

2021 Registration Form

Re:Create Arts & Recreation Camp June 7-11, 2021

Winchester Cumberland Presbyterian Church PO Box 176, 200 2nd Avenue NW Winchester, Tennessee 37398 931.967.2121

E-mail: revamber1981@gmail.com
For rising 1st - 5th graders, 75 children limit
Registration Fee: \$50 due by May 2nd to guarantee t-shirt

Participant's Name		Preferred Name	
Gender: <u>M or F</u>	Participant's Birthdate	Age	2
Grade (for the 20	21-2022 school year)	T-Sł	nirt Size <u>Circle: Y or A, s m l xl</u>
* To guarantee	e your child receives a t-shir	t in their size, pre-	register by SUNDAY, MAY 2nd
Parent and/or Gu	ardian		
Address			
City		State _	Zip Code
Home Phone		Work Phone _	
Mobile Phone		Mobile Phone	e
E-mail Address _			
	EMERGENCY CO	ONTACT INFORMA	ATION
Primary Contact's	s Name		Relation to Camper
Address			
			Zip Code
Phone Number(s))		
Secondary Conta	ct's Name		Relation to Camper
Address			
City		State _	Zip Code
Phone Number(s)			

***** IMPORTANT ***** Your child will only be released to you (Parent or Legal Guardian), or someone you have authorized to pick up your child.

Winchester Cumberland Presbyterian Church Re:Create Arts & Recreation Camp

Medical & Liability Release Form

On behalf of our childyears of age) who will be a participant in the 2021 Re:Cre	(who is under 21
years of age) who will be a participant in the 2021 Re:Cre Camp , I (we) hereby release, forever discharge and agree to individuals involved in the 2021 Re:Create Arts & Recreat	o hold harmless
Winchester Cumberland Presbyterian Church, the Pastora Trustees, Membership and Adult Leaders from any and all demands for personal injury, sickness or death, as well as expenses, of any nature whatsoever which may be incurred the child-participant that occur while said child is participal. Re:Create Arts & Recreation Camp at the Winchester Curchurch and Winchester Recreation Facilities in Winchester.	Il Staff, the Session, the liability, claims or property damage and d by the undersigned and ating in the 2021 nberland Presbyterian
Furthermore, I (we) on behalf of my (our) child-partirisk of personal injury, sickness, death, damage and expensarticipation in the recreation and travel involved therein. permission to the Winchester Cumberland Presbyterian Chadult Leaders to furnish any necessary transportation, food participant. Portions of the 2021 Re:Create Arts & Recreat away from the church campus at many different locations. for the participant to return home due to medical reasons, otherwise, I (we) hereby assume all transportation costs.	se as a result of I (we) authorize and give nurch Pastoral Staff and I and materials for this ion Camp will take place Should it be necessary
It is the understanding of this group member and the this child participant that if a medical emergency should a care to be given immediately, the group member or child properties guardians authorize that such medical treatment shall be go to such treatment at a hospital or other health care facility, leadership, if necessary. I (we) consent to any examination medical treatment, and hospital care which is deemed advantaged by such an emergency.	rise requiring medical participant's parents/given and consent is given or initially by group as, x-rays, anesthetic, visable by a qualified
Child Participant's Name	
Parent's (Legal Guardian) Signature	Date

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Medical & Liability Release Form

Medical Insurance Company:
Insurance Policy Number, Group Number and Phone Number:
Family Doctor Information and Phone Number:
Known Medical Conditions and Medicines Being Taken:
All known allergies and allergic reactions:
Date of last tetanus immunization:
Other information regarding my child's health that a doctor should know: