

CAMP ST. CATHERINE 2018



**Vacation Bible Camp for children entering Kindergarten through 6th grade-
September 2018 (and 3 & 4 year olds whose parents are working at camp)
*Activities include daily Mass, Arts & Crafts, Games, Bible Stories & a visit from
Quakertown Fire Company!***

DATE: Monday, July 9 – Friday, July 13

TIME: 9:00 a.m. to 12:30 p.m.

PLACE: St. Catherine of Siena Parish Center

FEE: \$30.00 per child - \$75 max per family

Attention: This form must be completely filled out or it will be returned to you and your child will not be registered until the completed form is resubmitted. Thank you for understanding.

Child's Name: _____ M F
Last First Please Circle

Age: _____ Grade entering September 2018: _____

Father's Name: _____ Mother's Name: _____

Mailing Address: _____

Telephone No.: _____

Email Address: _____

Father's Work #: _____ Mother's Work #: _____

Father's Cell Phone #: _____ Mother's Cell Phone #: _____

St. Catherine's Parishioner: YES NO (Home Parish: _____)

Please complete & return registration by: June 15, 2018

(a \$15 late fee will be added to any application submitted after the due date)

Please continue registration on back of page!!

Emergency Contacts:

(Please provide 2 people that will be **IMMEDIATELY AVAILABLE** during camp hours in case of emergency)

Name: _____ Telephone: _____

Name: _____ Telephone: _____

Should emergency medical treatment be necessary and I am unable to be contacted immediately, I authorize the delegated agents of St. Catherine of Siena to act on my behalf and approve appropriate treatment.

Insurance Company _____ Policy Number _____

I specifically waive claim or claims that may be derived from any accident or injury sustained by my child. I further agree to indemnify and save harmless St. Catherine of Siena, the Catholic Diocese of Metuchen, their staff, all volunteers, and all adult supervisors working on their behalf.

Signature _____ Date _____

Does your child have any special medical needs, dietary needs, or allergies? YES NO

Please list your child's allergy or medical condition and explain the symptoms as well as what should be done if need should arise:

For the safety of all of the children, campers are not allowed to carry any medication on them during camp time. If an inhaler or epi-pen is needed, please contact Judy directly for instructions.

NOTE: Parish representatives are NOT permitted to administer medication.

All of the above information is accurate and I understand that I must provide the necessary medication for my child and that the parish representatives are NOT permitted to administer medication.

I give permission for my child to be photographed and/videotaped for sole use by St. Catherine of Siena Parish and allow use of my child's photograph on the Parish website. I understand names will not be used with pictures. _____ Yes _____ No

Parent/guardian signature _____ Date _____

*This form must be filled out **COMPLETELY***

Please complete & return registration by: June 15, 2018

(a \$15 late fee will be added to any application submitted after the due date)