Immanuel Discovery Camp Registration Please submit this form with your online registration. Do NOT turn into the School Office

Family Name:			Add	Address:				
Home Phone:			_ City	City, State, Zip:				
Caregiver 1 Name:			Car	Caregiver 2 Name:				
Caregiver 1 Work Phone:			Car	Caregiver 2 Work Phone:				
Caregiver 1 Cell Phone:			Car	Caregiver 2 Cell Phone:				
E-Mail Address(es):								
Authorized Drop off & Pick up Emergency Contacts:								
Name: Relationship:								
Phone:								
Name:	Name: Relationship:							
Phone:								
Child's First Name	Child's Last Name	Drop off time	Pick up time	Birth dat mo/day/y		Grade in 2024-2025	Swim Ability None, Fair, or Good	
		-	-				None, Fair,	
		-	-				None, Fair,	
		-	-				None, Fair,	
Name Vacation Bible Will you be attended	Name School Fee: (Hal nding camp the w	off time f Day Cam /eek of Ju	time p and Mid une 17 th	mo/day/y dle Schoo If Yes	yr June 1, 2024	2024-2025	None, Fair, or Good	
Name Vacation Bible Will you be attended	Name School Fee: (Hal	off time f Day Cam /eek of Ju	time p and Mid une 17 th	mo/day/y dle Schoo If Yes	yr June 1, 2024	2024-2025	None, Fair, or Good	
Name Vacation Bible Will you be atten * If attending Disco	Name School Fee: (Hal nding camp the w wery Camp June 17	off time f Day Cam /eek of Ju	time p and Mid une 17 th	mo/day/y dle Schoo ? If Yes is manda	yr June 1, 2024 Une 1, 2024 Un	2024-2025	None, Fair, or Good S fee)) =	
Name Vacation Bible Will you be atter * If attending Disco Camp Registra \$50.00 (returning)	Name School Fee: (Hal nding camp the w overy Camp June 17	f Day Can veek of Ju 25.00 (new	time p and Mid une 17 th f egistration w familie	mo/day/y	yr June 1, 2024	2024-2025 plicable for VBS (#of children children) =	None, Fair, or Good S fee) $D = \underline{\qquad}$ Box A Box B	
Name Vacation Bible Will you be atten * If attending Disco Camp Registra \$50.00 (returnin *Each child is requ Payment Plan? Pa Summer Discount	Name School Fee: (Hal nding camp the w overy Camp June 17 tion Fee: ng families) or \$7 tired to have a Palat tyment Plans are not rates.	off time f Day Cam veek of Ju -21, VBS ro '5.00 (new ine Pool Po applicable	time p and Mid une 17 th f egistration w familie ass or a Pa	mo/day/y	yr June 1, 2024 June 1, 2024 ol ages are not app s, \$25 x ttory (#of coll Punch Card to FOR OFFICE	2024-2025 plicable for VBS (#of children) children) = participate on J USE ONLY	None, Fair, or Good S fee) $D = \underline{\qquad}$ Box A Box B	
Name Vacation Bible Will you be attent * If attending Disco Camp Registra \$50.00 (returnin *Each child is requ Payment Plan? Pa Summer Discount □ 2 month (payment	Name School Fee: (Hal nding camp the w overy Camp June 17 ntion Fee: ng families) or \$7 nired to have a Palat	off time f Day Cam yeek of Ju -21, VBS ru '5.00 (new ine Pool Pa applicable ly 1) OR	time time time time time time time time	mo/day/y	yr June 1, 2024 Under State St	2024-2025 plicable for VBS (#of children) children) = participate on J USE ONLY	None, Fair, or Good S fee) $D = \underline{\qquad}$ Box A Box B	

TOTAL TO BE BILLED