

## **CAMP EPWORTH**

**ELEMENTARY** 

Epworth United Methodist Church, Inc. 1030 BURRAGE RD. NE CONCORD, NC 28025 www.epworthnc.com 704.786.6183

## Complete the following form and return it with your \$25 registration fee to:

## Epworth United Methodist Church ATTN: Teresa Gray 1030 Burrage Road, NE Concord, NC 28025

Child's Name:				_ Birthday:			
First Name	La	Last Name					
Your child's grade during 2019/20 school y	vear: TK □	] K□	] st	$2^{nd}  \square$	3 <sup>rd</sup> □	4 <sup>th</sup> 🗌	5 <sup>th</sup> □
Address:							
Street	Cit	City		State			Zip
Phone #s:							
Home		Work		Cell			
Parents'/ Guardians' Name(s):							
Relationship to Child:							
E-Mail:							
Medical Concerns:							
I, the parent/guardian of					give my permission		
for my child to participate in the field trips tha	_						
Inc., during the Summer of 2020. I understand	d that all chil	dren will b	e transpoi	ted on a c	hurch vehi	cle with a	ın adult
driver who has been approved by the trustees	s.						
Pare	Parent Signature			Date			
✓ Please indicate the weeks you're reg	gistering for	·					
WEEK 1: JUNE 8-11		WEEK 8: JULY 27 - 30					
WEEK 2: JUNE 15 - 18		WEEK 9: AUGUST 3 - 6					
WEEK 3: JUNE 22 - 25							
WEEK 4: June 29 – JULY 2							
WEEK 5: JULY 6 - 9							
WEEK 6: JULY 13- 16							
WEEK 7: JULY 20 - 23							