

# Munholland UMC Drama Camp 2019

## Student Registration Form



Monday, July 8th-Friday, July 12th  
9:00 am-2:00 pm  
1<sup>st</sup>-6<sup>th</sup> grade completed

### Two Performances:

Friday, July 12<sup>th</sup>, 6:30 pm, Fellowship Hall  
Sunday, July 14<sup>th</sup>, 11:00 am, Sanctuary

\$50 fee includes: curriculum, healthy snack, music & games.

**Student must bring lunch with drink each day- NO NUTS PLEASE- kindly label all lunch boxes/bags**

*Pre-registration required*

*Fee nonrefundable after July 1st*

PLEASE PRINT

Child's Name \_\_\_\_\_ Sex M or F

Grade just completed: \_\_\_\_\_ Date of birth \_\_\_\_\_ Phone# \_\_\_\_\_

Parent's Name \_\_\_\_\_ Cell # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Email address \_\_\_\_\_ Tshirt size: Child's XS, S, M, L, XL

Munholland Church Member (Y or N) \_\_\_\_\_ Church Affiliation \_\_\_\_\_

Allergies or Special Needs \_\_\_\_\_ Phone # \_\_\_\_\_

List two friends with whom your child would like to be placed (no guarantees, NO changes will be made the week of camp)(1) \_\_\_\_\_ (2) \_\_\_\_\_

Doctor Name \_\_\_\_\_ Phone # \_\_\_\_\_

Hospital Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name of person picking child up each day \_\_\_\_\_ DL# \_\_\_\_\_

I am able to volunteer and have filled out a separate volunteer form. Name \_\_\_\_\_

**\*\*\$50.00 per child payable to Munholland UMC \*For questions call the Church office at 834-9910**

### PHOTO RELEASE FORM

I authorize the posting of video, photographs and/or likeness of my child/children on video, film and photo on Munholland Website/Facebook page. I authorize Munholland United Methodist Church to show stream video of my child/children during worship services. Video streaming may stream live on the church's website. **My child's name will not be published anywhere in the video.**

\_\_\_\_\_ I grant permission \_\_\_\_\_ I do not grant permission

Parent's Signature

Parent's Name

Date