Red Bridge United Methodist Church
Camp ECC- Summer 2010

Child's Name_____
Parent's Name _____
Address_____ City_____ State_____ Zip_____
Home Phone ( ) _____ Cell Phone ( ) _____
Work Phone ( ) _____Child's Birth date_____
E-mail Address_____
Preschool/ Elementary School your child will attend in the fall_____
Does your child have any special needs? Yes / No (*Please explain on the back of this sheet*)
Emergency Contacts other than parents (name, relationship to child, and phone number)

1. _____
2. _____
3. _____

Doctor's Name _____ Phone number _____
Preferred Hospital _____

In the event of a medical emergency, we understand that every effort will be made to contact you. If we cannot be reached, we give permission to the attending physician at the hospital to which our child is taken to administer whatever emergency or other medical treatment his/her sound judgment recommends.

Parent Signature: _____ Date _____

Register early! Registration begins Monday, March 22 for in-house families and Monday, March 29 for new families. Camp is available to currently enrolled ECC children and 3-5 year-olds. ***All children must be potty trained***. Camp is $70 per week. *Parents must pay a $20 non-refundable registration fee for every week of camp your child attends*. This will go towards the total cost of camp. Please choose carefully. No refunds will be given. Changes can only be made based on availability and if advance notice is given. The remaining balance ($50/week) for camp will be due the first week your child attends. Please bring forms to the office or mail them to: ECC 636 E. 117th St. Kansas City, MO 64131. Our website is www.RedBridgeECC.com if you need more forms or you can call the office at 816.942.4262.

	Date	*Theme*	*Attend*	*Cost*
Week 1	June 8-10	Cooking Up Fun		$70
Week 2	June 15-17	Up, Up & Away		$70
Week 3	June 22-24	My Wonderful Body		$70
Week 4	July 6-8	Puppet Play		$70
Week 5	July 13-15	On the Loose with Mother Goose		$70
Week 6	July 20-22	Trinkets, Tools, and Things		$70

_____ Number of weeks of camp
x $70.00 Cost per camp per week
$_____Total balance for camp

_____ Number of weeks of camp
x $20.00
$_____ Non refundable deposit

$_____ Remaining balance due the first week your child attends camp