

Crossroads KIDVENTURE 2017

REGISTRATION FORM

Family Name _____ Parent/Guardian Name _____
Address (incl. city) _____
Postal Code _____ Phone (Day) _____ (Cell) _____
Email Address _____
Home Church (if applicable) _____
Emergency Contact Person _____
Relation _____ Phone _____

**FOR
REGISTRAR
USE ONLY:**

Total Paid:

Cheque# _____

Cash

1st Child's Name _____ Entering Grade _____
Birthdate (incl. year) _____ BC Carecard # _____
Known Allergies, Special Needs or Medical Concerns _____

1st Child T Shirt

Circle One Size:
Child XS S M L
Adult S M L

2nd Child's Name _____ Entering Grade _____
Birthdate (incl. year) _____ BC Carecard # _____
Known Allergies, Special Needs or Medical Concerns _____

2ND Child T Shirt

Circle One Size:
Child XS S M L
Adult S M L

3rd Child's Name _____ Entering Grade _____
Birthdate (incl. year) _____ BC Carecard # _____
Known Allergies, Special Needs or Medical Concerns _____

3RD Child T Shirt

Circle One Size:
Child XS S M L
Adult S M L

> I give permission for my son(s)/daughter(s), _____ to participate in "**Crossroads KIDVENTURE**" sponsored and led by Crossroads from July 10th to July 14th, 2017. I authorize the directors of this event to seek emergency medical attention for my child, on the advice of first aid personnel, should the need arise.

> My signature below indicates that I understand my child's photo may be taken during day camp activities and may be used in Crossroads newsletters, slideshow presentations, etc. or in publications regarding this event.

> Information gathered on this form will be used only for the purposes of Crossroads KIDVENTURE and the sponsoring church, Crossroads United Church. It will not be sold to or shared with other organizations in any way.

Parent/Guardian Signature

Date

Registration Fees: \$30 per child – includes a T-Shirt (\$75 max per family)

Please make cheques payable to Crossroads United Church

Our hope is that this program is accessible to all. If you need financial assistance in order to attend this event, please contact Gabrielle McLarty at Crossroads: 778-593-1043.

If you would like to support this ministry by making a tax-deductible donation above the registration cost, thus enabling all families, despite their financial situation, to participate in KIDVENTURE, we will send you a receipt.

***We are unable to process your registration unless it is complete with payment. Please register early to avoid disappointment.* **Registration Deadline: June 30, 2017**

Registrations can be mailed or dropped off to: Crossroads United Church, 7655 120 Street, Delta BC V4C 6P6
KIDVENTURE Registrar, Gabrielle McLarty, can be reached at gabrielle@crossroads-united-church.ca