

GLLM DAY CAMP REGISTRATION 2018
July 30th – August 2nd from 9am-3pm
Special kick off Sunday, July 29 @ 4pm at GLBC.

Name of Camper: _____

Date of Birth: ___/___/___ Gender: M or F Age: _____ Grade Completed: _____

Parent/Guardian(s): _____

Primary Address: _____

City, State, Zip: _____

Home Phone: (____) _____ - _____ Work Phone: (____) _____ - _____

Cell Phone: (____) _____ - _____

Green Lake Lutheran Ministries is open to all, regardless of race, color, sex, religion, national origin, age or handicap.

PARENT OR GUARDIAN MUST AGREE AND SIGN:

“I give permission for my child to attend the Green Lake Lutheran Ministries Day Camp program, taking part in the normal program activities. I also authorize the camp to secure a doctor to provide any necessary emergency medical care. I also give permission for the use of photographs, video, and electronic images including my child in camp promotion.”

Parent/Guardian’s Signature: _____

Please DO NOT allow your child to bring iPods, MP3 Players, cell phones, or handheld games to camp.

DAY CAMPER HEALTH FORM

An examination by a physician is NOT needed, but please complete the following form for GLLM to have on file during the day camp week. This form is required by Minnesota State Law.

Health History: (check all that apply and give approximate date)

Diabetes _____ Ear Infections _____ Convulsions/Seizures _____ Concussion _____

Asthma _____ Tetanus Booster _____ Other _____

Food allergies _____

Medications to be brought to camp _____

Family Doctor _____ Phone _____

TRANSPORTATION AND AFTERCARE

Faith Lutheran Church is offering the option to be transported by bus from the church to the camp. The church will also be providing after care until 5 p.m. after our day camp program at Green Lake Bible Camp.

Below are different transportation options and aftercare. Please check which one your child will be doing during the week of July 30th – August 2nd.

Children will be Check-In and Check-Out each day during Day Camp to be sure the child is going home with the correct person. If you have any comments or concerns regarding this please list them below in the comment section.

TRANSPORTATION / AFTERCARE

___ I will drive my child to Green Lake Bible Camp at 9 a.m. and check him/her in at the “Check-In” Table, which is outside the chapel. Then at 3 p.m. I will pick my child up from the camp at the “Check-Out” Table, which is outside the chapel.

___ I will drive my child to Faith Lutheran Church at 8:40 a.m. and check him/her in with a Faith Staff Member. My child will then get on the Faith bus and ride from the church to the camp. Then at 3 p.m. my child will get on the Faith bus and ride back to the church.

___ I will pick my child up from the church at 3:15 p.m.

___ My child will stay at Faith Lutheran Church until _____ (no later than 5pm) for the Aftercare program and then I will pick my child up. Before leaving I will meet with a Faith Staff Member to sign my child out for the day.

COMMENTS/ CONCERNS: _____

