



**Love Life Center, Inc.**  
**2026 Camp Love Life Enrollment Application**

**Camper Data** (to be completed for each camper):

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_

Camper prefers to be called \_\_\_\_\_

Address \_\_\_\_\_

T-Shirt Size: **YOUTH** XS  S  M  L  XL  **ADULT** S  M  L  XL  2XL

**Parent or Guardian Information:**

**Mother/Guardian Name** \_\_\_\_\_

Telephone #(s) Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_

Place of Employment \_\_\_\_\_ E-mail \_\_\_\_\_

**Father/Guardian Name** \_\_\_\_\_

Telephone #(s) Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_

Place of Employment \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Emergency Contact Person Other Than Parent(s)** \_\_\_\_\_

Telephone #(s) Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_

Place of Employment \_\_\_\_\_ Relation to Camper: \_\_\_\_\_

**Medical Information:**

Is your child covered by Health Insurance? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, Name of Provider \_\_\_\_\_ Policy/Group Number \_\_\_\_\_

List ALL allergies/handicaps/physical limitations \_\_\_\_\_

List ALL behavioral/emotional concerns \_\_\_\_\_

List any medication(s) your child is taking \_\_\_\_\_

Name of School \_\_\_\_\_ Grade Level Entering Fall 2026 \_\_\_\_\_

*Notice of Exemption: Camp Love Life operates as a Day Care Program during the summer break.  
 By signing below, I understand that it is not licensed by Bright from the Start as a child care learning center  
 and is not required by the State of Georgia.*

Parent/Guardian Signature	Date
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Enrollment Fee Received: \$ _____ Date: _____	Notes:
Check # _____ Cash Money Order CashApp	



## CAMP LOVE LIFE | 2026 CAMPER PICK-UP AUTHORIZATION

***This form must be completed before camper can be released to anyone other than parent/guardian listed on camper enrollment application.  
This is for the safety and protection of the camper and camp.***

***Please list the full name of each camper(s):***

\_\_\_\_\_

\_\_\_\_\_

***I authorize the following person(s) to pick-up my child(ren):***

(Camper must be released to an adult over 18 years of age)

*Name of Adult* \_\_\_\_\_

*Relationship to Camper:* \_\_\_\_\_

*Driver's License Number:* \_\_\_\_\_

*Name of Adult* \_\_\_\_\_

*Relationship to Camper:* \_\_\_\_\_

*Driver's License Number:* \_\_\_\_\_

*Name of Adult* \_\_\_\_\_

*Relationship to Camper:* \_\_\_\_\_

*Driver's License Number:* \_\_\_\_\_

*Name of Adult* \_\_\_\_\_

*Relationship to Camper:* \_\_\_\_\_

*Driver's License Number:* \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_

Date: \_\_\_\_\_

*Camp Love Life is a Summer Enrichment Program of Love Life Center, Inc.*





## CAMP LOVE LIFE | 2026 PERMISSION FORM AND LIABILITY RELEASE

*This permission form must be signed before campers can participate in field trips and activities.*

I, \_\_\_\_\_ (print name) I give permission for my child(ren),  
\_\_\_\_\_ (print full name of each child),  
to participate in Camp Love Life activities and to be transported to field trips and other camp related locations. I agree to hold harmless Love Life Center, Inc. and their respective staff, officers, agents, and volunteers from all liability for my child(ren) for injury or death while he/she is participating in Camp Love Life activities and field trips.

I understand that the costs of field trips and special activities are to be paid by me before the designated field trip date (unless otherwise indicated). I am aware that video or photographs of my child may be captured during classroom sessions, special events, field trips, or other camp related activities and they may only be used for camp usage only.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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## CAMP LOVE LIFE | 2026 DISCIPLINARY ACTION AND PENALTIES

It is important for campers and staff to understand **Respect**. At Camp Love Life, we practice: 1) Respect for adults, 2) Respect for other campers, and 3) Respect for self. Practicing this will help eliminate problems at camp and limit the need for disciplinary action.

All parents should ensure that their child understands that the staff at Camp Love Life will not tolerate disrespect, fighting or other disruptive behavior in any form. The following disciplinary actions/penalties will be taken:

<b>First Offense:</b>	Private talk with senior staff
<b>Second Offense:</b>	Time out from activity
<b>Third Offense:</b>	Parent notified/days off from camp
<b>Fourth Offense:</b>	Dismissal from camp

In the case of serious or illegal offenses (fighting, weapons, sexual assault, vandalism, theft, drug or alcohol use, etc.) camper may be dismissed immediately and appropriate legal action may be taken.

I have read the above outline for Camp Love Life discipline. I support the camp staff in their efforts to achieve an orderly camp atmosphere, and I will cooperate with them at all times.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Comments or directives concerning Disciplinary Action/Penalties:

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