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| **NEW HOPE CHURCH 2017 CAMP SOLOMON & VBS REGISTRATION FORM** |

**Camp Solomon: Entering Kinder-5th grade / VBS: Age 4-11 (5th grade)**

* **PARENT INFORMATION:**

**Name: Contact:**

**Address:**

 (Street) (City) (State) (Zip)

* **STUDENT INFORMATION:**

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| **Name** | **Gender** | **Age** | **Grade** | **Allergy** | **T-shirt size** |
|  | F / M |  |  |  | *Y* - XS S M L*Ad* - S M L |
|  | F / M |  |  |  | *Y* - XS S M L*Ad* - S M L |
|  | F / M |  |  |  | *Y* - XS S M L*Ad* - S M L |

* **REGISTRATION OPTION*(Check one)* :**

|  |  |  |
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|  | **CAMP SOLOMON only** | **$290.00** |
|  7/17/17~7/28/17 (Mon~Fri) 9am~3pm | *$250.00 Camp Tuition + $40.00 Lunch + Free T-shirt* |
|  |  |  |
|  | **VBS only** | **$50.00** |
| 7/31/17~8/4/17 (Mon~Fri) 9am~1:30pm | *Lunch Fee Included + Free T-shirt* |
|  |  |  |
|  | **CAMP SOLOMON & VBS** | **$340.00** *Lunch Fee Included + Free T-shirt* |
|  | **$290.00: 2nd child / $250.000: 3rd child** |

**\*Camp Solomon Activities:**

* **Science Projects (과학실험)**
* **Music & Dance (음악)**
* **Crafts & Painting (공예)**
* **Cooking & Baking (요리)**

**\*Camp Solomon Additional Fee:**

* **Field Trip Fee: Sight & Sound "Jonah"**

 **$45.00 - Ticket and transportation**  *(Please submit a separate payment.)*

* **After Care Hour Fee: $10.00/day (3pm~5pm only)**

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| *I entrust my son or daughter to attend this program under the supervision of the leaders during this event. I also understand that the church is not liable for any bodily injuries that might take place during this event. I also understand that if my child causes any property damage and/or bodily injury on himself, herself, or anyone else that I will be solely liable as the parent or guardian.I also consent to the Church's use of my child's image as shown in any photographs, videotapes, motion picture film, or electronic images and any audio recordings made of my child's voice including television print and internet websites. Furthermore, I consent that such photographs, films, recordings, electronic images shall be the sole property of the Church.* **Parent's Signature: Date:**  |

***Office Use Only***

Total Payment: $ *( CASH or CHECK # )* Date: