

Soaring Over Seven Summer Camp 2015

Field Trip Information

Soaring Over Seven Summer Camp will offer a variety of field trip experiences. The following permission slip will apply to all field trips except the **Camp Swim Days** which requires a **separate** parent signature. The field trips may include but are not limited to: Miniature Golf, Volcano Island Water Park (or other area water parks), Frying Pan Park, and Bowl America.

Here are the details:

- The field trips will be two to four hours depending on the distance to the location and type of field trip.
- Some field trips will include a picnic so campers will bring their lunches and water bottles.
- Please apply sunscreen at home to the areas not covered by clothing such as hands, face and legs.
- The children will be traveling in Church or rental vans with staff and volunteers in assistance.
 - Drivers will be church staff members or camp staff members who have had proper DMV background checks.
- The campers will return to the church campus immediately after the field trip.
- The costs of the field trips are included in the camp tuition.

The *individual* consent/release form IS required for *each* child to attend his/her respective field trips.

Please return the attached release form to:
Erica Peters, Camp Director

Should you have further questions? Please contact Erica Peters at 703-770-8654 or via email at erica.peters@mcleanbible.org

PLEASE NOTE:

We will cancel the field trip in the event of inclement weather, time shortage, or if we do not have an adequate number of staff & volunteers. Your child's safety is always of the utmost importance to us.

Soaring Over Seven Summer Camp 2015

Parent Consent Form for Field Trips

My child, _____, has my permission to participate in the S.O.S. field trips July 6th through July 31st.

Insurance information:

Carrier Name: _____

Group Identification Number: _____

Primary Physician: _____ Phone#: _____

Allergic to medications: _____

Allergies: _____

List any current medications: _____

Bee Stings: _____ Epi Pen Provided: _____

Additional info: _____

Phone number where you can be reached on Field Trip days:

Cell: _____ Home: _____

Work: _____ Pager: _____

Medical Consent:

I authorize Soaring Over Seven Camp of McLean Bible Church to authorize emergency treatment in the event of an emergency when parents cannot be reached.

Signature

Date