

2018 Kid's Summer Camps

Bethel Presbyterian Church



SHIPWRECKED VBS

Friday, July 13th – 5:15pm – 8:00pm

Saturday, July 14th – 3:30pm – 6:00pm

Sunday, July 15th – 3:30pm – 7:30pm (*families join at 6:00pm for family picnic & "sail-a-bration"*)

Ages: Children must be 4 years old by July 1, 2018 through rising 5th grade;
Youth Helpers rising 6th grade through High School

Registration Deadline: July 8th – *Space is limited.*

Cross + Culture

Cross Culture Camp

Monday, July 23rd – 9am – 4pm

Tuesday, July 24th - 9am – 4pm

Wednesday, July 25th - 9am – 4pm

Thursday, July 26th - 9am - 12:30pm

Rise Against Hunger food packing mission project is Thursday evening from 4-8pm (families welcome)

Ages: Rising 5th and 6th grades

Registration Fee: \$75

Registration Deadline: July 18th – *Space is limited to the first 15 campers.*

2018 Kid's Summer Camps Registration Form

Bethel Presbyterian Church

Select the camps you are registering for:

Shipwrecked VBS – Friday, July 13th – Sunday, July 15th (Camper)

Child's Name:	
Age:	Gender:
Date of birth:	Grade in 2018-2019:

Child's Name:	
Age:	Gender:
Date of birth:	Grade in 2018-2019:

Child's Name:	
Age:	Gender:
Date of birth:	Grade in 2018-2019:

Shipwrecked VBS – Friday, July 13th – Sunday, July 15th (Youth Helper)

Child's Name:	
Age:	Gender:
Date of birth:	Grade in 2018-2019:

Child's Name:	
Age:	Gender:
Date of birth:	Grade in 2018-2019:

Cross Culture – Monday, July 23rd – Thursday, July 26th (Camper)

Child's Name:	
Age:	Gender:
Date of birth:	Grade in 2018-2019:

Camper/ Youth Helper Name(s)

Parent's Name:
Street Address:

City, State:	
Contact number 1:	Contact number 2:
Email address 1:	Email address 2:

In case of emergency during camp hours:

Name:	
Relationship:	Contact number:
Name:	
Relationship:	Contact number:

MEDICAL INFORMATION

Please Circle Please Initial

Do you, the parent(s) of the child(ren) named above, authorize adult volunteers of Bethel Presbyterian Church as agents, to consent to any medical or surgical care deemed advisable by any accredited physician or surgeon in a Bethel Presbyterian Church approved emergency clinic or hospital?	Y / N	
Do you release from any liability Bethel Presbyterian Church and any of its ministries or leaders in the event of an accident en route, during and returning from the above mentioned event (if applicable)? <i>This agreement does not apply to claims for intentional misconduct or gross negligence.</i>	Y / N	
Health Insurance Company:		
Policy or Group Number:	Phone number:	

Does your child have any allergies (include medications, foods, etc)?	Y / N
If Yes, please explain:	

Does your child have any medical or special needs, including medications currently being used?	Y / N
If Yes, please explain:	

Camper/ Youth Helper Name(s)

Medical Doctor's Name:	Phone number:
Dentist's Name:	Phone number:

Bethel Presbyterian Church may use photos and/ or video of camp events. Possible usage may include slide shows of the event, church newsletters, church websites or social media sites. The images will not include any names.

Parent/ Legal Guardian (print)

Parent/ Legal Guardian (sign)

Date

Camper/ Youth Helper Name(s)

SHIPWRECKED

VBS CAMPER INFO



ONLY

Registration Deadline: July 8th

Please Circle

<p>Are there any special requests we should consider in placing your child in a VBS crew? <i>Special requests might include placement with siblings, being in the same group as a friend, etc. Preference is to group campers by age/ grade level.</i></p>	<p>Y / N</p>
<p>If Yes, please explain:</p>	

There is no registration fee for VBS, however donations toward this event are greatly appreciated!

Total Amount Enclosed: \$ _____

SHIPWRECKED

VBS YOUTH HELPER INFO



ONLY

Registration Deadline: July 8th

Please Circle

<p>Will you be volunteering for the entire camp?</p>	<p>Y / N</p>
<p>If No, what days are you available?</p>	

Where would you prefer to volunteer? (Check **top 2** choices)

- Preschool
- Elementary Crews (*High School Helpers ONLY – Crew Grade preferred _____*)
- Recreation (*High School Helpers ONLY*)
- Music
- Missions
- Bible Discovery
- Imagination Station (*Science Exploration*)
- Decorating Team (*Decorating Days are: July 11th evening, July 12th morning*)

Youth Helpers are expected to attend the VBS training session on Tuesday, July 10th at 6:45pm

Cellphone, if different than parent's _____

Email, if different than parent's _____

Camper/ Youth Helper Name(s)

Cross Culture Camp CAMPER INFO



Registration Deadline: July 18th

There will be small group activities. Please name one other camper your youth would like to be with during those times:
Please list other Adults (if any) authorized to pick up your camper:
T-shirt Size (please circle one): <i>Youth:</i> Small Medium Large or <i>Adult:</i> Small Medium Large

Adult drivers may be needed for mission activities. If you are available to assist, please fill out the information below:

Name of parent volunteer

Please indicate the days and times you would be available to assist:

Monday, July 23rd from _____ to _____

Tuesday, July 24th from _____ to _____

Wednesday, July 25th from _____ to _____

Registration Fee for Cross Culture is **\$75** (includes lunch).

\$75 cash attached.

\$75 check made payable to Bethel Presbyterian Church attached (check # _____).