



Kids Camp 2017

July 17-21

Located at Willow Park Church

Highway #33 Campus

9:30 AM - 12:00PM

Age 4 (must be 4 by July 17) - (entering) Grade 4

Cost: \$35/week. Max.\$100/Family

This camp filled last year and we highly encourage you to pre-register your children!

Register online at www.willowparkchurch.com

Join us for an imaginative, impacting adventure!

Kids discover not only that God made them the way they are, but for a purpose too. The day is filled with hands on Bible-learning, crafts, games, as kids explore and build friendships.

Registration Form

Please drop off or mail completed form to church office

Registration will not be taken over the phone.

For more information please call Tamara at 765-6880 x.106

Please print clearly.

Parent/Guardian Name _____

Address _____

Postal Code _____ Phone _____

Emergency Contact # _____

Email: _____

Please place an X in the box if you DO NOT give consent to the Willow Park Kids team to use pictures of child taken at the event for promotional material and website.

For office use only

Amount Paid: _____ Debit Cash Cheque# _____

Payment received by _____



1st Child

First Name _____ M / F

Last Name _____

Birthday M ___ D ___ Y ___

Grade entering Sept. 2017 _____

Serious Food Allergies or other concerns _____

Potential group mates (same age) _____

2nd Child

First Name _____ M / F

Last Name _____

Birthday M ___ D ___ Y ___

Grade entering Sept. 2017 _____

Serious Food Allergies or other concerns _____

Potential group mates (same age) _____



Volunteer Information:

Name: _____ Age (student) _____

Phone #: _____

*Childcare provided for volunteers with younger children

For more information about volunteering call Tamara at 250-765-6880 x.106 or email twelsh@willowparkchurch.com

Area of Service:

Small Group Leader Jr. Leader

Childcare Registration

Snack Helper Outdoor Games

Decorating Hosts



3rd Child

First Name _____ M / F
Last Name _____
Birthday M ___ D ___ Y ___
Grade entering Sept. 2016 _____
Serious Food Allergies or other concerns

Potential group mates (same age) _____

5th Child

First Name _____ M / F
Last Name _____
Birthday M ___ D ___ Y ___
Grade entering Sept. 2016 _____
Serious Food Allergies or other concerns

Potential group mates (same age) _____

4th Child

First Name _____ M / F
Last Name _____
Birthday M ___ D ___ Y ___
Grade entering Sept. 2016 _____
Serious Food Allergies or other concerns

Potential group mates (same age) _____

6th Child

First Name _____ M / F
Last Name _____
Birthday M ___ D ___ Y ___
Grade entering Sept. 2016 _____
Serious Food Allergies or other concerns

Potential group mates (same age) _____

