Tr	inity C		In School	
Please comp	รเ	TRATION FO	DRM EXAMPLE 1 TCS for the total amount.	
student's Name			T-shirt Size: YS YM YL S M L XI	L
Phone Number:		Age:	Grade this Fall:	
List any physica	l condition/allergies or con	cerns of which camp st	aff should be aware:	
Emergency Con	tact Information			
Emergency Con	tact Name			
Relationship		Phone Numb	er	_
	n fee is an additional \$10 p	-	-	
🗌 June 2-5	Ease Into Summer (\$60.00 Deposit due May 15.	9:00am-3:00pm Remaining balance due th		
Une 9-12	Camp Slither (\$60.00 Deposit due May 15.	9:00am-3:00pm Remaining balance due th	Cost: \$160.00 e 1 st day of camp)	
🗌 June 16-19	Camp Artsy Craftsy (\$60.00 Deposit due June 2.	9:00am-3:00pm	Cost: \$160.00	
🗌 June 23-26	Passport to Paradise (\$60.00 Deposit due June 16	9:00am-3:00pm 6 . Remaining balance due	Cost: \$160.00 the 1 st day of camp)	
🗌 July 7-10	Camp Earth, Moon & Mars (\$60.00 Deposit due June 26		Cost: \$160.00 the 1 st day of camp)	
Uly 14-17	Celebrate Summer (\$60.00 Deposit due June 26	9:00am-3:00pm • . Remaining balance due 1	Cost: \$160.00 he 1 st day of camp)	
🗌 July 21-24	Camp Fun & Games (\$60.00 Deposit due July 10.	9:00am-3:00pm . Remaining balance due th	Cost: \$160.00 ne 1 st day of camp)	
Payment Inform	nation			
Payment Metho	d: CHECK CASH			
Total Amount Pa	aid:		Check #:	
				Ð

Consent

I give my permission for ______ to participate in Trinity Christian School Summer Kids Club Camps and do hereby release Trinity Christian School, its administration, its staff, and any camp staff from any and all liability arising out of such participation in this event. The above-named student is fit, both physically and otherwise, to participate in all the activities of the camp, except as stated on this form.