

THE ADVENTURE ZONE Registration Form - 2010

Thank you for registering your child for THE ADVENTURE ZONE. Please complete the registration form below. If you have any questions, please ask one of the camp leaders or call the church office at 905-563-4151.

Child's Name:		Date of Birth:		Male	Female
Address:				Grade (as of Sept'10):	
City:		Postal Code:			
Parent(s)/Guardian:			Relationship to Child:		
Home Phone #:			Work / Cell Phone #:		
Email address:					
Family Doctor:			Doctor's Phone #:		
Home Church (if applicable)			Child's Health Card #:		

Please provide information for other individuals in case of emergency and we are unable to contact you.

Name	Phone #
Name	Phone #

Please provide the names of all individuals who may pick your child up during the week:

	I give permission for my son/ daughter to walk home. Initial here → <input style="width: 40px; height: 25px;" type="checkbox"/>

T-shirt Size (circle one):	Youth: S M L XL	Adult: S M L XL	
We are happy to provide one t-shirt per camper for the summer.			

Does your child have any illness, disability, allergies or any medical condition of which our staff should be made aware of? (circle) **NO YES** . If yes, please provide details (use separate sheet if necessary): _____

Is your child on any medication? (Please list): _____

Medical Statement & Informed Consent:

I understand that in the case of emergency or illness, Calvary staff will make every effort to contact the child's parents or guardians. In the event that staff cannot contact me, I agree that a qualified medical physician may attend to my child.

Children enrolled in THE ADVENTURE ZONE Camp may be involved in some of the following activities: running, hiking, swimming, rock climbing, water activities at Confederation Park, Go-carting, mini-golf, batting cages, crazy kars, laser tag, traveling by bus or van to off-site locations, and using the Calvary Gospel Church facilities. Throughout the week, camp staff will also take pictures of the kids participating in various activities. Some of these pictures will be used to promote THE ADVENTURE ZONE Camp to our church and/or the community through displays, fliers, DVD or other media.

I permit Calvary Gospel Church to use photos of my child(rens) for the promotion of THE ADVENTURE ZONE Camp as described above. Please initial here →

I hereby give permission for my child to participate in all camp activities, including scheduled off-site trips.

Parent/Guardian Signature: _____ Date: _____

THE ADVENTURE ZONE Camp Fee: \$90.00 (August 3-6, 2010)

I require extended care: Before Camp (8:00-9:00) \$10/wk After Camp (3:30-5:00) \$10/wk

Office Use Only: \$90.00/wk + Extended Care \$ _____ = Total Payment \$ _____ Rec'd Date : _____ Cash Cheque