time of registration \$ _____

Person/Party responsible for Payment (**name**) _____

I understand that I am registering my child to attend Grace Lutheran Preschool and Kindergarten's summer 2017 Young Explorer Camps and that the final placement of my child is at the discretion of Grace Lutheran Preschool & Kindergarten. Admission to Grace Lutheran Preschool & Kindergarten shall be made without regard to race, color, religious creed, handicap, ancestry, national origin, age, socio/economic status, and/or gender.

Signature of Parent or Guardian _____

Date _____ Non-refundable registration fee enclosed \$ _____

Name of child's physician:

Name _____ **Phone** _____

Health insurance company name and policy number:

Specify any special needs your child has including speech, hearing, CIU services, food allergies, reactions to insect bites, etc.:

Students who are not currently enrolled in our school must bring a copy of their immunization records BEFORE camp begins.

Note: All registrations will be processed in order of receipt.

WAIVER FOR PARTICIPANT: In consideration for accepting my child's registration, I hereby for myself, my child, my heir, executors, and administrators, waiver and release any and all rights and claims for damages I or my child may have against Grace Lutheran Church and its representatives, successors, and assigns for any and all injuries suffered by myself or my child at any activity sponsored by this group. Further, I give my permission for my child to participate in any and all activities and field trips for this program and to receive emergency medical treatment if I cannot be reached.

Parent/Guardian signature _____ Date _____