



F.R.O.G.: Fully Rely On God



St. Paul Lutheran Church, Colon / En Gedi Campground River Resort Vacation Bible Day Camp Registration Form

Dates: July 12-14 (Monday – Wednesday)

Time: Preschool age 3 – 5, 10AM – 12 PM with lunch option (Staying until 12:30 for lunch?) Yes No

Children entering kindergarten – 5th Grade 10AM – 2PM, lunch provided

Location: En Gedi Campground River Resort / 30321 Covey Rd. Leonidas, MI 49066

For directions, visit engediresort.com or call 432-4374

What to Bring: Please bring photo ID of person(s) allowed to pick child(ren) up, water resistant sunscreen and insect repellent, extra clothing or swimsuit that can get wet (if bringing a two piece bathing suit, please bring a t-shirt that can be worn over top), towel

Contact Information: All questions regarding Vacation Bible Camp may be directed to En Gedi Campground at 432-4374 or grimmcp@truevine.net.

(Please Print)

Custodial Parent(s) or Guardian(s) _____

Child(rens) name(s)

1) _____ Grade this fall: _____

2) _____ Grade this fall: _____

3) _____ Grade this fall: _____

4) _____ Grade this fall: _____

Address: _____

City / Zip _____

Phone Numbers: Home: _____ Work: _____ Cell: _____

Church Home? _____

Who should be notified in case of emergency if a parent or guardian cannot be reached?

Name and Phone # _____

To whom may the child(ren) be released when the program is over? (Please list all possibilities, and provide a photocopy of picture ID, or bring picture ID to registration)

Name: _____ Phone _____

Name: _____ Phone _____

Name: _____ Phone _____

Is there anyone to whom the child(ren) MUST NOT be released? _____

Photo Release

I, (parent or guardian signature) _____, give permission to have picture(s) of my child(ren) taken during Vacation Bible Camp placed on the church or camp website, flyers, brochures or other publication or presentations. I understand these pictures will not be used for any other purpose without my permission.

Release Waiver

By enrolling my child(ren) in this day camp, I agree to hold St. Paul Lutheran church and En Gedi Campground River Resort, Its members, employees and / or agents free and harmless from any personal loss or injury suffered by my child(ren) during the event or otherwise.

Signature: _____ Date: _____

(Over Please, more on back)

F.R.O.G. Fully Rely On God
Health Form

(Please Print)

Health Insurance Company _____

Policy # _____

Family Physician / Clinic _____

Physician's Phone Number: _____

Please list any allergies or special needs for *each* child.

Is there anything else we should know about your child(ren)?

Can your child(ren) swim? _____

Do you give permission for your child(ren) to swim or wade (supervised, weather permitting) in the St. Joseph River? Yes No

In signing this health form, I hereby certify that the above information is correct and give permission for my child to be transported in privately owned vehicles for medical and other emergency purposes only and for the release of medical records to an attending physician in case of illness.

In case of medical emergency, I understand that every effort will be made to contact the parent(s) or guardian. In the event that I cannot be reached, I hereby give permission to the physician selected to secure proper treatment for my child(ren) named herein.

Signature of parent or guardian _____ Date _____

When completed, please mail registration form to:

En Gedi Campground, 30321 Covey Rd. Leonidas, MI. 49066

OR call 432-4374 to reserve your place at Vacation Bible Camp, and bring the form to registration.