

North Pointe Community Church

Preschool Day Camp for Children of Volunteers

Registration Information

Cave Quest Day Camp (July) Registration Deadline: June 22, 2016
Expedition Norway Day Camp (August) Registration Deadline: July 20, 2016

This year we are offering a half-day camp for children between the ages of 3-5 (who are potty trained). This camp will be offered for the **children of people volunteering during the week of day camp only**. Children will take part in the celebration session with the rest of the children in day camp then go to their own class where they will take part in Bible stories, crafts, snacks, and games!

Dates of Camp:

- July 4-8, 2016 'Cave Quest'
- August 2-5, 2016 'Norway'

Location:

North Pointe Community Church
14025 – 167 Ave
Edmonton, AB

Cost: Free!

For more information: Contact Pastor Charity Mongrain 780-452-5569 ext.226

What to bring each day:

- Please wear your day camp shirt and closed toe shoes everyday
- Sunscreen and hat

Daily Schedule:

- **Camp begins at 8:40 am**
- Large group celebration
- Activities including: Bible Lessons, Games, Crafts, and Snack
- **12:30pm finish for preschool day camp**

Volunteer Opportunities:

You must be a volunteer during the week of day camp to register your child in this camp. There are a variety of opportunities and time commitments available. More information about the various opportunities available can be found on our volunteer information sheet.

If you are interested in volunteering please fill out a volunteer application form.

Media Consent and Release

We are excited to take this adventure with your child and we look forward to getting to know you and your child better during our 2016 Day Camps! Photography and videography are a big part of what we do during Day Camp. Pictures are used, but not limited to, showing the children a presentation of pictures and videos from each day, a last day family video, and providing each child with a photo of their crew. With this in mind we would ask you to sign the media release that is part of the registration form, which helps keep us informed of any of our campers who may be especially vulnerable persons (i.e.: having court orders not to be photographed etc.).

Additional Purchases

If you are interested in purchasing your child a second t-shirt for the week of day camp, you can pre-purchase one for the cost of \$5. You can also pre-purchase CDs with all the music from Day Camp for \$10. Please check off the appropriate box on the registration form.

Please return form to North Pointe Community Church by mail, fax, or scan and e-mail.

**North Pointe Community Church
Attn: Charity Mongrain
14025 167 Avenue
Edmonton, Alberta T6V 1J5
Fax: 780-452-9727
E-mail: cmongrain@northpointechurch.ca**

2016 PRESCHOOL REGISTRATION AND MEDICAL CONSENT FORM

Please complete both sides and sign.

Registrations must be in by **June 22, 2016** for Cave Quest and **July 20, 2016** for Expedition Norway

Once your registration has been processed, you will receive a confirmation letter.

Name of Parent(s) volunteering: _____

Child's Name _____ BOY GIRL

Street Address _____

City _____ Postal Code _____ Home Phone _____

Date of Birth (M/D/Y) ____/____/____ Age _____

Home email _____

Home Church (if applicable) _____

Family Doctor _____ Dr.'s Phone # _____

AHCI # _____ Other Medical Insurance _____

Any Known Allergies: YES NO

If YES, please list: _____

Any behavioural conditions or special needs: YES NO

If YES, please describe and share any strategies you use to support your child:

Please share any other information about your child you think would be helpful:

Please check your child's t-shirt size:

- Child Small
- Child Medium
- Child Large

Which camp(s) will your child be attending?

- July 4-8, 2016 "Cave Quest"
- August 2-5, 2015 "Expedition Norway"

Please Complete Reverse and Sign.
Thank you! ☺

Would you like to make any additional purchases?

- Second T-shirt (\$5)
- Cave Quest CD (\$10 each)
- Expedition Norway CD (\$10 each)

If you are making any additional purchases please enter your payment information below:

Please make cheques payable to **North Pointe Community Church**

How will you be paying? (please circle) Cash Cheque Credit Card Debit

Credit Card Information

Name on Card: _____ Credit Card Number: _____

Expiry Date (MM/YY) _____ Security Code: _____ Authorized Amount: \$_____



Medical Consent

I/we, the parents or guardians named above, authorize, Charity Mongrain or another North Pointe Community Church Ministry Staff to sign consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above.

I/we, named above, undertake and agree to indemnify and hold blameless Charity Mongrain, the Ministry Staff, North Pointe Community Church, their Pastors and Board of Elders from and against any loss, damage or injury suffered by the participant as a result of being part of the activities of North Pointe Community Church, as well as of any medical treatment authorized by the supervising individuals representing this church.

This consent and authorization is effective only when participating in or traveling to events of North Pointe Community Church.

Media Consent

I/We hereby authorize North Pointe Community Church and its affiliates to take images and/or video footage of my child (any person under 18 years of age), in whole or in part for various purposes pertaining to Day Camp 2016. I wave any right to compensation, promotional material, and legal actions resulting from any said media materials collected.



I have read the above. I understand and agree with the above and sign this waiver to cover my child's participation in the activities included in Day Camp.

(Child's name) _____ has permission to attend and participate in all activities of Day Camp from July 4-8, 2016 or August 2-5, 2016 offered by North Pointe Community Church. If there are any activities in which my child cannot participate I will provide that information in writing to North Pointe Community Church.

Parent or Guardian's Signature _____ Date _____

Parent or Guardian's Name Printed _____