

Registration For Epworth Preschool Summer Camp 2010
(Form & camp tuition is due by Friday, April 23, 2010)

Identification

Name of child _____
(first) (last) (prefers to be called)

Address _____

Phone _____ Sex _____ Age _____ Birthdate ____/____/____

Father's name _____ Home phone _____

Business _____ Work _____ Cell _____

Mother's name _____ Home phone _____

Business _____ Work _____ Cell _____

Primary Email Address: _____

Emergency contact person (if unable to reach parents) _____
Phone _____

Medical History

Illnesses/accidents _____

Medical conditions requiring continuing care or medication _____

Allergies (be specific) _____

Will applicant be able to participate in all phases of camp activity? _____

(if not, please explain) _____

Physician _____ Phone _____

I hereby authorize any licensed physician to provide proper treatment, to order injections or hospitalization in an emergency. I understand that this authorization is given prior to any need for medical care, but is given to avoid any unnecessary delay in emergency treatment, which the physician may deem advisable in the exercise of his/her best judgment. I presume a reasonable attempt will be made to contact me. I also understand that the preschool, the church and the staff cannot be held responsible for unavoidable accidents.

Parent's signature _____ Date _____

Enrollment

Both sessions are open to younger 3's through 5-year-old children. To be eligible for camp, your child must turn 3 by June 1, 2010 or have been in a 2-year-old class at Epworth Preschool during the current school year. ALL CHILDREN MUST BE TOILET TRAINED TO ATTEND SUMMER CAMP!

I wish to enroll my child in:

_____ Session I (June 7-17, 9 a.m. - 1 p.m., Monday - Thursday)

_____ Session II (June 21- July 1, 9 a.m. - 1 p.m., Monday - Thursday)

I am enclosing a check (payable to Epworth Preschool) for \$220 for one session or \$440 for two sessions. **No refunds will be made for any reason. Once you have enrolled your child in Summer Camp, it will not be possible to permit another child to attend camp in your child's place.**

Date Submitted _____ Amount: _____ Check # _____ Cash _____