



**Kid's Day Camp Registration Packet
Completed K--2nd Grade
July 1st – 3rd (9:00am-3:30pm)**

\$90 Before 3/31/2019

\$100 After 3/31/2019

You can use this packet to register your child by completing all pages and returning to church office or Carey Wise, or you can register online at

www.coldspringsretreat.com

Packet includes:

Camp Registration Form

Camp Waiver Form

What to Bring to Camp List

MVBC Camp Scholarship Form

Cold Springs Retreat
Kids Day Camp Registration
(Completed Grades K-2nd)
July 1st ---July 3rd, 2019

Registration Form Deadline: March 31, 2019 for the \$35 Camp Fee Rate
Registrations after March 31, 2019 will be at the rate of \$45 (Last day to register June 16, 2019)
If you register after June 16, 2019 a \$25 late fee will be charged by Cold Springs Retreat

(Make Checks Payable to Mt. Vernon Baptist Church)
Please return fees to church office, no later than July 1st

T-Shirt Size: (please circle one)

Youth: XS (2/4) S (6/8) M (10/12) L (14/16)

Adult: S M L XL 2XL 3XL

Name (first, last): _____

Date of Birth: _____ Gender: _____ Male _____ Female

Last Grade (completed in school): _____

Church Attending With: _____

Are you a member of this church? Yes _____ No _____ Guest of: _____

Do you attend Church? Yes _____ No _____ If so where?: _____

Parent/Guardian Name (1)

Parent/Guardian Name (2)

Street Address/P.O. Box

City, State, Zip

Main Contact Phone

2nd Contact Phone

Emergency Contact (#1)

Phone

Emergency Contact (#2)

Phone

Authorized Pickup #1

Authorized Pickup #2

Authorized Pickup #3

Authorized Pickup #4

May we have permission to photograph your child? Yes _____ No _____

May we have permission to use your child's photograph in church publications?

Yes _____ No _____

Please list any allergies, including medications, food, etc.:

Please list any Medications currently taking and dosage:

Does your child have any medical or special needs? If yes, please explain

_____ Yes _____ No

Any special instructions or anything we need to know concerning your child?

Parent/Legal Guardian (sign)

Date

FOR OFFICE USE ONLY

Date Registration Form Received: _____ Amount Paid: _____

CHECK # _____ / CASH Signature of Office Personnel: _____

Waiver Form for Cold Springs Retreat Summer Camp

Childs name (please print)

Church attending with

I, _____(please print) as parent/guardian of the above-named child give consent that any necessary medical treatment deemed advisable by medical personnel at Cold Springs or a hospital be given in case of accident of illness. I understand that any expenses from medical care will be my responsibility and not that of Faulkner Baptist Association or any of its organizations. I further release any liability from FBA or any of its ministries, leaders or volunteers in the event of an accident in route, during or returning from Cold Springs. This agreement does not apply to claims of intentional misconduct or gross negligence.

Parent/Guardian signature

Date

Tylenol/Ibuprofen consent:

_____ I give my permission for the nurse to give above named child Tylenol or Ibuprofen, if needed.

_____ I DO NOT give my permission for the nurse to give above named child Tylenol or Ibuprofen.

Parent Signature

Date

Photo permission:

_____ YES. I grant permission to use photos of my child on Cold Springs Retreat website, bulletin boards, and /or newsletters.

_____ NO. Please do NOT take or use any photos of my child.

Parent/Guardian Signature

Date

Kids Day Camp

Cold Springs Retreat
478 Acklin Gap Road
Conway, AR 72032

What you need to know:

- ❖ Lunch will be served. A snack will be provided also!!!
- ❖ Campers need to come to camp with their swimsuits on underneath their clothing!!!
- ❖ One-piece swimsuits with cover-ups are to be worn to and from the pool. No blue jeans allowed in the pool.
- ❖ If you only have a two-piece swimsuit, you are required to wear a shirt in the pool.
- ❖ Boys and Girls must wear shirts to and from the pool!!!

What to bring to Camp

Sunblock
swim towel
bug spray
water bottle

Come prepared to have lots of FUN!!!

MVBC Camp Scholarship Form

With a lot of financial burdens these days, costs for families can add up quickly! The Children's Team at MVBC never wants a child to not attend camp because of cost. If you are in need of a scholarship, please fill out one form for each child needing a scholarship, then return it with their registration form. This will help us to better serve you and your child! All scholarship applications will be kept confidential. *No applicants will be turned down, but in order to receive a scholarship, you must complete and return this form to the church office.*

Deadline for all Scholarship Applicants is Wednesday, March 31st, 2019! Any scholarship form received after the deadline will be subject to a \$10 late fee! Thanks for your cooperation in this matter.

Children's Camp--\$90 (before 3/31/2019)

Child's Name: _____

Please choose one of the following scholarship options listed below:

Partial Scholarship: \$45 _____

(I understand that I am responsible for paying the remaining \$45 balance by the day my child leaves for camp.)

Full Scholarship: \$90 _____

Kids Day Camp--\$35 (before 3/31/2019)

Child's Name: _____

Please choose one of the following scholarship options listed below:

Partial Scholarship: \$18 _____

(I understand that I am responsible for paying the remaining \$17 balance, by the day my child leaves for camp.)

Full Scholarship: \$35 _____