



Hilltop Community Church Day Camp 2008 Registration Form

Date:Time:Location: June 16-20 9:00am to 12 noon Hilltop Community Church
Grade Levels: Entering Kindergarten thru Sixth

Please print legibly and fully complete this form to ensure a speedy registration!

Name _____ Address _____
City & Zip _____ Phone(____) _____ Age _____
Date of Birth __/__/__ Sex __ M __ F Grade____ (going into in the fall)
Church _____ Name of Parents _____
Work Phone (____) _____ Emergency/Cell Phone _____
Food/Drug Allergies _____ Insurance Co _____
Policy No. _____ Physician's Phone _____

Emergency Medical Care and Treatment

If it should become necessary for my child to receive medical treatment for any reason, I understand that Hilltop Community Church's medical insurance policy acts in a primary position ONLY when the participant is not already covered by insurance. Consequently, I agree to submit all claims first to my insurance company and then to the insurance for Hilltop Community Church.

I also accept full responsibility for the cost of medical treatment for any injury not covered by insurance. In addition, I authorize and consent to all medical, surgical, diagnostic, and hospital procedures as may be performed or prescribed by a physician to safeguard my child's health, and it is not advisable to take the time to contact me in advance. I waive my right to informed consent for each treatment.

Moreover, I understand that temporary, emergency measures may be necessary to safeguard my child's health and do hereby authorize and request Hilltop Community Church personnel to administer or supervise in such time as my child can be safely transported to a doctor or hospital.

DATE THIS _____ DAY OF _____ 2008

Parental Consent

I hereby give permission for my son/ daughter _____, to participate in the 2008 Day Camp activities and consent and agree to hold harmless Hilltop Community Church, its agents, employees, or volunteer assistants from claims that I (as a parent) might have arising out of my child's participation in this program. I have explained the meaning "hold harmless" to my child, and his/her signature below indicates his/her agreement to do the same. I understand that video and still pictures will be taken at this event and maybe used for promotional use only.

(Parent's/ Guardian Signature)

(Child's Signature)

THIS IS A NO COST EVENT.
HOWEVER WE WILL BE RAISING MONEY
FOR THE ROMANIAN ORPHANAGE
BY HAVING A GIRLS VS. BOYS OFFERING CONTEST.
100% of these monies go to the orphanage!

**Please return this form to Hilltop Community Church
3118 Shane Dr., Richmond, CA 94806
(510)223-2431 ext. 119 Fax (510)223-2451**

Plan NOW to attend Family Night June 20nd at 7:00pm!
Pastor Earl & Tammie Shorrocks