

**Helping Hands Day Camp**, a cooperative ministry of Trinity Episcopal, Emmanuel Episcopal, Central United Methodist, First Presbyterian and Covenant Presbyterian, is for children who completed grades K through 5 during the 2021 - 22 school year. Please complete the registration form below.



**Date:** *Monday, 1 August to Friday, 5 August from 9:00 a.m. until 1:30 p.m.*

**Location:** *Covenant Presbyterian Church, 2001 N. Coalter Street, Staunton.*

**Activities** are Bible-based and include music, crafts, recreation, cooking, science, mission projects as well as Bible Study.

- *Masks may be required for all participants regardless of vaccination status.*
- *All participants must comply with the COVID policy of host church.*
- *Each camper/youth must provide their own lunch and water bottle daily. Refrigeration will not be available. Water coolers will be available for refilling bottles.*

The **cost** is **\$15.00 per camper**. Scholarships are available and families are welcome to sponsor another camper in need of financial assistance.

**Registration forms and checks must be received by Friday, June 24.** Registrations received after that date will be placed on a waiting list. No registrations will be accepted once camp has begun. Make checks to **Helping Hands Day Camp**. Checks may pay for more than one camper, but each camper must have a separate completed registration form.

Please complete the information below and the permission form on the back of the registration and mail the form to Helping Hands Day Camp, c/o Covenant Presbyterian Church, 2001 N. Coalter Street, Staunton 24401.

For answers to questions, please email us at [helpinghandsstaunton@gmail.com](mailto:helpinghandsstaunton@gmail.com)

*Summer 2022 ~ Camper Registration Form*

*Select one: Camper \_\_\_ Youth \_\_\_ Name: \_\_\_\_\_*

*Age \_\_\_ Grade Completed \_\_\_ Camper's Parent or Guardian \_\_\_\_\_*

*Address \_\_\_\_\_*

*City \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone # \_\_\_\_\_*

*Email Address \_\_\_\_\_*

*Photo Policy (check one) I DO \_\_\_\_\_ I DO NOT \_\_\_\_\_ grant Helping Hands Day Camp permission to take photographs of \_\_\_\_\_ (Camper/Youth) for the specific purpose of inclusion in camp promotional materials as well as various social media sites (i.e. Facebook, Instagram). Children's names will not be used.*

*Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_*

*Complete form on back, please.*

## *Emergency Medical Authorization*

*Please complete:*

**I, the parent/guardian authorize Helping Hands Day Camp to obtain immediate medical care for my child in the event that I cannot be reached. I also consent to any and all medical treatment including but not limited to diagnostic tests, surgery, administration of drugs and/or hospitalization as trained medical personnel may determine, in the event that I cannot be immediately reached.**

**Please circle #1 or #2 below:**

**1. My child has no insurance, so I/we will be responsible for the payment of medical expenses.**

**2. Medical treatment costs are covered by**

**Insurance Company Name \_\_\_\_\_**

**Policyholder's Name \_\_\_\_\_**

**Identification Number \_\_\_\_\_**

**Camper's Physician \_\_\_\_\_ Phone \_\_\_\_\_**

**Allergies/Medical Conditions/ Special Needs \_\_\_\_\_**

**Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_**

**If you would like to give Helping Hands Day Camp a love offering to help defray the costs of camp, include the gift in the check that you send with your registration. You will receive a confirmation for your gift. We are grateful for your financial support!**

***Mail to Helping Hands Day Camp, c/o Covenant Presbyterian Church, 2001 N. Coalter Street, Staunton VA 24401. Each camper must have his/her own registration and permission form completed and received no later than Friday, June 24.***