

St. Andrew Summer Camp Registration Form 2019

One form per camper

Name _____ Date of Birth _____ Grade in Fall _____

Mailing Address _____

Town/ST/Zip _____

Email _____

Please register my child for: *(check one - one form per camper)*

_____ Kinder Camp (3-5 year olds) July 8-12 from 9:00 a.m. - 1:00 p.m.

_____ Beach Camp (6th - 9th graders) July 15-19 from 10:00 a.m. - 3:00 p.m.

_____ Day Camp (1st - 5th graders) July 29-August 2 from 9:00 a.m. - 3:00 p.m.

Early Registration Discount date is May 31, 2019

Early Registration cost is \$120 per camper, 2nd & 3rd child in family \$105 each;

Cost as of June 1st, 2019 will be \$135 per camper

T-Shirt Size: *(check one size only)* Youth M

Youth L

Adult S

Adult M

Adult L

Adult XL

Parent's Name(s) _____ Home Phone: _____

Cell Phone: _____

Emergency Contact (*during camp hours*) _____ Phone#: _____

My child is ALLERGIC/ ACTIVITY limitation _____

People Authorized to pick your child:

Name _____

Name _____

Name _____

If I or my emergency contact person are unreachable by phone, I authorize counselors and staff from St. Andrew Lutheran Church to seek emergency medical attention for my child named above, should the need arise.

Parent/Guardian's Signature _____

Photo Release

Please sign the appropriate statement to either Grant **OR** Refuse permission to use pictures of your children on the church website and/or for other church publicity. Please return this form to the church office.

I, _____ (Please print your name) **GRANT permission** for St. Andrew Lutheran Church to publish photos of my child(ren). _____ [Sign Here]

OR

I, _____ [Please print your name] **DO NOT grant permission** for St. Andrew Lutheran Church to publish photos of my child(ren). _____ [Sign Here]