

SAWYERVILLE DAY CAMP @ THE SUNSHINE SCHOOL IN NEWBERN



"Stand by Me"

For ages 6-14

CAMPER REGISTRATION: Sunday, July 12 3:00 pm

CAMP: Monday, July 13- Friday 17 8:30 am-3: 30 pm

CAMP FAMILY DAY: Saturday, July 18 10:00 am- 1:00 pm



PRE-REGISTRATION

1. To reserve your spot in camp, mail this registration for by June 18 to the address below.
2. If your form is received by June 18, you will be sent a confirmation card in the mail. This card will include more information about the camp.
3. Bring this card with you to the Camper registration on Sunday, July 12 at 3:00 pm.

NOTE: If you do not pre-register by June 18, you may register on a space-available basis at the Camper Registration on Sunday, July 12. Space is limited. Pre-registration is recommended.

CAMPER/PARENT ORIENTATION

- Introduction to staff and camp theme
- After camper information is verified each camper will receive a wristband, nametag, backpack, water bottle, and bathing suit.
- **IF YOU DO NOT ATTEND CAMPER/PARENT ORIENTATION, YOUR SPOT MAY BE GIVEN AWAY. PLEASE LEAVE EMILY THORNTON A MESSAGE (205-715-2060 ext 340 or email at thornes0@sewanee.edu) IF YOU HAVE A CONFLICT AND CANNOT BE THERE.**

CAMP FAMILY DAY

Family Day is a worship service and a pot-luck lunch for registered campers and family. Everyone is asked to bring a side dish to family day. We will serve everyone fried chicken.

Information about transportation to camp will be sent with your confirmation card in late June.

Mail forms by June 18 to:
Emily Thornton
905 Church Street
Greensboro, AL 36744
Phone: 205.715.2060 ext 340

Or drop forms off in the indicated drop boxes at the Greensboro, Newbern, Akron, or Sawyerville post offices.

Additional forms are also located at the Newbern, Greensboro, Sawyerville, and Akron post offices.

www.sawyervilleworkproject.org

Please note: camp space is limited. Registration is done on a first come, first serve basis. Try and get your applications in early! DEADLINE IS JUNE 18.

Questions should be directed to Emily Thornton at 205-715-2060 ext. 340.

Please leave a detailed voicemail. Thanks!

If you'd like to volunteer with the Camp and you are over 14 years of age, please contact Leslie Manning, 205.715.2060 ext 325 or email lmanning@dioala.org. Come play with us!

Camp Registration Form

Which camp: July 13-18th (for residents of Greensboro, Akron and Sawyerville) _____

Or

July 21-23 (residents of Newbern and students of Sunshine School) _____

Camper last name: _____ Camper first name: _____

Circle: Male or Female Camper age: _____ Camper birthday: ___/___/___

Address: _____ City: _____ Zip: _____

Parent/Guardian name: _____

Relationship to camper: _____ Camper's t-shirt size: _____

Daytime phone: _____ Night time phone: _____

Camper's school: _____ Camper's Church: _____

Medical conditions, allergies or concerns: _____

Current medications and dose: _____

Insurance: yes ___ no ___

Insurance Company name: _____ Policy number: _____

I hereby give my consent for my child to be photographed (including video photography) by the Sawyerville Work Project staff for purposes of advertising or public display.

(parent/guardian signature)

The undersigned does hereby give permission for my child, _____ to attend and participate in activities sponsored by The Sawyerville Day Camp.

I authorize an adult, in whose care the minor has been entrusted, to consent to any X-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization.

Should it be necessary for my child to return home due to medical reasons or otherwise, the undersigned shall assume all transportation costs.

The undersigned does also hereby give permission for my child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by the Episcopal Diocese of Alabama.

(parent/guardian signature)

Mail form by **June 18** to Emily Thornton, 905 Church Street, Greensboro, 36744 or drop the forms off at the Newbern Post office for mini-camp. There is no cost to the event.