

MEDICAL INFORMATION (Please print clearly)

Child's Name: _____

Care Card #: _____

Emergency Contact:

Name: _____

Phone #: _____

Family Doctor: _____

Phone #: _____

Medical Conditions? _____

Allergies or diet restrictions?

I hereby give consent for my son/daughter _____ to participate in all activities of the Eagle Ridge Bible Fellowship **2017 Arts Camp**.

I hereby release Eagle Ridge Bible Fellowship and its staff and sponsors from responsibility and liability for any injury or illness that my child may sustain during the week's activities.

I am aware that my child's picture may be taken and used for promotional purposes. (If this is not acceptable, check here _____)

PARENT/GUARDIAN SIGNATURE

Date: _____

For more information about the Eagle Ridge Middle School or Children's Ministry please call or e-mail us at children@erbf.com

This brochure is also available on our website ERBF.com in our Children's Ministry section.



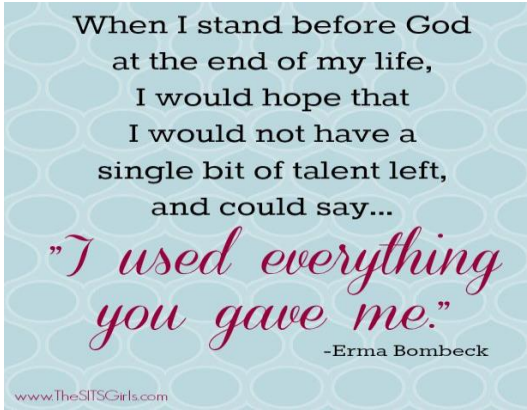
ERBF ARTS CAMP

July 31st- August 4th, 2017

9AM – 1230PM

GRADES 3 – 8





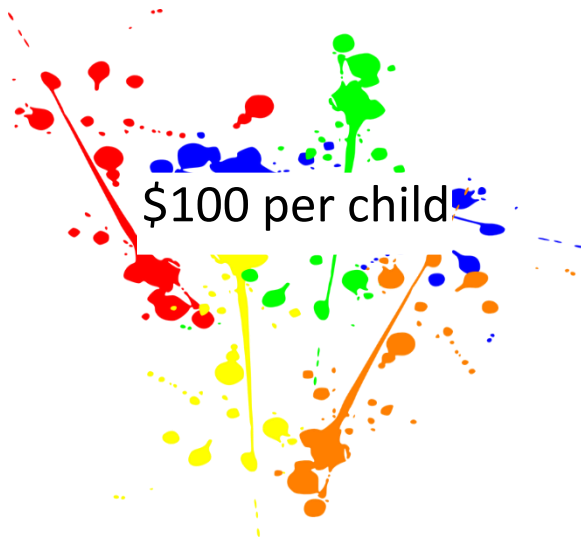
We are pleased to be able to bring our ARTS camp again to you this year. We wish to offer a quality arts program to kids, introducing and encouraging interest in the arts. We want to celebrate the arts and offer a chance for kids in grades 3-8 to work and learn from skilled individuals in different genres. We limit the number of kids to 20, so please register early.

Each day they will be taught 2-3 different things and the projects displayed at the end of the week and taken home.

Note: All supplies will be provided each day as well as a mid-morning snack.

Each year we try to engage the kids in numerous art forms, from painting and drawing to woodworking and drama.

COST



REGISTRATION FORM

Name: _____

First Last

Age: _____ Birth Date ____/____/____

Parent/Guardian: _____

Contact Number: _____

Email: _____

For Office use only

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