



# Application



Peace, Grace, And Blessings on behalf of H.G. Bishop Youssef and our church Fathers, the Priests.

## 10<sup>th</sup> Annual Kid's Camp – December 26-29, 2011

(Early Registration Deadline is December 11<sup>th</sup>, 2011 - Fee is \$100)

**FEE FOR APPLICATIONS PRESENTED AFTER December 11<sup>th</sup> : \$130.00**

Camp space is limited; therefore registration is on a first come first serve basis. Late Registration ends on December 18th.

### PERSONAL INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Date of Birth:     /     /

T-Shirt Size (circle one)

Adult

S   M   L   XL

Grade Level:     3   4   5   6   7   8

Age: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Roommate preference Name 1: \_\_\_\_\_

E-mail (if applicable): \_\_\_\_\_

Roommate preference Name 2: \_\_\_\_\_

### EMERGENCY CONTACT

Contact Name: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

Other Info: \_\_\_\_\_

### CHURCH INFORMATION

Church Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy #: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Doctor's Number: \_\_\_\_\_

Priest's Name: \_\_\_\_\_

Priest's Signature: \_\_\_\_\_

**Please read and sign**

*I understand that my son or daughter will attend the Church's 10<sup>th</sup> annual Kids' Winter Retreat. I realize that the clergy and servants involved will exercise every precaution for my child's safety. I agree to assume full responsibility for any unforeseen accident, which might occur during participation. I further insure that my son or daughter has been instructed to comply with the clergy, servants, and camp regulations.*

Parents' Name (please print): \_\_\_\_\_

Parents' Signature: \_\_\_\_\_