

# FIRST CHRISTIAN CHURCH MEGA CAMP REGISTRATION FORM

NAME: \_\_\_\_\_ AGE \_\_\_\_\_ LAST GRADE COMPLETED \_\_\_\_\_ MALE/FEMALE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME CHURCH \_\_\_\_\_

## CHILDREN WHO HAVE JUST COMPLETED 1ST-5TH GRADES SELECT ONE FROM THE FOLLOWING LIST

- |  |  |
|--|--|
| <input type="checkbox"/> BASKETBALL (bring a basketball with your name on it)        | <input type="checkbox"/> Stain Glass (must have completed 4th -5th grade; max 12 children)                     |
| <input type="checkbox"/> Cheerleading (wear comfortable shoes)                       | <input type="checkbox"/> Selected Art: each night you'll create something new                                  |
| <input type="checkbox"/> Fishing (bring own rod if you have one;<br>Max 15 children) | <input type="checkbox"/> Archery (bring your own bow, if you have one; must have completed 3rd<br>-5th grades) |

## PRE-SCHOOL/KINDERGARTEN AGE (4 & 5 yrs) MEGA CAMP FOR PRE-K/K CHILDREN WILL MEET FROM 5:30-7:30.

Preschool and Kindergarten age kids will have a different Mega Camp experience. They will rotate each night through a bible story station, craft station and game station. Their night will end at 7:30 pm.

## 2 & 3 YEAR OLD CHILDREN MY PARENT AND ME CLASS MEGA CAMP FOR 2 & 3 YEAR OLDS WITH THEIR PARENT WILL MEET FROM 5:30-7:00

This class is for parents and their children to experience Mega Camp together. The parents participate along side their child. You and your child will be a blast sharing the stories, games and activities together.

NAME OF PARENT PARTICIPATING WITH CHILD: \_\_\_\_\_

Guardian (s) name: \_\_\_\_\_

Phone \_\_\_\_\_ email \_\_\_\_\_

In case of emergency contact \_\_\_\_\_ phone \_\_\_\_\_

\_\_\_\_\_ phone \_\_\_\_\_

Special concerns (allergies, medications, medical conditions, etc) \_\_\_\_\_

### PERMISSION TO TRAVEL

Some groups will be transported to other gyms. I give my permission for \_\_\_\_\_  
to ride with FCC and their representatives. I understand that this may be by bus or private vehicle.

Signed \_\_\_\_\_ date \_\_\_\_\_

### PERMISSION FOR MEDICAL CARE

I give my permission for \_\_\_\_\_ to be treated in case of an emergency that requires  
immediate attention. I also understand that every attempt will be made to notify me as soon as possible should an emergency arise.

Signed \_\_\_\_\_ date \_\_\_\_\_

Doctors name and phone \_\_\_\_\_ Insurance Co. and policy \_\_\_\_\_

### PHOTO/VIDEO PERMISSION:

I give my permission for my child to be photographed or videoed. I understand the image may displayed in FCC's publications, build-  
ings, websites or FB page. I understand that my child's name will NOT be published or linked with the photo.

Signed \_\_\_\_\_ date \_\_\_\_\_