

What is fun and exciting for kids in the neighborhood this summer?

Lutheran Church of the Redeemer Neighborhood Camp (2417 Drexel Avenue)

What is the cost?

It's FREE and for all children 6-11 years old.

What are the days and times?

Monday through Friday, 9 a.m. to 2:30 p.m.

What is this summer's theme?

Water, Water Everywhere!

When is Redeemer's camp?

June 24th - 27th
 July 1st - 3rd
 July 8th - 11th
 July 15th - 18th
 July 22nd - 25th
 Monday-Thursday
 Monday-Thursday
 Monday-Thursday

No Camp on the 4th of July



Visit us on the web! www.lcrcamp.weebly.com

What will kids do?

There will be games, activities, "God Time", field trips, stories, music, and lots of "hands-on" activities with a new theme and field trip every week. The camp operates on donations, so there is no charge for anything. A breakfast, lunch and snack will be served daily.

Where is there more information and registration forms?

Registration is first come, first served for up to 50 children, so register early. To register for Redeemer's Neighborhood Camp, fill out the registration form and drop off or mail to the church. For questions call 634-7998. The city-site camp office number is 634-5515.



ELCA Neighborhood Camp Lutheran Church of the Redeemer 2417 Drexel Ave. Racine, WI 53403 Phone (262) 634-7998

Child's Name			
(first)	(middle)	(last)	
Address	(city)	(zip code)	
Home Phone	Date of Birth	Current Age	
School Attending (fall)		Grade (fall)	
Home Church	Child Baptized? Yes No		
Parent(s)/Guardians:			
Mother			
(name)	(work phone)	(cell phone)	
(name)	(work phone)		
Please list the names and phone when you cannot, and in case o		d be authorized to pick up your child	
Name	phone		
	(relationship)		
Name	phone		
	(relationship)		
Name	phone		
Traine	(relationship)		
Please tell us anything about yo	our child that you think would be he	lpful for us to know.	
Indicate the weeks your child will Camp sessions are Monday throug Please check: Week of	gh Thursday 9:00 a.m 2:30 pm	ttendance is encouraged for the entire wee	
	_ July 15thJu	ıly 22nd	
Child's Shirt Size(children's sizes)	es S M L XL XXL XXXL		
Please answer the questions below	. This is confidential information used o	only for grant reporting.	
1. Does this camper receive free or r	reduced lunch at school? Yes N	No	
2. Ethnicity:Caucasian	African-AmericanHispanic	Asian Other	
(Parent/Gu	uardian Signature)	(date)	

Attention to Parents and Guardians Regarding Field Trips

As the parent or guardian of	, I give permission to
the Racine ELCA Neighborhood Camp at Lutheran	Church of the Redeemer regarding the following special field
trip needs. This is not an all inclusive list, but indica	ates some of the special activities in which sites may be
involved.	
Initial those items that your child has permission	to do.
to walk downtown, or in the Church neighbor	rhood supervised by staff
to ride in an adult employee car only if abso be required (like sickness or emergency). C	lutely necessary when immediate transport may children are required to use a seat belt.
	lic transportation with the staff and children of ecifically, this includes a school bus or perhaps
to play at the beach and Kid's Cove playgrou swimming allowed.	nd with staff supervision. There will be no
Some trips involve a lot of walking (i.e., the at to do this.	zoo and downtown). My child is physically able
My child requires an inhaler and has one in l	nis/her possession.
I will put sunscreen on my child before an or	utdoor field trip.
If your child has any known allergies to anything (to indicate any other precautions the staff should take to	food, medications, lotions, etc.) please list what they are and for the safety of your child.
We must have the signature of a parent or the leg	gal guardian.
(signature)	(signature)
(date)	(date)
Day time phone in case of emergency	and/or

<u>Lutheran Church of the Redeemer Neighborhood Camp</u> Release of liability for permission to participate

Name of Participant Name of Parent/Guardian				
Child's Birth Date	Current Age	Grade (fall)		
I know there are risks associllness, or even death. Release of Liability: By signing this form, I warre the physical and mental dentactivities, whether they are with it or action on its behalf release is also binding on an Church of the Redeemer amparticipation in its activities. First Aid and Emergency Medical First aid or emergency medical or injury. I give permission or treatment of the child namedical treatment. I give peneded medical treatment, i Special Events and Field Trip I understand that the child name give permission for such patentials. Publicity: Photographs or audio or vide permission for such photographs or for camp publicity. Health Insurance Information.	known or unknown. I release Luther of from all possible claims against the myone acting on behalf of me or the claim and programs, or as a result of injury dical Treatment: ical treatment may be needed as a result of agents of Lutheran Church of the med above including hospitalization. The ermission for the attending physician including surgery and, again, I agree the standard above may participate in special recordings of children and/or adultance or recordings to be made and updated or for such photographs and other, including but not limited to the care	pable of withstanding both ssume all risks of the child's participation in these an Church of the Redeemer and anyone associated as a result of participation in the activities. This hild. I also indemnify and hold harmless Lutheran on its behalf from any and all claims arising from y to me or my child during such activities. Sult of an accident, illness or other health condition are Redeemer to obtain any needed medical attention. I agree to pay all fees and costs arising from such (s) and other medical personnel to administer any to pay for the medical treatment. all events and field trips during the program and I lts involved in activities may be made. I give used in any manner and for the child to be are audio or visual records to be used by the news up and church websites.		
Insurance Company addr	ess & phone #			
• Emergency Contacts Names of persons and phone num	nbers to call in case of emergency	or illness:		
Relationship	Home Pho	Phone		
Work Phone	Cell Phone			

2. Name	
Relationship	Home Phone
Work Phone	Cell Phone
• Swimming Ability	
Non-swimmer	
Beginner (capable of swimming several minute	s in deep water)
Moderate (capable of swimming for several len	gths of the pool)
Medical History Special medical needs or concerns (allergies, conditions)	s, dietary needs, medications, etc.)
Other Information Any information staff should know about your child	
	utheran Church of the Redeemer Neighborhood Camp. In ctivities, I hereby consent to the waivers and consents given in
this form, binding on anyone acting on behalf of me or the ch	
Print Name of Parent/Legal Guardian	Date
Signature of Parent/Legal Guardian	Date