

JUNIOR COUNSELOR REGISTRATION FORM

(Please fill out a separate form for each Junior Counselor)

ALL FORMS MUST BE COMPLETED & RETURNED WITH REGISTRATION FEE BY MAY 17th, 2020

Return to All Saints' Church, 106 West Church St., Frederick, MD 21701, Attn: Rev. Jessica/CAMP.

T-Shirt Size: (circle one) **Youth:** S M L **Adult:** S M L XL

General Information:

Jr. Counselor's Name: _____ Birthday: ___/___/___ Age: ___ Current Grade: ___
(You must at least be entering 7th grade as of 7/31 to be a Junior Counselor.)

Address: _____

Parent(s) Name(s): _____ Email: _____

Home Phone: _____ Cell Phone: _____ Preferred # during Camp: _____

Health, Insurance & Emergency Information:

List any allergies, medical conditions, medications, emotional or social factors that camp staff needs to be aware of:

Physician's Name & Phone #: _____

Insurance Co. & Policy #: _____

In the event of an emergency every attempt will be made to contact the parent/guardian. If a parent/guardian cannot be reached, the following person should be contacted and is authorized to act on parent's/guardian's behalf:

Name: _____ Phone #: _____

Relationship to child: _____

My child, _____, has my permission to attend the All Saints' Day Camp, and I give my permission for my child to receive any necessary medical treatment in the event of a medical emergency.

Parent/guardian signature _____ Date: _____

_____ ***Yes, I would like to help with camp!***

Circle one: 1. Set-up 2. Clean-up 3. Volunteer during camp 4. Camp Sunday (6/28)

Financial Information: Cost for the week is \$85 per camper, \$75 for each additional child, and \$65 for Jr. Counselors, with a \$200 family cap. Please mail all registration forms for camp in one envelope with **one check payable to All Saints' for all campers in your family.** A limited number of scholarships are available. For scholarship information, please contact Rev. Jessica Holthus at jholthus@allsaintsmd.org, 301-663-5625. All scholarship requests are confidential.

MEDIA EXPOSURE:

In the course of Camp activities, All Saints' staff and volunteers and/or the news media occasionally wish to interview, photograph or videotape campers/counselors, and/or make public their names, work or likeness in print, on television, radio or by electronic means such as the Internet. This includes but is not limited to the *Saints' Alive* publication, All Saints' website, and the slide show on Camp Sunday. Please indicate below your preference to have your child published in the media. (All Saints' cannot control media coverage of events that are open to the public.)

_____ I **DO** give permission to publicize. _____ I **do NOT** give permission to publicize.

Parent Signature: _____ Date: _____

Office Use Only:

Family Name: _____ Names and ages of other campers in family: _____

Date received: _____ Voucher/Scholarship amount: _____ Balance Paid & CK #: _____