



Date: _____

Camp Registration Form 2010

Camper Information

Child's First Name		Child's Last Name		Sex
Street Address:		City	Postal Code	
Phone Number		Date of Birth (MM/DD/YYYY)		
Age	Grade	Siblings attending camp:		
Healthcard Number: (Healthcard number must be provided)				
Parent Name #1		Home #	Work #	
Parent Name #2		Home #	Work #	
Legal Custody		Both	Father	Mother
		Other _____		
Alternative Emergency Contact:		Phone#		
Name:		Relationship		
Medical: Please list any and all medical conditions that that your child has:				
Please list any medications your child will be taking while they are at Camp:				
Camp Selection		_____ July 5 th to 9 th (\$75.00)		
		_____ July 25 th to 30 th (\$100.00)		
If you child is going to the overnight camp: Cabin mate Selection				
Please circle one of the following: My child will ride the bus Parent will make arrangements				
Parent's Signature				
Approved people to pick up child, other than parents/guardians listed above:				
1) _____				
2) _____				
Step 1: Calculate Payment		Step 2: Choose Method		Step 3: Payment Mode
Camp Fee: _____		A. Full Payment _____		Cash: _____
EBS: _____		B. Extendend Payment _____		Cheques: _____
Total: _____		25% of Balance due with registration form _____		*Cheques are to be made payable to Royal
		75% of Balance due July 4 th 2010 _____		View Church

RV Kids Camp Liability Form 2010
218 Clarke Road London, ON N5W 5E4
www.rvkids.org

Please complete the information below and return to the **RV Kids Registration desk or Children's Ministry Director**. The form is needed for your child to participate in Saturday night gathering, Sunday Morning service, Tuesday night "Construction Zone program located at Churchill Public School or special events held by Royal View Church, as well for the 2010 summer camps that are held at Royal View and Off site. All information must be correctly and entirely filled out in legible printing including postal code, phone numbers, health card and proper signature or parent/guardian. This information will be used to ensure your child has the best and safest time in RV Kids Programs.

Medical: Precautions are taken for the safety and health of you child, but in the event of accident, sickness, Royal View Church , its staff and volunteers are hereby released from liability. If your child requires special medication, x-rays, surgery or other medical treatment, effort will be exercised to contact the person listed on this form. However, if notification is not possible, by signing below you hereby authorize Royal View Church, staff and volunteers to seek medical attention for your child on your behalf.

Promotional: Photographs, video and audio are taken weekly at our programs. These media tools are for promotional and educational use only and to share our events with Church and Community. By signing below you authorize Royal View Church, staff and volunteers to photograph, video, record your child for the purpose of advertising and promotions.

Rules: By signing below you agree that your child will make every effort to abide by the rules and safely guidelines of the programs, and events at the Royal View Church. Should your child refuse to abide by the rules, disrupt programs or other children, they will be removed from the program/activity until they are ready and able to return. If your child repeatedly chooses not to abide by the rules, they will be sent home at the parents expense and asked not to return for a short period of predetermined time.

Transportation: By signing below I give my child permission to ride the bus for daily pick up and drop off.

I do I do not give permission for my child to ride the bus

I do I do not give permission for my child to ride with an adult leader in a car.

Children's Programs: This forms covers all of the children's program that Royal View Children's Ministry leads, this includes but is not limited to Saturday night gathering, Sunday Morning service, Tuesday night "Construction Zone program located at Churchill Public School or special events held by Royal View Church. By signing below you are giving your child permission to attend any of the above programs and ride our bus if box is checked. Parents will be notified of special events where children will be taken away from regular program settings.

Signature: _____ Date: _____

For Office Use only:

Date recieved: _____
Letter sent: _____
Date Paid: _____