

Trinity Baptist Church Summer Kid's Club



Child's Name: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Phone: _____ Email: _____

Check which applies as of July 18, 2010: Preschool Age 3 ___ Preschool Age 4 ___
Completed Kind. ___ Gr. 1 ___ Gr. 2 ___ Gr. 3 ___ Gr. 4 ___ Gr. 5 ___ Gr. 6 ___

HEALTH INFORMATION

Alberta Health Number: _____

Allergies: _____

Emergency Contact #1:

Name: _____ Phone: _____

Relation to Child: _____

Emergency Contact #2:

Name: _____ Phone: _____

Relation to Child: _____

PARENT INFORMATION & PERMISSION

Name(s) of Parent(s)/Guardian(s) with whom child lives:

Daytime Phone: _____



I give permission for my child to participate in the Summer Kid's Club (July 19-22, 2010 9am-12noon) at Trinity Baptist Church 9920 Fairmount Drive SE Calgary, AB T2J 0S4. I understand that this program is run by Trinity Baptist Church of Calgary, AB, and that the program is conducted by the church and its volunteers and staff. I am aware that my child is participating voluntarily and is doing so at his/her own risk and Trinity Baptist Church is not liable for any loss, damage, injury, or ambulance service resulting from or in connection with such participation. By signing this form below and submitting to Trinity Baptist Church, I accept the terms and conditions stated herein.

Signature of Parent/Guardian: _____

- May we have permission to photograph your child? Yes No
- May we have permission to use your child's photograph in church publications for the purpose of promotion? Yes No
- Who may pick up your child at the end of the day? _____

PAYMENT

Cost is \$15 per child for the week. **Family rates and scholarships available** (271-0346)

Please make cheques payable to Trinity Baptist Church, and mail to:

Trinity Baptist Church, 9920 Fairmount Drive SE, Calgary AB T2J 0S4