

♥ ♥ HIS KIDS SUMMER CAMP ♥ ♥

**THIS CAMP IS ALL ABOUT SPREADING LOVE IN THE NAME OF
JESUS!**



**CRAFTS*GAMES*MUSIC*STORIES*PLAYTIME*
SNACKS**

JUNE 28, 29, 30

9:00-1:00

FOR AGES 2 TO 8 YEARS OLD

REGISTRATION FEE:

NON-REFUNDABLE \$25 PER FAMILY

CAMP FEE: \$100

PLEASE MAKE CHECKS PAYABLE TO: GINA HOLCOMBE

CAMP CONTACT INFO: GINA HOLCOMBE-GINAH1755@GMAIL.COM-942-3162



**A PORTION OF THE CAMP FEES WILL BE DONATED TO:
~FLY HIGH GOOSE JOHNSON FOUNDATION~
{IN MEMORY OF MY NEPHEW-GOOSE JOHNSON}
(FORMER CDS STUDENT)
LOVE, AUNT GINA**



Country Day School

Registration Form

Summer Camps

This form serves as registration for all summer camp programs held at Country Day School.

(Please initial each line)

_____ My child has permission to participate fully in this summer camp and the activities that go along with it.

_____ I, hereby release, hold harmless and indemnify SBM, Inc., dba Country Day School and the summer camp instructors from any and all liabilities arising from, relating to, or in conjunction with the services provided upon the premises. I understand that these summer camps take place on the school grounds of Country Day School but are not sponsored by the school or affiliated with the school in any way.

_____ A non-refundable \$25.00 registration fee is required for all of the camps. This fee must accompany the registration form to hold your child's spot, made payable to the camp instructor.

***A separate registration form must be filled out for each camp you want your child to participate in this summer. Camp instructors are paid separately. You are not able to combine multiple camp forms and payments together.**

(Please Print)

Student's Name: _____ Age: _____

Address: _____ City: _____

Parents' Names: (Mom) _____ (Dad) _____

Phone Numbers: (Mom) _____ (Dad) _____

Email: _____

Allergies: _____ Epi-pen: yes no

Custody Issues: Yes No

Please list who has permission to pick up your child or can be contacted in an emergency:

Name: _____ Phone #: _____

Name : _____ Phone #: _____

Registration Form (Continued)

Child's Name: _____

Please circle the summer program and week you are registering your child.

Please remember that camp payments go to the camp instructor and **not** to CDS.

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| Fiesta Camp
(Monday, May 24 - Wednesday, May 26) | Ashleigh Barkley |
| Soaring into Summer Kids Camp
(Monday, May 24 - Wednesday, May 26) | Pam Corte & Gina Holcombe |
| Drive in Theater Camp
(Tuesday, June 1 - Thursday, June 3) | Becky Harrell |
| Circus Camp
(Monday, June 7 - Wednesday, June 9) | Ann Jones |
| Fun in the Sun Camp
(Monday, June 7 - Thursday, June 10) | Gina Holcombe |
| Tumble Bugs and Reading Rockets Camp
(Monday, June 14 - Wednesday, June 16)
(Monday, July 12 - Wednesday, July 14) | Pam Corte <i>(This camp is offered twice)</i> |
| Super Fun Summer Science Camp
(Monday, June 21 - Wednesday, June 23) | Gina Holcombe |
| His Kids Summer Camp
(Monday, June 28 - Wednesday, June 30) | Gina Holcombe |
| Kick Off to Kindergarten Camp
(Monday, July 12 - Wednesday, July 14) | Shawn Eastman & Rachel Wade |
| Christmas in July Camp
(Monday, July 19 - Wednesday, July 21) | Ann Jones |
| Dinosaurs and Unicorns Camp
(Monday, July 19 - Wednesday, July 21) | Becky Harrell |
| Painting with Shannon
(May - July)
(More information can be found at shannonnobleart.com) | Shannon Noble |
| After Hours Summer Camp
(May - July) | Ann Jones |