

# 2008 Summer Camp Registration Form

## Chino Valley Christian Schools

T-Shirt Size	
<input type="checkbox"/> S (6-8)	<input type="checkbox"/> Adult S
<input type="checkbox"/> M (10-12)	<input type="checkbox"/> Adult M
<input type="checkbox"/> L (14-16)	<input type="checkbox"/> Adult L

Please Check One:  New Camper  Returning Camper

Name of the school child is attending: \_\_\_\_\_ Last Grade Completed: \_\_\_\_\_

Child's Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Age \_\_\_\_\_ Sex:  Male  Female

Father's Name \_\_\_\_\_ Work# \_\_\_\_\_ Cell# \_\_\_\_\_ E-Mail \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work# \_\_\_\_\_ Cell# \_\_\_\_\_ E-Mail \_\_\_\_\_

Who is responsible for Camp fees? \_\_\_\_\_

Campers may not be released from camp without the permission of a parent or authorized adult. If an emergency requires that a child be dismissed from camp and a parent cannot be reached, the following person(s) are authorized to take child from the facility:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

By signing this registration form, I give my child permission to attend all camp field trips and activities. I understand that there will be no childcare on campus for campers not attending the field trips. I understand that it is my responsibility to provide alternate arrangements for my child (or children) not going on a planned activity.

### Emergency Medical Release Form

To whom it may concern: In case of a medical emergency in which mother, father, or legal guardian cannot be reached, I hereby give my written permission to perform or administer any medicine and/ or medical procedures deemed necessary by a qualified medical physician, to preserve the health and/ or life of my child.

WE CANNOT ASSUME FINANCIAL RESPONSIBILITY FOR PAYMENT OF PHYSICIAN FEES OR EXPENSES.

Name of Insurance \_\_\_\_\_ Group # \_\_\_\_\_ Doctor \_\_\_\_\_

Current Medications \_\_\_\_\_ Allergies \_\_\_\_\_

Activity Restrictions \_\_\_\_\_

### Please check the Summer Camp weeks that you want your child to attend:

<input type="checkbox"/> June 16-20	<input type="checkbox"/> June 23-27	<input type="checkbox"/> June 30-July 4
<input type="checkbox"/> July 7-11	<input type="checkbox"/> July 14-18	<input type="checkbox"/> July 21-25
<input type="checkbox"/> July 9-Aug 1	<input type="checkbox"/> Aug 4-8	<input type="checkbox"/> Aug 11-15
<input type="checkbox"/> Aug 18-22		

### Please check the Specialty Camps that you want your child to attend (9:00 am-12:00):

<input type="checkbox"/> <b>June 16-20</b> Art, Guitar, Violin	<input type="checkbox"/> <b>June 23-27</b> Art, Guitar, Violin	<input type="checkbox"/> <b>June 30-July 4</b> Guitar, Violin
<input type="checkbox"/> <b>July 7-11</b> Guitar, Violin, Computer	<input type="checkbox"/> <b>July 14-18</b> Computer, Math	<input type="checkbox"/> <b>July 21-25</b> Science: Kitchen Chemistry, Math
<input type="checkbox"/> <b>July 28-Aug 1</b> Science: Matter in Motion	<input type="checkbox"/> <b>Aug 4-8</b> Sports	<input type="checkbox"/> <b>Aug 11-15</b> Sports
<input type="checkbox"/> <b>Aug 18-22</b> Study Skills		

### **Camp Fees:\*\***

Registration: \$40 (includes Camp Shirt)  
**Camp Hours (Camp Baldy): 9:00 am – 4:00 pm**  
**Camp Hours (Specialty Camp): 9:00 am-12:00 pm**  
Weekly Fee: \$140 (includes both camps)  
Specialty Camp Only Weekly Fee:\$110  
Am Extended Care Hours: 7:00 am – 9 am (\$20/wk)  
PM Extended Care Hours: 4 pm – 6 pm (\$20/wk)  
Full Extended Care Hours: 7:00 am-9 am and  
4 pm– 6 pm; (\$30/wk)  
Occasional Care (Before/After Camp Hours)-\$10 per  
hour

**\*\*Early Bird Registration:** If you pay the registration fee and the first week of camp (June 16-20) before Tuesday, June 10th, you will receive the first week of camp for \$100 instead of \$140

I have read and agree to adhere to the Summer Camp Rules and Financial Guidelines.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date