

# 2010 SUMMER OF ADVENTURE

*Emmanuel*  
BAPTIST CHURCH

2121 Cedar Hill Cross Road, Victoria, BC V8N 5C6 — 250.592.2418 — www.ebcvictoria.ca

One form per camper. Please PRINT clearly.

Camper's Name: \_\_\_\_\_  
First Name Last Name

Gender: M \_\_\_ F \_\_\_ Age: \_\_\_ Entering Grade: \_\_\_\_\_

Birthdate: \_\_\_\_\_

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ PC: \_\_\_\_\_

*Parent(s)/Guardian(s)*

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

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

Email: \_\_\_\_\_

*If email address given, confirmation information will be sent via email.*

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

Church Affiliation (if any): \_\_\_\_\_

How did you hear about our camps: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Emergency Contacts*

Name 1: \_\_\_\_\_ Ph 1: \_\_\_\_\_

Name 2: \_\_\_\_\_ Ph 2: \_\_\_\_\_

Name 3: \_\_\_\_\_ Ph 3: \_\_\_\_\_

## Medical Information

*Swimming Ability*

Non  Beginner  Intermediate  Advanced

*Medical Information*

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Care Number: \_\_\_\_\_

Health Concerns:

*Please specify allergies, health problems, medications or any other concerns*

\_\_\_\_\_

\_\_\_\_\_

Please check the box(es) next to the camp(s) for which this camper is registering (ages and grades refer to the upcoming school year):

- July 5 - 9: **Outdoor Adventures!**  
 9:00 am - 3:00 pm
  - ☛ Grades 1 - 5
  - ☛ Cost: \$110 (includes one overnight camping adventure)
- Jul 12 - 16: **Hawaiian Adventure-Fun with water & sand!** 9:00 - 11:30 am
  - ☛ Preschool: ages 3 - 5 years (by 31 Dec 2010)
  - ☛ Cost: \$40
- July 19 - 23: **Vacation Bible School: "Hero Headquarters"!** 9:00 - noon
  - ☛ Ages 3 years (by 31 Dec 2010) through Grade 5
  - ☛ Cost: \$30 for the first child, \$15 for next 2 in the same family, max cost \$60/family
- July 26 - 30: **Tiny Tots Theatre-Music & Drama!** 9:00 - 11:30 am
  - ☛ Preschool: ages 3 - 5 years (by 31 Dec 2010)
  - ☛ Cost: \$40
- Aug 3 - 6: **How Things Work!** 9:00-11:30
  - ☛ Ages 4-6 years (by 31 Dec 2010)
  - ☛ Cost: \$32
- Aug 9 - 13: **Nature World!** 9:00 - 11:30 am
  - ☛ Preschool: ages 3 - 5 years (by 31 Dec 2010)
  - ☛ Cost: \$40
- Aug 20 - 22: **Family Adventure Camp!**
  - ☛ For families of all ages and sizes. Stoltz Pools, Cowichan R.
  - ☛ Cost: \$30/family.

Please proceed to the signature page on the reverse.

## Office Use

|                        |  |
|------------------------|--|
| Date Received:         |  |
| Amount due:            |  |
| Cheque received:       |  |
| Cash received:         |  |
| Church Campership:     |  |
| <b>Total received:</b> |  |

## Permission and Release Form

I, the Participant (print name of child), \_\_\_\_\_, understand that I am responsible to act in a safe and responsible fashion and obey requests to comply with health and safety regulations as directed by the designated leaders and drivers. I will be responsible for myself and wear available seat belts and not distract the driver when going to or from this event. During activities necessitating such, I understand it is my responsibility to obtain and wear suitable safety equipment. I will not endanger the safety of myself and others, at any activity, or in transportation to and from such activities. As parent / guardian, I hereby authorize the Participant to attend the functions, events and activities that will be part of this event hosted by Emmanuel Baptist Church and release its staff and members from responsibility and liability for any injury or illness that my child may sustain during this event or in transit to and from this event.

As parent/guardian, I authorize the Participant to be transported by the designated leaders or drivers, or arrange for transport to the NEAREST SUITABLE MEDICAL OR HOSPITAL FACILITY in the event of an emergency situation that is not treatable at the scene. In such an emergency, I hereby authorize a supervising adult of the activity, as my agent, to consent to any medical/dental diagnoses and treatment advised and supervised by a physician, surgeon or dentist (as appropriate). I expect to be contacted as soon as possible.

I  do /  do *not* permit Emmanuel Baptist Church to make use of images of the Participant (moving or still) for the sole purposes of reporting to the Church membership on the summer camping program and advertising future camps in print, live presentations and web communications.

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

Date Signed: \_\_\_\_\_

*Note: Registration is not complete until we receive a signed copy of this form, along with full payment.*

## Refund Policy

If a registered camper is withdrawn from a camp, Emmanuel Baptist Church will observe the following refund policy:

- *Full refund* if withdrawal is more than 31 days from the camp date.
- *50% refund* if the withdrawal is *within* 31 days of the camp date; *100%* if the camper's space can be filled from a waiting list before the camp starts.
- *No refund* if withdrawal takes place during the camp dates.

*Please send completed Registration and Release forms with payment to:*

### **Emmanuel Baptist Church**

2121 Cedar Hill Cross Road

Victoria, BC V8P 2R6

*Make cheques payable to "Emmanuel Baptist Church"*