

Messiah Summer Day Camp
"GO!" — Matthew 28:19
Registration Form (Please complete both sides)

Dates: June 14th – August 20th
No Camp on Monday, July 5th

Fees: \$20.00 non-refundable registration fee (to be applied to first week payment) per child
\$60.00 per week for one child; \$110.00 per week for two children; \$160.00 per week
for three children; \$210.00 per week for four children
\$20.00 per child daily rate
\$10.00 per week for Before Camp per child (7:00-9:00 am)
\$10.00 per week for After Camp per child (3:00-6:00 pm)

If paid in full by Thursday, April 15th for ten weeks fees are: \$550.00 for one child; \$540.00 (per child) for two children; \$530.00 (per child) for three children; \$520.00 (per child) for four children

If paid in full by Thursday, April 15th for three weeks fees are: \$170.00 for one child; \$160.00 (per child) for two children; \$150.00 (per child) for three children; \$140.00 (per child) for four children

If you choose to pay your camp fees on a weekly basis, payment is due on Monday of the week your child/children will be attending camp by 9:00 am.

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

If you have any questions, please contact Pastor Geske or Helene Pergande at 773-725-8903 or messiahchgo@sbcglobal.net

Please complete the following and return to the church or school office by Tuesday, June 1st with your registration fee *(separate form must be completed per child you are enrolling).*

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 14-18	all days	M	T	W	Th	F
_____ Week 2–June 21-25	all days	M	T	W	Th	F
_____ Week 3–June 28-July 2	all days	M	T	W	Th	F
_____ Week 4–July 6-9	all days		T	W	Th	F
_____ Week 5–July 12-16	all days	M	T	W	Th	F
_____ Week 6–July 19-23	all days	M	T	W	Th	F
_____ Week 7–July 26-30	all days	M	T	W	Th	F
_____ Week 8–August 2-6	all days	M	T	W	Th	F
_____ Week 9–August 9-13	all days	M	T	W	Th	F
_____ Week 10–August 16-20	all days	M	T	W	Th	F

Before and After Camp Sessions:

Messiah Camp will offer Before Camp (7:00-9:00 am) and After Camp (3:00-6:00 pm) sessions as a convenience to our families that need care beyond the 9:00 am-3:00 pm Camp sessions. 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: _____

Child's hobbies and interests: _____

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 _____