

# Kids Camp | July 13-16

## 3rd - 5th Grade (Fall 2017)

Earlybird Rate: \$225 (April 1 - 30)  
Regular Rate: \$245 (May 1- June 18)  
Late Rate: \$275 (June 19 - July 2)

### **DROP OFF/PICK UP INFORMATION**

Drop off: July 13 - 1:30pm at WSFC  
Pick up: July 16 - 12:30pm at WSFC

### **FOOD ALLERGIES**

Canby Grove takes pride in providing well-balanced meals for students. Please inform us if your student has a food allergy that prevents him/her from eating meals made by the camp.

### **MEDICATIONS**

All medication (over the counter and prescription) must be in original container and brought in clear ziplock bag. When you arrive to drop off, you will be asked to fill out a form with instructions. All medication and form will be kept locked with our camp nurse.

### **CAMPER MAIL**

We encourage you to send your camper mail! Please label letters/packages:

Canby Grove  
"Camper Name"  
7501 S. Knights Bridge Rd.  
Canby, OR 97013

### **WHAT TO BRING**

- Bible and pen
- Sleeping bag and pillow
- Modest clothing and swim wear
- Sandals and athletic shoes
- Toiletries
- Flashlight
- Refillable water bottle
- Bug spray
- Sunscreen
- Towels

### **VISITOR POLICY**

For the security of our students, all camps are closed to visitors who are not registered students or staff.

### **WHAT TO LEAVE AT HOME**

Personal audio, video or gaming devices, non-prescription drugs, knives or weapons.

### **SNACK SHACK**

We recommend students bring a small amount of spending money (\$5 - \$20) for purchasing snacks and candy.

# CAMPER REGISTRATION 2017

Return completed form to the CAMP COORDINATOR at your church.

## FOR CHURCH USE ONLY

Church / City \_\_\_\_\_

### KIDS CAMP

July 13-16

### MIDDLE SCHOOL

July 29-  
August 2

### HIGH SCHOOL

July 24-28

## CAMPER REGISTRATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Birth Date \_\_\_\_\_  Male  Female  Grade in Fall 2017 \_\_\_\_\_ T-Shirt Size \_\_\_\_\_ Youth Sizes Available for Kids Camp

Cabin Partner Request \_\_\_\_\_

## PARENT GUARDIAN INFORMATION

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

Address \_\_\_\_\_ City/State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Email \_\_\_\_\_

## HEALTH INFORMATION

Physician \_\_\_\_\_ Physician Phone \_\_\_\_\_

Last Tetanus \_\_\_\_\_ Insurance Provider \_\_\_\_\_

Policy Number \_\_\_\_\_ Group Identification \_\_\_\_\_

Medical Concerns or Known Allergies \_\_\_\_\_

Current Prescribed Medications \_\_\_\_\_

**NOTE:** Campers must turn in both prescription and non-prescription medications to the camp nurse upon arrival. **Medications must be in their original containers with the prescription dosage on the original label, unless changed in writing by the physician.** Many over-the-counter medications are stocked at camp and can be dispensed by the nurse as needed.

Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Primary Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

## PARENTAL RELEASE

As parent or legal guardian, I give the above-named student my permission to attend a session of summer camp sponsored by the North Pacific District. In the event of illness or injury, I authorize the camp staff to provide emergency care by the camp nurse, local emergency personnel or hospital, in case I cannot be reached for approval. I understand that the activity insurance of the attending church is secondary to my own primary coverage, for which I am responsible. I verify that all immunizations are current, and the above information is accurate and complete. I agree to notify the North Pacific District of any changes to this information prior to the camp session. I understand that \$50 of the camper registration deposit is non-refundable and non-transferable, should I cancel less than two weeks prior to the camp session. **I understand that the camp cannot prepare special meals for the campers and recognize it is my responsibility to send meals and snacks in the event that my child has severe food allergies that would prohibit them from eating camp food.** Photo and video will be taken throughout the camp session as part of the program, and I release any media to be used for promotional purposes only. Participation in North Pacific District camps is the same for everyone regardless of gender, race, color, or national origin.

## PARENT/GUARDIAN SIGNATURE (required)

\_\_\_\_\_

Date \_\_\_\_\_