ARTFUL ADVENTURES SUMMER CAMP

with Miss Melissa

Cost: $185

Ages 3 & Up

May 27 - 30, 2025
9AM - 1PM

mt bethel church

ART SUMMER CAMP REGISTRATION FORM

CAMP DATES: MAY 27 - 30, 2025 (PLEASE PRINT)

DATE: _____

VENMO @MELISSA-FORD-44
MELISSAGFORD@GMAIL.COM

CHILD'S NAME: _____
NICKNAME: _____
CHILD'S AGE: ____ SEX: ____ DOB: _____
PARENT'S NAME: _____
PHONE: _____ EMAIL: _____
ADDRESS: _____
CITY: _____ STATE: ____ ZIP: ____

PEOPLE AUTHORIZED TO PICK UP MY CHILD:
NAME: _____ PHONE: _____
PHYSICIAN: _____ PHONE: _____
KNOWN ALLERGIES: _____
MEDICAL CONDITIONS: _____
MEDICATIONS: _____

(A SIGNED MEDICINE AUTHORIZATION MUST BE ON FILE AT THE PRESCHOOL OFFICE)

I UNDERSTAND THAT I WILL NOT HOLD MT. BETHEL PRESCHOOL NOR BECKY NEWMARK LIABLE IN ANY CASE OF ACCIDENT OR INJURY TO MY CHILD WHILE PARTICIPATING IN THIS PROGRAM. IF MY CHILD, _____, SHOULD BECOME ILL OR INJURED DURING THIS PROGRAN, I UNDERSTAND THAT THE INSTRUCTORS WILL (1) CONTACT ME IMMEDIATELY, OR (2) CONTACT THE PERSONS I HAVE DESIGNATED IF I CANNOT BE REACHED. SHOULD I OR THE PERSON DESIGNATED BE UNABLE TO BE REACHED, THE INSTRUCTORS ARE AUTHORIZED TO CONTACT MY CHILD'S PHYSICIAN OR ARRANCE FOR IMMEDIATE EMERGENCY TREATMENT TO ENSURE THE HEALTH AND SAFETY OF MY CHILD. PARENTS WILL ASSME RESONSIBILITY FOR PAYMENT.

SIGNATURE OR PARENT/GUARDIAN: _____

PHOTO RELEASE: MT. BETHEL CHRISTIAN PRESCHOOL AND TWO'S CAMP REQUEST YOUR PERMISSION TO PHOTOGRAPH OR VIDEO YOUR CHILD DURING VARIOUS ACTIVITIES. PHOTOS AND/OR VIDEOS WILL BE USED FOR POSSIBLE PROMOTIONAL MATERIALS FOR MT. BETHEL CHRISTIAN PRESCHOOL, TWOS CAMP AND THE CHURCH WEBSITEL PLEASE SIGN TO GRANT THE PRESCHOOL AND TWOS CAMP PERMISSION TO PHOTOGRAPH AND/OR VIDEO YOUR CHILD.

PARENT'S SIGNATURE: _____ **DATE:** _____