

It's All New!

Church of the Palms

Elementary Spring Enrichment Camp

9am – 3pm

Elementary Camp is for children who are currently in Kindergarten - Grade 5.

* Registration forms will not be accepted without non-refundable registration fee of \$100.

* Please register early to assure a space for your child.

* Use a separate application form for each child participating.

* For additional information contact Laurie Haas (924-1323 x 220 or lhaas@churchofthepalms.org) or Debby Wendell (924-1323 x 223 or dwendell@churchofthepalms.org).

Please check the day(s) your child will attend camp:

___ Day 1	Monday, March 29	Planting	Children's Garden
___ Day 2	Tuesday, March 30	Not-so-good Soil	ECHO
___ Day 3	Wednesday, March 31	Good Soil	Philippi Farmers' Market & Selby Garden

Total Number of days ___ **at \$35/day = \$** _____ **(total amount due with form)**

Child's Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

E-mail address _____

Age _____ Birth date ___/___/___ Grade (Fall 2009) _____ School _____

Male ___ Female ___ Church of the Palms Member: yes ___ no ___ other church _____

T-Shirt size - Please circle:

Child Small (size 4-6)

Child Medium (size 8-10)

Child Large (size 12-14)

Adult Small

Adult Medium

Adult Large

(Please turn paper over to complete application)

Person to Contact in Emergency

1. Parent/Guardian _____

Phone (H) _____ (W) _____ (Cell) _____

2. Friend: _____

Phone (H) _____ (W) _____ (Cell) _____

3. Name _____ (Relationship) _____

Phone (H) _____ (W) _____ (Cell) _____

Medical History (Please circle)

Allergies Illnesses Currently on Medication Diet Restriction
Please explain: _____

Does your child have limitations that will require adaptations to the program or field trips?
(Yes) (No) Please explain: _____

Field Trip and General Release:

Child's Name: _____ has my permission to attend all field trips included in the Spring Camp under the supervision of Church of the Palms. I have read, understand, and agree with the following conditions:

1. All campers will be participating in the field trips. If my child arrives late or leaves early, I will be responsible for taking him/her to and from the field trip site and making prior arrangements with the Camp Director.
2. Proper attire and sun protection will be needed and I will provide the aforementioned as necessary.
3. All campers shall follow the established program and guidelines. Any campers can and will be expelled from the program due to disciplinary misconduct, with no camp refund.
4. The undersigned parent and/or guardian, in consideration for Church of the Palms providing facilities, instruction and supervision in the registered activity, does hereby: (a) assume all risk of possible damage or injury involved through participation of my child in the registered activity, (b) request permission to have my child participate in the activity with full knowledge that said activity could result in damage or injury to the participant.
5. I give permission for use of photography including my child in church publicity. I give permission for Church of the Palms to contact me through my address, phone, cell phone, and/or email address.

Signature of Parent/Guardian _____ Date ____/____/____

Please mail entire registration with payment to

Church of the Palms Elementary Spring Camp 2010 – 3224 Bee Ridge Road – Sarasota, FL 34239
www.churchofthepalms.org