

Please indicate grade level your child just completed: Pre-School 3 \_\_\_\_\_ Pre-K 4 \_\_\_\_\_ Kindergarten \_\_\_\_\_  
Grade: 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ 4<sup>th</sup> \_\_\_\_\_ 5<sup>th</sup> \_\_\_\_\_ 6<sup>th</sup> \_\_\_\_\_

## Memorial Lutheran School Summer Camp

*Both pages of this form must be filled out in full and signed in the appropriate places for your child to be registered for summer! (Please include updated immunization records.) If you are new to our school, you must also provide a copy of your child's birth certificate.*

Child's Full

Name: \_\_\_\_\_

Child's Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parents Divorced: Yes ( ) No ( ) Child Lives With: Mother \_\_\_\_\_ Father \_\_\_\_\_ Both Parents \_\_\_\_\_  
Other \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

During the regular school year my child attends \_\_\_\_\_ School

Please go to our website (or school office) to get a copy of the current Summer Camp Schedule and pricing. The web address is:

<http://www.mlchouston.org/SummerSchedule.pdf>

My child's T-shirt size (please circle): Youth: XS (2-4) S (6-8) M (10-12) L (14-16) Adult: S M L XL

Please include \$5.00 with this application.

Language(s) Spoken In Home: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medications prescribed for long-term continuous use, and/or any other information that staff should be aware of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Transportation:** I hereby give my consent for my child to be transported and supervised by staff on field trips. Parents will be notified as to the field trip destination, the means of transportation, and the time of the field trip. (Limited trips for PS and Pre-K)

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

**Water Activities:** I also hereby give my consent for my child to participate in the following water activities:

Swimming at the Trotter Family YMCA Pool on Augusta Dr. (Kindergarten – 6<sup>th</sup> grade)  
(Lifeguards will make any child not passing the swim test remain in the shallow end)

Splash/Wade Pools (Pre-K and younger) at MLS

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

In case parents cannot be reached, please give alternate names and phone numbers for emergency use:

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

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

Physician: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

My child may be released to the following persons only: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

In the event that I cannot be reached to make arrangements for emergency medical attention, by signing below I give my permission to the Summer Camp Director, or person in charge to take my child to the closest emergency room.

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

By signing below I agree that our family will conform to the regulations of the school and meet the behavior standards to remain enrolled. I agree that Memorial Lutheran School’s summer camp has the right to insist on the immediate withdrawal of any student whose presence in the school is considered detrimental to the student or the school, or for non-payment of summer fees. In the event of absence, withdrawal or dismissal of the student, all accounts become due immediately.

**The undersigned parties are responsible for payment of summer camp tuition and attest that all information on this form is true and correct.**

Please sign and return this agreement to the Memorial Lutheran School office.

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

**Memorial Lutheran School Summer Camp is a Christian summer program designed to enrich each child’s education with activities that allow the child to search and discover new skills and talents. Fun and fellowship with other students of the same age are related goals of this program. Memorial Lutheran School Summer Camp admits students of any race, religion, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school.**