

# Camp KidsServe



## Setting the stage for service to others

July 28 – August 1, 2008 9:00 a.m. – 12:00 p.m.

Camp KidsServe is for all children entering kindergarten through 5<sup>th</sup> grade. Older youth are invited to participate as helpers.

The camp fee is \$50.00 and includes a t-shirt, activity supplies and daily snack. Make checks payable to Church of the Epiphany and note Camp KidsServe. **Return completed registration form and check to Church of the Epiphany, 3301 Hidden Meadow Drive, Herndon, VA 20171, Attn: Babette Arnold.**

Child's Name (first and last)	Sex	Birth Date	Grade in 09/07	Medical Info or Allergies	T-shirt Size? Adult: S,M,L Youth: XS,S,M,L

Name of Parent(s) \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_ Home Church? \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Medical Release: Our procedure in case of emergency is 1) to provide first aid; 2) call for professional help if necessary 3) call parents or emergency contact. In some cases, attempts to contact you or your emergency contact could delay necessary treatment. Only after trying to contact you, will we contact your doctor and we will only send your child to the hospital in cases of emergency.

In the event of a medical emergency, I authorize Church of the Epiphany to obtain medical assistance and treatment for my child on my behalf.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Family Physician Name  
and Telephone Number \_\_\_\_\_

Insurance Provider  
and Policy Number \_\_\_\_\_

Are you able to volunteer at Camp KidsServe? \_\_\_\_\_ All week \_\_\_\_\_ Certain days (please specify below)