

# CBCSJ Summer Camp 2019

# Registration Form

- ☺ Summer Camp is for students entering Grade 1 to 6 in Fall 2019 (currently in Kindergarten to Grade 5).  
This year's camp program includes Bible study, singing, craft, games led by CBCSJ volunteers and science program led by Mad Science teachers.
- ☺ Registration fee is \$30 per child and is waived if register before 3/1/2019. Camp fee is \$350 for week 1, per child and \$300 for week 2. Scholarships are available if requested and approved.
- ☺ Camp starts at 8:30am and ends at 4:30pm.
- ☺ Extended care option is available daily up to 5:30pm with additional \$10 per day. Late pickup fee of \$1 for every minute applies after agreed pickup time.
- ☺ Please bring a brown bag lunch each day. A morning and afternoon snack will be served daily.
- ☺ T-shirt Size Option for students: Youth Small, Youth Medium, Youth Large, Adult Small, Adult Medium.
- ☺ Space is limited. Register early. Registration deadline is April 1, 2019. A confirmation of placement will be sent out by the middle of April via email.
- ☺ Registration will not be processed if form is not signed and completed. Check payable to CBCSJ must be submitted at the time of registration.
- ☺ Questions? Please contact Betty Fung at [cbcsjsummercamp@yahoo.com](mailto:cbcsjsummercamp@yahoo.com) or call 408-371-6200.  
Visit [www.cbcsj.org/summercamp](http://www.cbcsj.org/summercamp) for additional information.

## Please check all the weeks desired:

☐  
☐

**Week 1 – July 15-19, 2019 (5 days) Wacky Robots & Widgets**

**Week 2 – July 22-25, 2019 (4 days) “Fizz”-ical Phenomena & Chem-Mystery**

☐

**Please check here if you would like to apply for scholarship so we can send you more information.**

## STUDENT INFORMATION:

**Child's Name** \_\_\_\_\_ **T-Shirt Size** \_\_\_\_\_ **M / F**

**Age Information** Date of birth \_\_\_\_\_ Age \_\_\_\_\_ School grade for 2019-2020 \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION:

**Parent/Guardian Names** \_\_\_\_\_

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

**E-mail Address** \_\_\_\_\_

**Phone Numbers** Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Home Church \_\_\_\_\_ Attending School \_\_\_\_\_

**Allergies/Medical condition and information/Other Special Needs**

**Emergency Contacts** Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Dismissal Information** Name(s) of person(s) who may pick up your child from Summer Camp

**Extended Care request**

☐

Pickup at 5pm

☐

Pickup at 5:30pm

Parent/guardian of child named \_\_\_\_\_, give permission for any adult/employee/volunteer of CBCSJ in whose care said minor child has been entrusted, to seek emergency medical care for my child at a nearby hospital or medical clinic in the event of illness or injury. I, the parent/guardian, will assume any and all financial responsibility for such emergency medical care.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**For office use only:** \_\_\_\_\_ Paid \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ Date Received

Community Baptist Church of San Jose 2215 Curtner Ave, Campbell, CA 95008

Don't forget to also check out and sign up for our VBS program for July 8 to 12 at  
[www.cbcsj.org/vbs](http://www.cbcsj.org/vbs).

