



Coopers Beach Christian Youth Camp
 154 State Highway 10
 Coopers Beach
www.cbccyco.nz
kidscampsatcoopers@gmail.com



REGISTRATION FORM

Superheroes 10-14 January 2019
for boys & girls aged 9-13 years old

Cost \$90 *Funding is available for 11-13 year olds. Please apply

Name		Gender	M / F
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Age		Date of Birth	
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School attended		Swimming Ability	please tick
Home Phone		Non Swimmer	<input type="checkbox"/>
Work Phone		Beginner	<input type="checkbox"/>
Mobile Phone		Intermediate	<input type="checkbox"/>
		Advanced	<input type="checkbox"/>

Postal Address	
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Email Address	
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Health or Behaviour Info (please tell us everything we need to know to help care for your child and help them have an enjoyable time at camp)	
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Food Restrictions/Allergies (genuine restrictions/allergies only please)	
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Current medication (you will be required to fill in a medication form on arrival should your child be taking medication during camp)	
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Is there anyone not allowed access to your child?	Yes / No
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If "yes" please provide details	
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Name a friend who they would like to be in the same group with	
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Alternative Contact (different from above in case of emergency)	
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Parent/Guardian Declaration	<p>I understand that, whilst all practical care will be taken, neither Coopers Beach Christian Camp, or the camp staff and leaders will be held responsible for injury or damage/loss of property. In the event of a serious injury I understand that I will be contacted immediately at the numbers I have supplied, and I authorize Camp Personnel to seek appropriate and proper medical attention, for which reimbursement may be required. If necessary I will collect my child if it is not appropriate for them to continue staying at camp. I understand that this information will be retained only for the purposes of running camps, and that I may request to see or update this information at any time.</p>
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Parents/Caregiver Name	
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Parents/Caregiver Signature	
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Method of Payment of Deposit \$40	Direct Credit / Cheque / Cash	Amount Paid	\$
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Bank details for Direct Credit	COOPERS BEACH KIDS CAMP 06-0350-0119095-02
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Please post completed & signed form to: Lynley Fleming, P O Box 115, KAEO 0448 .

Once form is received and deposit is made then a confirmation email will be sent to you



EXTRA INFO...

Please do not send your child to camp if they have had vomiting or diarrhea in the 48hrs prior to camp starting

Camp Personnel:

This camp will be run by a full team of adults & student leaders & headed up by Lynley Fleming.

Camp will include Bible teaching times, lots of fun activities, team building skills and an opportunity for children to develop in a safe social context.

We are committed to professional and safe practices and each leader and helper is subject to a vetting process.

Your child's safety will be paramount in all of our planning and activities.

Please contact us if you would like more information or ask any questions.

Registration Process:

To secure a place at camp both the signed registration form and \$40 deposit must be received by the camp director.

If you have applied for a funded spot for an 11-13 year old you will be contacted upon acceptance.

A confirmation email will then be sent to you to say you have a secure booking. No places can be held or reserved.

Registration can also be completed online at www.cbccy.co.nz/our-camps/

What to Bring:

Old clothes/shoes

Sleeping bag, undersheet & pillow

Toiletries & towel

Torch

Pens & coloring pencils

Togs, towel & sunscreen

Drink bottle & sunhat

Bible (if you have one)

Home baking or a packet of biscuits

No alcohol, drugs, cigarettes, knives, cellphones, Ipods/MP3 players or other electronic devices will be permitted on site.

Please do not bring extra lollies or food

Contact Us:

Lynley Fleming

P O Box 115

KAEO 0448

021 336692

Or take a look around the camp facilities at www.cbccy.co.nz