

Summer Day Camp Application for Admission

First United Methodist Church
401 Broad Street
LaGrange, GA 30240
706-884-3117 or dayschool@lagrangefumc.org

Student Name: _____

Parent(s) Name: _____

Email address: _____

Camper lives with: Father____ Mother____ Both____ Other_____

FAMILY INFORMATION

Home address: _____

City: _____ State: _____ Zip: _____

Home telephone: _____

Father's cell phone _____ work phone _____

Mother's cell phone _____ work phone _____

Emergency Contact _____ phone _____

CAMPER INFORMATION

Camper's First Name	Camper Last Name	Gender	BIRTHDAY Month Day Year	Present Age	Present Grade Completed*	Name of school camper is attending
1.						
2.						
3.						

*Grade completing in May 2009

Name of Person(s) Authorized to pick up your child each day:

1. _____

2. _____

3. _____

4. _____

ENROLLMENT OPTIONS Please circle the appropriate camper # for you child's weeks at camp and any extended hours needed.

	Traditional camp 9am-4pm	AM Extended Hours 7:30am-9am	PM Extended Hours 4pm-5:30pm	Theme of the week
Weeks 1-11 The entire summer!	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	
Week 1 May 26- 29*	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Welcome to the Hoe Down!!</i>
Week 2 June 1-5	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Super Summer Olympics</i>
Week 3 June 8-12	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Vacation Bibl Schoo Camp EDGE</i>
Week 4 June 15-19	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Slime Time</i>
Week 5 June 22-26	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Ultimate Animal Safari</i>
Week 6 June 29-July 2*	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Star Spangled America</i>
Week 7 July 6-10	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Mad Scientist</i>
Week 8 July 13-17	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Wet, Wild and Wacky Adventure</i>
Week 9 July 20-24	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Ultimate Iron Chef</i>
Week 10 July 27-31	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Frontier Week</i>
Week 11 August 3-6*	Camper #1 2 3	Camper #1 2 3	Camper #1 2 3	<i>Final Fling</i>

*Multiple child discount available.

CAMPER #1 INFORMATION

Does your child need and epi-pen? Yes No Does your child need an inhaler? Yes No Can camper swim? Yes No
Are there any medical problems, dietary or activity restrictions that the camp staff should be award of?

 General behavior (Please comment on personality and emotional development. Does camper have difficulties, fears or anxieties?)_____

CAMPER #2 INFORMATION

Does your child need and epi-pen? Yes No Does your child need an inhaler? Yes No Can camper swim? Yes No
Are there any medical problems, dietary or activity restrictions that the camp staff should be award of?

 General behavior (comment on personality and emotional development. Does camper have difficulties, fears or anxieties?)_____

CAMPER #3 INFORMATION

Does your child need and epi-pen? Yes No Does your child need an inhaler? Yes No Can camper swim? Yes No
Are there any medical problems, dietary or activity restrictions that the camp staff should be award of?

 General behavior (comment on personality and emotional development. Does camper have difficulties, fears or anxieties?)_____

CONDITIONS OF ENROLLMENT

1. There will be no camp on Monday, May 25; Friday, July 3 and Friday, August 7.
2. Applications cannot be confirmed unless accompanied by a \$35 fee per family. Fee is non-refundable.
3. I give camp staff authority to act on my behalf in case of emergency.
4. Summer Day Camp reserves the right to terminate registration of any camper if, in the opinion of the Directors, it is in the best interest of the child or the camp.
5. The parent or guardian hereby consents to the use by First United Methodist Church of the camper's photograph or video image for public purposes.
6. Payment for camp must be received by 9am on the first day of each week of camp in order for the camper to participate that week.
7. As parents, we understand the risks involved with camp activities and that no environment is risk free. We accept responsibility and grant permission for our child to participate in all camp activities and excursions.
8. Cost of field trips are extra and not to exceed \$10 per week.
9. Children need to bring a sack lunch each day. A morning and afternoon snack is provided.

I/we have read, understand and agree with the Conditions of Enrollment detailed above. Please enroll my child(ren) as named herein at Summer Day Camp according to the program choices selected in the registration sections of this Application Form.

Parent Signature

Date

For more information, please contact **Debbie Cox** at **706-884-3117** or dayschool@lagrangefumc.org.

Please return your completed application along with your \$35 non-refundable registration fee

(checks made payable to "FUMC") by May 15th, 2009.

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