

St. Philomena Day Camp 2025 Registration Form

Camper's Name _____

Likes to be called _____ Date of Birth _____ Age _____

Grade in September 2025 _____

Home address _____ City _____

State _____ Zip _____ How did you learn about the camp _____

Parent/Guardian Information

Parents' Name(s) _____

Cell Phone _____ Email _____

Emergency Contact _____ Phone _____

Transportation: I will be arriving with my _____ (Check-in time is 8:45 am)

I will be picked up by my _____ (Check-out time is 2:30 pm)

Confidential Camper Information:

Health concerns we should know about (please describe)

Food Allergies (list all)

Other (list all) _____

General Expectations: At Camp St. Philomena, trust, communication, honesty, and respect are keys to a successful camp. Although some expectations and rules may be decided within a camp group, there are some that are simply not negotiable that relate to safety, the law, and camp standards. Examples include properly using and caring for all equipment and remaining in the supervision of a staff member at all times. For health, safety, privacy, or other reasons, repeated failure to adhere to such standards may lead to dismissal from camp. The following is absolutely not permitted by campers or staff: Possession of firearms or other weapons, the use and/or possession of illegal drugs or alcohol, and the use of any tobacco products. Disregarding these policies leads to dismissal. Leaving early from Camp is disruptive to morale and schedule. If you choose to leave early you may not return to Camp the following year.

AGREEMENT: We, the undersigned parents (or guardians) of the camper named on this application (hereafter referred to as "the child"), acknowledged that we are aware of the types of activities in which the child will be participating during their attendance at Camp St. Philomena during the 2025 season and that we have been given ample opportunity to ask any questions which we may have about the environment in which the child will participate in the activities during the child's attendance at Camp St. Philomena. We are aware of the risks that are inherent in the operation of my child's camp and in the child's participation in all camp activities on or off the premises of said camp including, but not limited to, hiking, athletics, swimming, etc. We agree to provide current health records upon request. We acknowledge that we have given Camp St. Philomena full disclosure of any physical or mental conditions, challenges, or problems that the child has which might limit their ability to participate in any camp activities or which might endanger any other child attending Camp St. Philomena while participation in camp activities. We grant permission to use any photograph, video, or written material relating to the child in any Camp promotions and on the church website.

Parent or Guardian Signature _____ Date _____

Parent or Guardian Signature _____ Date _____

(If only one signature, consent of the other parent is implied.)

I promise to abide by the rules of Camp St. Philomena, to show integrity, and to participate in a positive manner.

Camper's Signature _____