

Foothills Congregational Church
United Church of Christ
461 Orange Ave., Los Altos, CA 94022

Registration Form for FCC Arts Camp

August 1st - 5th, 2011

Child(ren)'s Name(s): _____ Entering Grade: _____ T-shirt Size: _____

Parent's Name(s): _____

Home Phone #: _____ Cell Phone #(s): _____

email: _____ Mailing Address: _____

I give permission for my minor child(ren), _____, to participate in the Foothills Congregational Church (FCC) Arts Camp August 1st through August 5th, 2011. Such participation may include art, photography, music, cooking, dance and active play on the premises of Foothills Congregational Church and walking field trips within the immediate neighborhood. I understand that if FCC determines at any point that they are unequipped to provide for the unique needs of my child(ren) in a manner that is safe for all involved that I will be called to pick up my child. I give permission for Foothills Congregational Church staff and volunteers to photograph my child(ren) participating in these activities and to use my child(ren)'s image and/or their artwork in future publications of Foothills Congregational Church or our ministry partners.

In case of emergency due to serious injury, I give my permission for staff and volunteers of Foothills Congregational Church to authorize any necessary emergency medical or dental treatment until such time as I can be present. I have listed all pertinent medical conditions on the opposite side of this form in the section titled, "allergies, medical conditions and medications." If new medical conditions arise that may affect emergency medical treatment, I agree to inform Foothills Congregational Church by filling out an updated registration Form.

Print name

Signature

Date

Family Name: _____

Emergency Medical Information

Name of Doctor: _____ Phone #: _____

Location of office : _____

Health Insurance Provider: _____ Name of Primary Insured: _____

Medical Record # _____

Name of Dentist: _____ Phone #: _____

Location of office: _____

Health Insurance Provider: _____ Name of Primary Insured: _____

If parents can not be reached, please call: _____

Phone #: _____ Relationship: _____

Please fill out the following information separately for each family member. You may make copies as needed.

Name: _____

Please list allergies, medical conditions, and medications: _____

Please list any Special Dietary Needs: _____

Please list any other information that would be helpful for us to know: _____

Name: _____

Please list allergies, medical conditions, and medications: _____

Please list any Special Dietary Needs: _____

Please list any other information that would be helpful for us to know: _____

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461 Orange Ave., Los Altos, CA 94022
650-948-8430
f461ornage@aol.com

REGISTRATION GUIDELINES AND POLICIES ARTS CAMP August 1st - August 5th

REGISTRATION DEADLINE & DONATIONS

The registration deadline is **May 1st** for priority registration. All late registrations will be considered on a space available basis at the sole discretion of Foothills Congregational Church. A donation of \$135 per child would be appreciated to cover the cost of supplies and staff. This donation will also defray the cost of providing a snack and lunch each day and a T-shirt. If there is more than one child attending from the same household, we request a lesser donation for additional siblings to ease the financial burden for the family. We request \$100 each for additional siblings. Please make checks payable to Foothills Congregational Church.

OUR VISION

We are an Open and Affirming congregation, which means we provide a spiritual home that welcomes each individual as a beloved child of God. We affirm the humanity of all people, welcoming into full life and ministry of the church, people of every ability, age, ethnicity, culture, economic status, gender, sexual orientation and religious belief.

SCHOLARSHIPS

It is important to us that money not be an obstacle to attending any function at Foothills Congregational Church. If you would like to attend, but need a scholarship, please contact Rev. Michelle Webber directly and a scholarship form will be provided to you. Scholarship priority is given to the children of members of Foothills Congregational Church.

WAIT LIST POLICY

We appreciate all interest in our camp and sincerely wish that all who register can attend. Registrations are processed in the order received. In some cases, students may be wait listed due to enrollment limits. You will only be contacted should a space become available and not if the class remains at the maximum enrollment limit.

REFUND POLICY

If you notify us of your inability to attend camp by July 5th, then your donation will be returned to you in full. Between July 5th and 19th, we will return 50% of your donation. We will be unable to refund your donation after July 19th.

ABSENCES

As a courtesy to your shepherd, please notify the office in advance of any absence. 650-948-8430

PHOTO RELEASE POLICY

From time to time Foothills Congregational Church takes photographs of students and/or artwork for possible use in our publications and for funding, development, and public relations purposes. No compensation is provided to individuals who appear in the photographs or for artwork used.

SPECIAL NEEDS/ACCESS

If your child has special needs, please call Rev. Michelle Webber so that we can arrange any possible accommodations.