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| **CHRIST THE REDEEMER**  **SUMMER CAMP 2023**  **July 10-14**  8:45am - 3:00pm  **(ONE registration form for EACH child)**  Place: Sacred Heart Church, Manville, NJ.  For Children: **Completed** Pre-K through **completed** 5th grade.  Fees: First child - $130; 2nd - $110; 3rd - $90; and all other siblings - $75.  **By April 1-$110; 2nd-$90; 3rd-$80; and all other siblings-$65**  Includes: Lunch, Snacks, Supplies, Trip, and Prizes.  Registration: Christ the Redeemer Office at 908-725-0072 or email Mary Ellen Day at ctrcamp@yahoo.com.  Please make checks payable to Christ the Redeemer Church.  **Registration closes on Friday June 9, 2023 \*\*\*NO EXCEPTIONS!!!!**  T-Shirts (circle one size): Youth Size: **Small** **Medium** **Large**  Adult Size: **Small** **Medium** **Large** | | | | | | | | | | | | | | | |
| **PERSONAL INFORMATION** | | | | | | | | | | |  | **MEDICAL INFORMATION** | | | |
| Name: | | |  | | | | | | | |  | Pediatrician: |  | | |
| Age: |  | | | | | | | |  | Male/Female |  | Pediatrician’s Phone: | | |  |
| Grade Completed: | | | | | | | |  | | |  | Health Insurance Company: | | | |
| Parent: | | | |  | | | | | | |  |  | | | |
| Address: | | | | |  | | | | | |  | Policy Number: | | | |
| City: | |  | | | | | | | | |  |  | | | |
| State/Zip: | | | | | |  | | | | |  | Known Allergies: | |  | |
| Phone: Day: | | | | | | |  | | | |  |  | | | |
| Night: | | | | | | |  | | | |  |  | | | |
| Cell: | | | | | | |  | | | |  |  | | | |
| E-Mail: | | | | | | |  | | | |  |  | | | |
| **EMERGENCY CONTACT** | | | | | | | | | | |  | Other medical concerns: | | | |
| Name: | | |  | | | | | | | |  |  | | | |
| Phone: | | |  | | | | | | | |  | Should emergency medical treatment be necessary, and I am unable to be contacted immediately, I authorize the staff member of the Christ the Redeemer Summer Camp to act on my behalf and approve appropriate treatment.  I specifically waive claim or claims that may be derived from any accident of injury sustained by my son/daughter enroute, during and returning from all events and agree to indemnify and save Christ the Redeemer Church and all adult supervisors working on this parish’s behalf. | | | |
| Does this person have your authority to give permission for medical treatment in case of an emergency? | | | | | | | | | | |  |
| YES NO (circle one)  I hereby request that my son/daughter participate in Summer Camp sponsored by the Christ the Redeemer in Manville, NJ. | | | | | | | | | | |  |
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| Parent/Guardian First and Last Name | | | | | | | | | | |  | Parent/Guardian Signature and Date | | | |

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