

Haygood UMC Mission Camp
June 7th - 11th, 9:00 am -1:00 pm
Rising 5th and 6th graders

Pre-registration for church members ends February 28th

General Information

Hello campers! Grab your gear and join us! We will spend the week traveling by bus to various ministries such as the UMC Children's Home, Bethlehem Senior Center, and Atlanta Day Shelter. We will be serving others, discovering God, and serving as disciples for Jesus Christ. Friday will be an all day trip to White Water and ending with the Celebration Service at Haygood.

Please complete one form per participant by May 1st, 2010. Rising 5th and 6th graders are invited to attend. Registration fee this year is \$100.00 per child. Attach payment to this form, and make checks payable to Haygood Memorial UMC. Please contact Ellen Hopkins (ehopkins@haygoodumc.org or 404-872-9613 ext. 227) for scholarship information. Completed forms can be placed in the envelopes at the Preschool Desk, the Church Office, or mailed to 2010 Mission Camp, Haygood UMC, 1015 E. Rock Springs Rd., Atlanta, GA 30306.

Registration forms must be received no later than May 1st, 2010. Due to space constraints, registration may close early. Church Members will be given priority registration until February 28th. *All registrations received after February 28th will be processed on a first come, first serve basis.*

Registration:

I am an active Haygood UMC Church Member Yes No

Participant's Name _____

Participant's Age _____ Birth Date _____ 10'/11' Grade _____

Parent/Guardian _____

Full Address with Zip Code _____

Email _____ Cell Phone _____

Home Phone _____ Work Phone _____

Emergency Contact _____ Phone _____

Pediatrician _____ Phone _____

Known Allergies/Medical Condition _____

Insurance Information _____

Other person(s) authorized to pick up child _____

My child will go directly to Haygood's HUT _____ after Mission Camp, June 7-11, 2010.

Adult T-shirt size Small _____ Medium _____

Liability Waiver (Please sign one waiver per child enrolled.)

I hereby grant permission to Haygood Memorial United Methodist Church authorities present during any emergency or accident involving my child _____, to obtain the services of a physician to treat my child even though I am not present. Haygood Memorial UMC or VBS volunteers shall not be held responsible for any injury to my child.

Signature _____ Date _____

Preferred Hospital _____

Swimming Information for White Water

Does your child know how to swim?

- Yes, my child can swim **without assistance** in water over his/her head.
- NO, please explain. _____

Permission Slip/Waiver in Lieu of Health Examination and Power of Attorney

- I have a Permission Slip/Waiver on file at Haygood UMC.
- I am enclosing a Permission Slip/Waiver with this registration form.
- Please send me a Permission Slip/Waiver via US mail.

Photograph and Video Release Form

I hereby consent to my child’s name, likeness, pictures or artwork to be used by Haygood UMC. I understand that my child will be under supervision of a Mission Camp volunteer during any photo or video session. I release Haygood UMC from any claim which I may have or which I may assert in the future, arising out of any photographs or videos taken of my child.

Parent’s Signature _____ Date _____

Child’s name (please print) _____

Donations

Mission Camp expenses run higher than what our registration fees can cover. If you would like to make a tax-free donation toward Mission Camp that will cover transportation, supplies, T-shirts, DVD’s and scholarships, prayerfully consider an amount, and you may enclose your donation with your registration fee. You may also send a check to Haygood UMC marked for Mission Camp (*donation in the for line*) to 1015 East Rock Springs Road, Atlanta, GA 30306. Thank you very much for considering this contribution.