

# THRIVE CAMP

Child's Name: \_\_\_\_\_

Grade completed June 2018: \_\_\_\_\_

Care Card: \_\_\_\_\_

Allergies/Medical Conditions: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_

Parent's

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

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact

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

Phone: \_\_\_\_\_

July 23-27  
9 am - 3 pm

Willow Park Church@33

Cost: \$120

For kids who have  
completed Grades 4 & 5



## 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.

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

Date: \_\_\_\_\_