

Carson Simpson Farm Summer Camp 2018 Registration Form

3405 Davisville Rd Hatboro, PA 19040 215-659-0232 fax. 215-659-5129 www.CSFarm.org

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CAMPER INFORMATION: Please PRINT and use a SEPARATE form for each camper.

Camper's Last Name _____ First Name _____ DOB ___/___/___ Male Female

Street Address _____ City _____ State _____ Zip _____

Grade completed by June ____ School _____ School District _____ T-Shirt size ____

Does child speak a primary language other than English? Yes No Language spoken _____

FAMILY INFORMATION:

Name of Father/Guardian (circle) _____ Home tel. _____ E-mail _____

Name of Mother/Guardian (circle) _____ Home tel. _____ E-mail _____

List family members with whom the child lives primarily, or if shared residences, specify schedule:

Are there any visitation restrictions of which the camp must be aware? If such a restriction exists, a copy of the current court order must be on file at the camp. Every camper, regardless of family issues or dispute, must be safeguarded when in our care. Without legal documentation, we cannot enforce any instructions with regard to parental custody/visitation. If yes, Please specify: _____

Church Name and Town _____

I would like registration confirmed via (check 1) Postal mail E-mail

How did you find out about CSF? _____ Camper is new to CSF and I was referred by _____

SCHOLARSHIP INFO: To request financial aid, please print and complete the Application for Financial Aid (www.CSFarm.org) and submit with registration form.

PERMISSION:

- **Physical and Mental Health Expectations** - Carson Simpson Farm assumes that Parents or Guardians represent to the camp that the camper is in sound physical and mental health and fully able to participate in all camp activities without the need of individual or specialized attention or medical regimen, and that the camper's health will not impinge or impact negatively on other campers or the camp Program. If a camper is not able to meet these criteria and the parent or guardian still desires to have their child attend Carson Simpson Farm, the parent and child must set up an interview with the Program Manager. Each child will be considered on an individual basis based on his/her ability to participate in the program and to discuss additional support (which the camp does not provide).
- **Participation** - I give my permission for the above-named camper to attend the 2018 summer camp event(s) with the Eastern PA Conference-UMC/Carson Simpson Farm that are included on this registration form. I understand that part of the camping experience involves activities, arrangements and interactions that may be new to my child, and that they come with certain risks and uncertainties beyond what my child may be used to. I am aware of these risks, and I am assuming them on behalf of my child.
- **Payment** - I acknowledge my responsibility for payment of all fees in full to Carson Simpson Farm THE MONDAY BEFORE THE START OF THE EVENT. I understand a late fee of \$10.00 will be charged if payment is not received on time.
- **Photos** - Upon signing, permission has been granted to Carson Simpson Farm to use photos and video images of the camper for publicity purposes. This could include, but is not limited to: brochures, flyers, DVDs, newspapers, publications of AM. Camping Assoc., CCCA and the UM Church, and use on the camp website and social media pages. If you do not agree to this you must make your request known in writing at the time of registration.

SIGNATURE OF PARENT OR GUARDIAN _____ DATE _____

(Only parents or legal guardians of camper may sign)

Continue to other side to complete registration

Certification Class				Disciple Program	
6/13	\$90 <input type="checkbox"/>	Red Cross Life Guard Recertification Class (Life Guard, First Aid, CPR/AED)		See information printed in brochure or on website	
Day Camps					
Dates	Half-day Camp	Day Camp	Day Camp & Extended	Day Camp Add-Ons	
				Classes, etc.	Swim Enhancement
1- 6/18 – 22	\$160 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$300 <input type="checkbox"/>		
2- 6/25 – 29	\$160 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$300 <input type="checkbox"/>		
3- 7/2 – 6 Closed 7/4	\$128 <input type="checkbox"/>	\$208 <input type="checkbox"/>	\$240 <input type="checkbox"/>		
4- 7/9 – 13	\$160 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$300 <input type="checkbox"/>		TWTh Swim Class (K-6) <input type="checkbox"/> \$30
5- 7/16 – 20	\$160 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$300 <input type="checkbox"/>	5 th & 6 th Overnight <input type="checkbox"/> \$50	TWTh Swim Class (K-6) <input type="checkbox"/> \$30
6- 7/23 – 27	\$160 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$300 <input type="checkbox"/>	TWT Jr. Science Lab (3-6 grade) <input type="checkbox"/> \$30	TWTh Swim Class (K-6) <input type="checkbox"/> \$30
7- 7/30 – 8/3	\$160 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$300 <input type="checkbox"/>		M-F Jr. Lifesaving (age 11-14) <input type="checkbox"/> \$75
8- 8/6 – 10	\$160 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$300 <input type="checkbox"/>	TWT Art Classes (1-3 or 4-6 grade) <input type="checkbox"/> \$30	
9- 8/13 – 17	\$160 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$300 <input type="checkbox"/>		

2018 CSF CAMPER YEARBOOK: choose with or without shipping – payment must be included with order

\$15.00 Available to pick up September 2018 \$18.00 Will be mailed to you September 2018

PAYMENT METHOD: Please pay full amount or \$25 minimum deposit for each week/event

Cash Check/Money Order (Make payable to Carson Simpson Farm) Amount \$ _____

Credit Card # _____ Exp ____ CVV ____ Signature _____

PARENT/LEGAL GUARDIAN AUTHORIZATION FOR CAMPER RELEASE:

Camper's Name _____

The Camper named above may be picked up at camp by persons listed below.

List anyone that you permit to pick up your child. If someone attempts to pick up your child that is not on the list, the staff **will not** allow them to leave the property without consent from a parent/guardian. We reserve the right to ask for picture I.D.

NAME	RELATIONSHIP	PHONE #
1. _____	<u>Parents/guardians</u>	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

Signature of Parent/Guardian _____ Date _____

Unless Carson Simpson Farm is restricted by a court order directed expressly to the camp, CSF is hereby authorized to release the child to either parent (or persons authorized by either parent) at any time during the day even if both parents do not live at the same address.

Continue to other side to complete registration