

# CAMP GRACE 2020 APPLICATION FORM

## Camper Information

Camper Name: \_\_\_\_\_ Grade Entering in Fall: \_\_\_\_\_ DOB: \_\_\_\_\_

School: \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

Mother/Guardian: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Authorized Pick-Up Yes No

Father/Guardian: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Authorized Pick-Up Yes No

Please list any allergies, medications, or special needs your child may have

\_\_\_\_\_

Emergency Contacts (In addition to parents)

1) \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Authorized Pick-Up Yes No

2) \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Authorized Pick-Up Yes No

3) \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Authorized Pick-Up Yes No

As a parent/guardian, I give permission for my child/ward

\_\_\_\_\_ to participate in the activities of **CAMP**

**GRACE.** My child/ward has permission to attend field trips as part of the summer camp program. In the event of injury during the program, I agree that CAMP GRACE and its agent(s) may consent to any appropriate medical treatment for my child/ward, should my consent not be reasonably obtained. This consent shall be in effect for the duration of the program. I understand that CAMP GRACE does not provide insurance coverage for the summer camp program participants and that I am responsible for coverage for my child/ward. Further, I agree to hold harmless CAMP GRACE, its agent(s), volunteers, and employees against any loss or damage for any injury, illness, or other condition arising out of my child's participation in CAMP GRACE. I grant permission for CAMP GRACE to use photos of my child/ward in magazines, brochures, and/or the CAMP GRACE Facebook page.

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

**Please check the weeks your child will be attending camp.**

Week 1 June 1-June 5 \_\_\_\_\_

Week 2 June 8-June 12 \_\_\_\_\_

Week 3 June 15-June 19 \_\_\_\_\_

Week 4 June 22-June 26 \_\_\_\_\_

Week 5 June 29-July 3 \_\_\_\_\_

Week 6 July 6-July 10 \_\_\_\_\_

Week 7 July 13-July 17 \_\_\_\_\_

Week 8 July 20-July 24 \_\_\_\_\_

Week 9 July 27-July 31 \_\_\_\_\_

Week 10 Aug 3-Aug 7 \_\_\_\_\_

## Camp T-Shirts

Please select your child's t-shirt size. You will receive 3 shirts per child.

Youth S M L XL

Adult S M L XL

*Extra shirts are available for purchase for \$10 each.*