

# Messiah Summer Day Camp

## Registration Form (Please complete both sides)

**Dates:**

June 25th – August 3rd

**No Camp on Wednesday July 4th**

**Location:** Messiah Lutheran Church, 6201 W. Patterson Ave. Chicago , IL 60634

**If you have any questions please contact us at [MSDCamp@sbcglobal.net](mailto:MSDCamp@sbcglobal.net) or (773)725-8903**

**A separate form must be completed for each child you are enrolling**

Please complete the following and return to the church office **with your \$30** registration fee. Any applications turned in without the application fee will not be processed and your child will not be guaranteed a spot. Weekly camp rate is \$100 (\$90 for each additional child in the same family/household). When necessary, the daily camp rate is \$35.

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Grade child last completed: (please circle) PK K 1 2 3 4 5 6 7 8

Address: \_\_\_\_\_

Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

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

E-Mail Address: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**My child plans to attend the following days:**

____ Week 1-June 25-29	all days	or	M	T	W	TH	F	
____ Week 2-July 2-6	all days	or	M	T		TH	F	<b>(NO CAMP ON JULY 4)</b>
____ Week 3-July 9-13	all days	or	M	T	W	TH	F	
____ Week 4-July 16-20	all days	or	M	T	W	TH	F	
____ Week 5-July 23-27	all days	or	M	T	W	TH	F	
____ Week 6-July 30-Aug 3	all days	or	M	T	W	TH	F	

**Before and After Camp Sessions :**

Messiah Camp will offer Before Camp (7:30-9:30am) and After Camp (3:30-5:30pm) sessions as a convenience to our families that need care beyond the 9:30 AM-3:30 PM Camp sessions. Cost of extended care is \$5.00 per hour for the first child, \$3 per hour each additional child (children must be from the same family for discount to apply). If you plan on utilizing Before and After Camp please indicate below the time of arrival and departure (for example 8:00 AM-4:00 PM ).

M: \_\_\_\_\_ T: \_\_\_\_\_ W: \_\_\_\_\_ TH: \_\_\_\_\_ F: \_\_\_\_\_

**Please list any allergies or food restrictions:** \_\_\_\_\_

\_\_\_\_\_

**Please list any medication your child is taking:** \_\_\_\_\_

\_\_\_\_\_

**Physical restrictions and limitations:** \_\_\_\_\_

\_\_\_\_\_

**Emergency information** (*person authorized to pick child up in case of an emergency*)

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Relation to child: \_\_\_\_\_

**Persons authorized to pick up or drop off child:** \_\_\_\_\_

\_\_\_\_\_

**Persons NOT authorized to pick up child:** \_\_\_\_\_

\_\_\_\_\_

**Photographic Release:** I hereby grant Messiah Lutheran Church Day Camp the absolute right and permission to copyright and use, reuse, publish, and republish photographic materials of my child to illustrate, promote and advertise Messiah Lutheran Church Day Camp in publications and websites.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Walking Field Trip Release:**

I authorize Messiah Summer Day camp staff to take my child(ren) on walking field trips no greater than 2 miles from Messiah Lutheran Church, 6201 W. Patterson. Walking field trips may include, but are not limited to, nature walks, local public libraries or parks and area playgrounds.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_