

Youth Summer Camp Registration Form

Please turn in with Payment

(Please print)

Name of Student _____ Date of birth _____ Gender M or F

Student Email _____ Student Cell (____) _____

Address _____ City _____ State ____ Zip _____

Grade (next fall) _____ T-Shirt Size (Men's sizing) XS S M L XL

I would like to room with (We will TRY to honor requests)

Parent Information:

Parent/Guardian Name _____ Phone (____) _____

Email _____

Alternate Contact: _____ Relationship to Student _____

Phone (____) _____

Medical Information

Comments (List allergies, physical problems, etc.) _____

Medication student is currently taking _____

Parent Permission Statement:

I understand all reasonable safety precautions will be taken at all times by Blue Sky/Vine Community Church and its agents during the events and activities. I understand the possibility of unforeseen hazards and know the inherent possibility of risk. I agree not to hold Blue Sky or Vine Community Church, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the subject of this form. I also give permission for my child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by Blue Sky/Vine Community Church.

Parent/guardian signature _____ Date _____

Student Code of conduct:

I understand that I am expected to cooperate with the staff and leaders of Blue Sky/Vine Community Church at all times and participate in all scheduled activities. Possession and/or use of alcoholic beverages/drugs/firearms is strictly prohibited. Failure to remain within these guidelines at any time is cause for my immediate return home at my parent's/guardian's expense. I agree to abide by the code of conduct.

Signature of student _____ Date _____