

# CHRIST THE REDEEMER SUMMER CAMP 2017

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** 5<sup>th</sup> grade.  
Fees: First child - \$120; 2<sup>nd</sup> - \$100; 3<sup>rd</sup> - \$85; and all other siblings - \$70.  
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 2, 2017 \*\*\*NO EXCEPTIONS!!!!**

T-Shirts (circle one size): Youth Size:      **Small**      **Medium**      **Large**  
Adult Size:      **Small**      **Medium**      **Large**

## PERSONAL INFORMATION

Name: \_\_\_\_\_  
Age: \_\_\_\_\_ Male/Female  
Grade Completed: \_\_\_\_\_  
Parent: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_  
Phone: Day: \_\_\_\_\_  
Night: \_\_\_\_\_  
Cell: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

## EMERGENCY CONTACT

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_

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.

## MEDICAL INFORMATION

Pediatrician: \_\_\_\_\_  
Pediatrician's Phone: \_\_\_\_\_  
Health Insurance Company: \_\_\_\_\_  
\_\_\_\_\_  
Policy Number: \_\_\_\_\_  
\_\_\_\_\_  
Known Allergies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other medical concerns:

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.

Parent/Guardian First and Last NAME

Parent/Guardian SIGNATURE and Date