



# GUARDIAN LUTHERAN SCHOOL

## 2019 Summer Camps

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*Please complete both sides of this form and return with payment to the school office.*

### Camper Information:

Last: \_\_\_\_\_ First: \_\_\_\_\_ Current Age: \_\_\_\_\_ DOB: \_\_\_\_\_ M / F

### Parent Information:

Mother Name \_\_\_\_\_ Father Name \_\_\_\_\_

Cell Number \_\_\_\_\_ Cell Number \_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

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

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### Emergency Contacts:

Name \_\_\_\_\_ Name \_\_\_\_\_

Relationship to Camper \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Phone Number \_\_\_\_\_ Phone Number \_\_\_\_\_

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### Program Selection:

<u>Program (select all that apply)</u>	<u>Date of Camp</u>	<u>Cost</u>
<input type="checkbox"/> Girls Basketball Camp	June 17-20	\$40
<input type="checkbox"/> Experimental Art Camp (Grades K-4)	July 9-11	\$55
<input type="checkbox"/> Sculpture/3D Art Camp (Grades 5-8)	July 16-18	\$55
<input type="checkbox"/> Girls Volleyball Camp	July 22-26	\$40
<input type="checkbox"/> Beginner Theater Camp (Grades K-4)	July 29-August 2	\$40
<input type="checkbox"/> Advanced Theater Camp (Grades 5-8)	July 29-August 2	\$40
<input type="checkbox"/> Boys Basketball Camp	August 12-13 & 15-16	\$40

By signing this form, I certify that the information provided by me is accurate and true to the best of my knowledge. I also acknowledge that I have included with this form the full payment for all camps for which I am registering.

 Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## PARENT/GUARDIAN CONSENT AND RELEASE

I, the undersigned parent and/or legal guardian of the minor named on this registration form do hereby consent to his/her participation in the camp(s) previously listed. I, as the parent and/or legal guardian of the minor, in considerations of the acceptance of this entry, with full understanding of the risk involved and to the maximum extent permitted by law, release, hold harmless, and agree to against any present or future claim, loss, or liability for injury to person or property which, I or the minor, may suffer, or for which the minor may be liable to any other person related to the minor's participation in the Guardian summer camps resulting from any cause, including but not limited to ordinary or gross negligence.

**I HAVE READ THIS CAREFULLY AND KNOW IT CONTAINS A CONSENT AND RELEASE.**

 Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (Print) \_\_\_\_\_

### CAMP ACTIVITIES INSURANCE WAIVER

I fully understand Guardian Lutheran School does not provide health or life insurance coverage for the above named student while he/she is participating in camp activities. I/we further understand that it is my/our own responsibility to provide adequate insurance coverage to the above named student.

 Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

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### CAMP T-SHIRT SIZE

Youth S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_      Adult S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_

**\*\*Campers registering after May 27 are not guaranteed a camp t-shirt.**