Kid's Club 2017/2018 REGISTRATION FORM

A fun, safe place where children deepen their relationships with God and Friends. We will learn through worship, prayer, crafts, bible stories, games and activities. Kids well be active in seeking God's love, and learn the blessing of being a friend of Jesus. Discovering along the way how they can be game changers in their homes, community and world.

Cost Early bird rate \$35 per child/Session after start of session \$40 per child/session

Online registration and credit card payment available at: www.willowparkchurch.com

REGISTRATION INFORMATION	
Applicant's Name	MEDICAL INFORMATION
Session 1 : Sept.12-Nov. 28,2017 Y/N Paid	Applicant's Name:
Session 2: Jan. 9 -Mar.13,2018 Y/N Paid	Date of Birth:
Grade Entering Sept/17	Care Card #:
Parents/Guardian's Name;	Allergies/Medications/Limitations
Address: City: Province:Postal Code:	Emergency Contact:
	For office use only
Phone #:Cell#	Payment Information.
Email:	Paid \$ Date
Email:	Paid \$ Cash Chq# Debit
 I understand that participation in Kids Camp activities involves a chave given consent for my Child/Ward to participate in Club activities and the BCMB Conference; and all related directors, off Club activities from any and all claims for damages arising from Club activities. I understand that my Child/Ward may experience illness or accid give the Club personnel the authority to act on my behalf in case my prior approval (Parent/Guardian will be notified as soon as Where the club program involves leaving the Willow Park Church The Parents/Guardians submitting this application are those having applicable, will be fully communicated, in writing, to the Club pring to the visitation rights. 	Cash Chq# Debit CONDITIONS Certain degree of risk. I have carefully considered the risk involved and tivities. I understand that participation in Club activities is entirely vold standards of conduct. I hereby release and indemnify Willow Park ficers, employees, volunteers, and other organizations associated with any accident or injury caused by my Child's/Ward's participation in the lent that may require immediate medical or surgical attention. I hereby se of emergency, including medical treatment, without the necessity of possible). I understand that I am financially responsible. premises, I give my Child/Ward permission to participate.