

Summer Camp Application 2009

Camper's Name _____ Grade Entering 2009 _____

School _____ Date of Birth _____

Home Address _____ City _____ State _____ Zip _____

Phone Number(s) _____ Email Address _____

FOR SPORTS CAMPS: PLEASE CIRCLE T-SHIRT SIZE: YOUTH: S (6-8) M (8-10) L (12-14) ADULT: S M L XL

Please check boxes and circle appropriate deposit or total

Camp (Grade entering Fall 2009) Deposit Total

May 26-29

Baseball Camp (grades 1-4) \$35 \$100

June 1-4

Outdoor Camping Adventure (grades 5-7) \$75 \$175

Boys Basketball Camp (grades 1-3) \$35 \$100

Girls Basketball Camp (grades 3-6) \$35 \$100

Baseball Camp (grades 5-8) \$35 \$100

Happy Feet Soccer Camp (grades 1-5) \$35 \$100

Summer Sports Spectacular (grades 1-3) \$35 \$100

Combination Camps (grades 1-6) \$60 \$90

June 8-12

Boys Basketball Camp (grades 4-6) \$35 \$100

Girls Basketball Camp (grades 7-10) \$35 \$100

Volleyball (grades 5-8) \$35 \$100

Summer Sports Spectacular (grades 2-6) \$35 \$100

June 15-19

Boys Basketball Camp (grades 7-9) \$35 \$100

Football Camp (grades 1-4) \$30 \$100

Tennis Camp (grades Sr.K-4) \$35 \$80

Tennis Camp (grades 5-8) \$35 \$80

On Broadway Drama and Choreography Camp (grades 5-8) \$60 \$190

Canoe the Wolf River (grades 5-8) \$35 \$75

Camp (Grade entering Fall 2009) Deposit Total

June 22-26

Speed and Agility Camp (grades 5-8) \$35 \$100

Happy Feet Soccer Camp (grades 5-8) \$35 \$100

July 6-10

Basketball Shooting Camp (grades 4-9) \$35 \$100

Football Camp (grades 5-8) \$35 \$100

Photoshop 101 Beginner (grades 6-12) \$30 \$100

July 13-17

Photoshop 201 Intermediate (grades 7-12) \$30 \$100

Total Deposits Paid: _____ **Total Due:** _____

For more information on Summer Programs, contact Bryan Williams at 765-4616 or bkwilliams@briarcrest.com

EMERGENCY INFORMATION

Child's name _____ Grade Entering Fall 2009 _____

The following persons have permission to pick up my child from camp _____

Father's Name _____ Employer _____

Phones: (Home) _____ (Work/Cell) _____

Father's email _____

Mother's Name _____ Employer _____

Phones: (Home) _____ (Work/Cell) _____

Mother's email _____

Emergency Contact _____ Phone _____

Emergency Contact _____ Phone _____

Hospital _____ Insurance Company _____

Insured Name _____ Policy Number _____

BRIARCREST CHRISTIAN SCHOOL SUMMER PROGRAMS POLICIES AND WAIVER/RELEASE OF CLAIMS

I understand that Briarcrest Christian School personnel reserve the right to dismiss any camper whose behavior becomes unmanageable or inappropriate. Inappropriate behavior would include anything that violates the policies of Briarcrest Christian School. I understand that my child should wear neat, modest, and proper attire and that summer shorts are permitted, but should be a conservative length.

I understand that Briarcrest Christian School assumes no responsibility for personal injuries participants may sustain as a result of his/her physical condition or resulting from participating in any athletic activities, sports programs, the use of any equipment, exercise, or other activities. I expressly acknowledge that I assume the responsibility for any and all injuries and illnesses which may result from participation in these activities. Briarcrest Christian School will not be liable for lost or stolen items while participants are using Briarcrest Christian School facilities or while on Briarcrest Christian School premises. I, the undersigned for myself, my heirs and assigns, do hereby release Briarcrest Christian School and its branches, employees, and agents from any and all claims for injury, death, loss, or damage my participant may suffer as a result of participation.

In the event of an emergency and my emergency contact person cannot be reached, I hereby give permission to the physician selected by Briarcrest Christian School to hospitalize, to secure proper treatment for, and to order injections, anesthesia or surgery for the individual named on this registration. I understand that no accidental or medical insurance is provided by Briarcrest Christian School for these activities.

Signature _____ Date _____

(Parent/Guardian)

FOR ENROLLMENT, DID YOU:

- Include the required deposits for each camp?
- Include the student's name on the check?
- Include T-Shirt size for Sports Camps?

Make all checks payable to: Briarcrest Christian School 6000 Briarcrest Avenue Memphis, TN 38120-4199