

The Wave Daycamp 2010



Catch The Wave!

Camper Name: _____ Date: _____

2010 Camper Application

Return to: First Baptist Church • Attention: Daycamp • 106 Bluegrass Commons Blvd
Hendersonville, TN 37075
Phone: (615) 447-1397 • Fax: (615) 824-7364

Our Mission

The mission of The Wave Daycamp is to give every camper an experience of the love of Christ by providing spiritual leadership, genuine discipleship, Christian fellowship and spiritual worship.

REGISTRATION STEPS:

- COMPLETE** registration form.
- COMPLETE** medical release form and have it notarized.
- COMPLETE** VBS registration form (applies only if your child is registered for Week 2 of The Wave).
- REQUEST** a confirmation from your child's school that they have completed or will be completing Kindergarten as of May 2010 (applies only to current Kindergartners).
- SIGN** policy agreement form (located on the last page of the Parent Handbook) and attach to application.
- SUBMIT** previous materials along with one registration fee per family (\$50 by April 16, 2010, \$65 after April 16, 2010) and weekly deposits (\$20 for each week/each child registered, which is applied to weekly balance). Make checks payable to FBCH.

Camper's Information

Camper's Full Name (Legal): _____

First Name (Goes By): _____ Sex: ___ Date of Birth: _____ Age: _____

Grade (09/10 School Year): _____ School Attending (09/10): _____

T-shirt Size: YS YM YL AS AM AL

First Baptist Church Member? yes no

If not, is your family affiliated with another church? If yes, where?

Home Address: _____

City/State/Zip: _____

Are both parents living? yes no

Camper is living with: Mother Father Both Parents

Father's/Legal Guardian's Information

Father's/Legal Guardian's Name: _____

Home Address: _____

City/State/Zip: _____

Cell #: _____ Work #: _____ Home #: _____

Email Address (we communicate heavily via email): _____

Place of Business: _____ Occupation: _____

First Baptist Church Member? yes no

If not, is your family affiliated with another church? If yes, where?

Mother's/Legal Guardian's Information

Mother's/Legal Guardian's Name: _____

Home Address: _____

City/State/Zip: _____

Cell #: _____ Work #: _____ Home #: _____

Email Address (we communicate heavily via email): _____

Place of Business: _____ Occupation: _____

First Baptist Church Member? yes no

If not, is your family affiliated with another church? If yes, where?

Emergency Information

Emergency Contact (apart from parent/guardian) : _____

Relationship to Camper: _____ Cell #: _____ Work #: _____ Home #: _____

Does camper have any physical limitations? Please describe:

Does camper have any dietary restrictions? Please describe:

Does camper have any other medical issues? Please describe:

Has camper been diagnosed with ADD, ADHD, Depression or any other psychological disorder? Please describe:

Are there any other issues or circumstances that may affect camper's mood or behavior while at The Wave? Please describe:

Weeks Requesting

*Do not register your child for VBS through the Children's Ministry if they are registered for Daycamp that week. The Wave will take care of their VBS registration.

Please only register for weeks that you are certain your child can attend. Weeks may be added throughout the summer with **at least one full week's notice.** Refer to handbook for cancellation and transfer policies.

- | | | |
|---------------------------------|----------------|---|
| <input type="checkbox"/> Week 1 | June 1- 4 | Under the Big Top |
| <input type="checkbox"/> Week 2 | June 7-11 | Vacation Bible School/Silly Sports Week |
| <input type="checkbox"/> Week 3 | June 14-18 | The Two Trails: A Treasure Tree Adventure |
| <input type="checkbox"/> Week 4 | June 21-25 | Lights...Camera..Action! |
| <input type="checkbox"/> Week 5 | June 28-July 2 | Up, Up & Away!!! |
| <input type="checkbox"/> Week 6 | July 6-9 | Underwater Extravaganza
<i>(closed Monday, July 5)</i> |
| <input type="checkbox"/> Week 7 | July 12-16 | Bon Appetit |
| <input type="checkbox"/> Week 8 | July 19-23 | SURPRISE!!! |
| <input type="checkbox"/> Week 9 | July 26-30 | DAYCAMP GOES GLOBAL! |

I certify that all of the information provided on this registration form is true. I agree to abide by all Wave policies and have signed the Policy Agreement Form. I give The Wave permission to care for my child and I give permission for my child to participate in all Wave activities and attend all Wave field trips.

Signature: _____

Date: _____

Please submit this registration form along with:

- Notarized Medical Release Form
- Signed Policy Agreement Form (last page of Parent Handbook)
- Kindergarten Confirmation (if applicable)
- VBS Registration Form (if applicable)
- Registration Fee
- Weekly Deposits

Office Use Only:

Registration Paid: cash or check # _____

Registration Amount: \$50 (by 4/16) or \$65 (after 4/16)

Deposits Paid at Registration: cash or check # _____

Deposit Amount: _____ # of Weeks Reg: _____

Total Paid at Reg: _____ Amount Owed for Reg: _____

Pymt-Date ____ Amt ____ cash/check # _____ Amt Owed: ____

Pymt-Date ____ Amt ____ cash/check # _____ Amt Owed: ____

Pymt-Date ____ Amt ____ cash/check # _____ Amt Owed: ____

Received: Notarized Med Form ____ Signed Policy Agreement ____

ACS ____ Excel ____ E-mail ____ Folder ____ Car Tag ____ KG Conf ____

Security # _____ Group _____ VBS Form ____

Confirmation Sent ____ **Date** _____ **Initials** _____