

## Day Camp Registration/Medical Release Form

Please complete one form per child. You may write one check, made out to "Smithfield Baptist Church", for the total registration fees for as many children as you enroll. Please bring the registration forms and check on the first day of the Day Camp. Please refer to the transportation and camp information located on this web site, flyers, or newspaper ads.

Check week desired: \_\_\_ July 10-July 14 Smithfield

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Best time to call on info: \_\_\_\_\_

Parent Name \_\_\_\_\_

Child's Year of Birth: \_\_\_\_\_ Grade in School Last Year: \_\_\_\_\_

Will transportation be needed? \_\_\_ Yes \_\_\_ No

Pick-up Point: \_\_\_\_\_

Please read the following and sign if you agree:

The undersigned does hereby give permission for our (my) child to participate. We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any medical treatment or hospital care to be rendered to the minor under the general or special supervision and on the advice of any physician licensed under the provisions of the laws of Virginia, whether such diagnosis or treatment is rendered at the office or at said hospital. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical services rendered to the aforementioned child under this authorization. In addition, the undersigned does also hereby give permission for our (my) child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending day camp.

Child's/Family Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ We do not have insurance

Signed (parent or guardian): \_\_\_\_\_ Date: \_\_\_\_\_

Please let us know, *in writing*, of any allergies or special medical conditions or needs your child might have, when he or she arrives at day camp.

Ages: Kids entering Kindergarten through those who just completed 6<sup>th</sup> grade. (basically—5-12)

Dress for camp: Boys—T-shirts with bathing suit and tennis shoes. Girls—bathing suit with t-shirt and shorts over and tennis shoes. Bring a towel. (We have no area for everyone to change clothes)

Food: Snacks & Drink is provided. Bring a sack lunch daily.

# Day Camp/VBS 2.0.17— Our 29<sup>th</sup> Year!



**July 10-July 14 at Smithfield Baptist  
Church**

**100 Wainwright Drive, Smithfield, Va.—  
757-357-2536**

**July 17-21 at Carrollton Baptist  
Church**

**14007 Carrollton Blvd, Carrollton, Va.—  
757-238-2399**

**8:30-2:00pm Daily @ Smithfield Baptist (Swimming Included!)**

**8:30-12:30 Daily At Carrollton**

**Stories—Games—Crafts—Music—Speakers—Snacks**

**Space is limited! Please pre-register! For more information and  
to register online go to: [www.smithfieldbaptist.org](http://www.smithfieldbaptist.org) or  
[www.carrolltonbaptistchurch.org](http://www.carrolltonbaptistchurch.org).**

*The form on the back can be brought the first day of camp.*

**Bus Pickup Each Morning Jersey Park-Woods Edge**

**\*From Farmers Bank too, during the July 17-21 week**

**A donation is requested of \$10 per child per Carrollton Week & \$20 per Smithfield week but no one  
is turned away for lack of funds!**