



willowparkchurch

## WHAT WE WILL DO

- MYRA CANYON ADVENTURE
- COLOUR POWDER TAG
- WATER CARNIVAL
- AND SO MUCH MORE!



@THRIVE.ALIVE

#THRIVECAMP2017

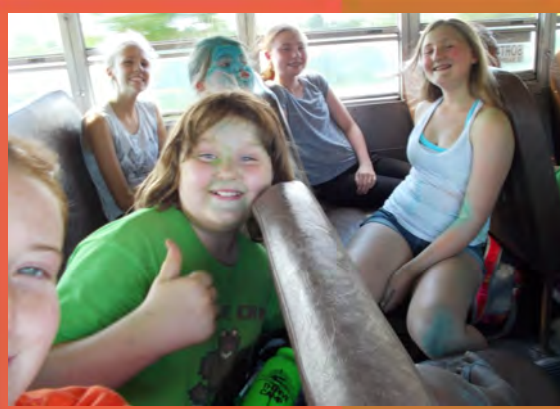
# WELCOME TO THRIVE CAMP 2017

AN EXCITING, ENERGETIC, EXHILARATING TIME DEDICATED FOR PRETEENS TO ENJOY FUN TIMES WITH BUDDIES! AT THRIVE CAMP, YOU WILL MEET NEW FRIENDS AND RAD LEADERS, WHILE SHARING IN FUN TIMES AND MANY EXCITING ADVENTURES TOGETHER. THROUGHOUT THIS WEEK WE WILL ENJOY THE WARM OKANAGAN SUMMER WITH ALL OUR BEST FRIENDS! BUT MOST IMPORTANTLY, THIS WEEK WILL BE A WEEK IN WHICH WE WILL LEARN MORE ABOUT HOW GOD'S POWER CAN WORK THE IMPOSSIBLE WHEN WE DON'T KEEP HIM IN A BOX.



**DROP OFF AND PICK UP  
WILL BE AT WILLOW PARK  
CHURCH HWY33  
9AM TO 5PM**

**COMPLETED GRADE 4-5  
ADVENTURE #1 JULY 24-28  
ADVENTURE #2 AUG 7-11**



Register at the church office or online at [www.willowparkchurch.com](http://www.willowparkchurch.com)  
\$120 per Preteen. Lunch is provided!  
There is a Family dinner the Friday after each camp to celebrate the end of an amazing week.

Our goal at Thrive is to see as many preteens come out as well as many lives changed! We are here to help accomplish this goal and assist families in any way possible.

If you have any questions feel free to contact:

Bailey: [bennig@willowparkchurch.com](mailto:bennig@willowparkchurch.com)

# THRIVE CAMP 2017 REGISTRATION FORM



Please fill in entire form completely and clearly.  
 Cost of Camp is \$120/child payable at time of registration.

Please make cheques payable to Willow Park Church

Online registration and credit card payment available at: [www.willowparkchurch.com](http://www.willowparkchurch.com)

REGISTRATION INFORMATION	MEDICAL INFORMATION
<p>Applicant's Name _____</p> <p>Camp # _____ #1 (July 24-28) #2 (Aug 7-11)</p> <p>Circle One: MALE/FEMALE    Grade Sept/17 _____</p> <p>Shirt Size: Child - L Adult - XS S M L XL (circle one)</p> <p>Parents/Guardian's Name; _____</p> <p>Address: _____</p> <p>City: _____ Province: _____ Postal Code: _____</p> <p>Phone #: _____</p> <p>Cell#: _____</p> <p>Email: _____</p>	<p>Applicant's Name: _____</p> <p>Date of Birth: _____</p> <p>Care Card #: _____</p> <p>Allergies/Medications/Limitations</p> <p>_____</p> <p>_____</p> <p>Emergency Contact: _____</p>
	<p><i>For office use only</i></p> <p>Payment Information.</p> <p>Paid \$ _____ Date _____</p> <p>Cash                      Chq# _____                      Debit</p>

**TERMS AND CONDITIONS**

1. I understand that participation in THRIVE Camp (Camp) activities involves a certain degree of risk. I have carefully considered the risk involved and have given consent for my Child/Ward to participate in Camp activities. I understand that participation in Camp activities is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I hereby release and indemnify Willow Park Church and the BCMB Conference; and all related directors, officers, employees, volunteers, and other organizations associated with Camp activities from any and all claims for damages arising from any accident or injury caused by my Child's/Ward's participation in the Camp activities.
2. I understand that my Child/Ward may experience illness or accident that may require immediate medical or surgical attention. I hereby give the Camp personnel the authority to act on my behalf in case of emergency, including medical treatment, without the necessity of my prior approval (Parent/Guardian will be notified as soon as possible). I understand that I am financially responsible.
3. Where the camp program involves leaving the Willow Park Church premises, I give my Child/Ward permission to participate.
4. The Parents/Guardians submitting this application are those having legal custody over the Child/Ward. Conditions of custody, if applicable, will be fully communicated, in writing, to the Camp personnel... including photocopy of the section of any court order referring to the visitation rights.
5. The Parents/Guardians submitting this application understand that their Child's/Ward's photo may appear in the camp video and may be used in THRIVE Camp publications.

I, \_\_\_\_\_ am the legal Parent/Guardian for the Child/Ward named on this THRIVE Camp Registration form.

Parent/Guardian Signature \_\_\_\_\_

Date Signed \_\_\_\_\_