

**DEADLINE TO REGISTER
IS SUNDAY, JULY 28, 2019**

Camp Registration Form

**COMPLETE ONE FORM
FOR EACH CAMPER**

Makiki Christian Church 'Ohana Camp 2019
Fri., August 16, 10:00 a.m. - Sun., August 18, 2019 1:00 p.m.
The Salvation Army Camp Homelani, Waialua

Last Name:		First Name:	Age (if under 18):
Mailing Address:			<i>Parents must sign reverse side</i>
City :	State:	Zip:	
Phone: Home:		Cell:	
Email:			
Emergency contact:		Phone:	Relation:
Medical Insurance Coverage:		My Doctor's Name:	Phone:

SELECT YOUR ACCOMODATIONS					SUBTOTAL
Friday	<input type="checkbox"/> Cabin (\$26)	<input type="checkbox"/> Tent (\$26)	<input type="checkbox"/> Hale Kai (\$50)	<input type="checkbox"/> Day Visitor Only (\$7)	\$
Saturday	<input type="checkbox"/> Cabin (\$26)	<input type="checkbox"/> Tent (\$26)	<input type="checkbox"/> Hale Kai (\$50)	<input type="checkbox"/> Day Visitor Only (\$7)	\$

SELECT YOUR MEALS				SUBTOTAL
Friday		<input type="checkbox"/> Lunch (\$12/\$7*)	<input type="checkbox"/> Dinner (\$13/\$7*)	\$
Saturday	<input type="checkbox"/> Breakfast (\$9/\$7*)	<input type="checkbox"/> Lunch (\$12/\$7*)	<input type="checkbox"/> Dinner (\$13/\$7*)	\$
Sunday	<input type="checkbox"/> Breakfast (\$9/\$7*)	<input type="checkbox"/> Lunch (\$12/\$7*)		\$
* Reduced meal rate for ages 4-9 only. Ages 0-3 eat free.				TOTAL PAYABLE TO MAKIKI CHRISTIAN CHURCH \$

CAMPER'S ACKNOWLEDGEMENT

- Your full payment is due with this fully completed registration.
- Please make your check payable to Makiki Christian Church.
- No refunds will be issued after July 28, 2019.
- Meals are prepared cafeteria-style by Camp Homelani's staff from a preset menu.
- Personal meal requests or substitutions cannot be accomodated. Please plan accordingly if you have special dietary needs.
- Camp kitchens, including Hale Kai, are not available for personal meal preparations
- Children ages 12 and older will be assigned to a cabin by gender with adult supervision.
- Cabin changes require prior approval by the camp chairperson. Personal requests will be considered.
- Tent campers must bring their own tents.
- All overnight campers must be registered.
- Children under 12 years of age must be accompanied throughout the camp by a parent or guardian.
- Children ages 12-17 not accompanied by their parent or guardian must be supervised by a designated adult chaperone (age 26 or older) willing to accept responsibility for the child throughout the camp (please complete the authorization on the reverse side).

FOR INTERNAL USE	Date rec'd	
	Amt. rec'd	
	Check no.	
	Other	

WAIVER AND EMERGENCY CONSENT

- I understand that Makiki Christian Church does not carry health and accident insurance to cover those who might attend functions sponsored by the Church. It has only liability insurance. When transportation is involved, the insurance held by the driver on their vehicle would apply to those who are passengers. Otherwise, my personal health and accident insurance would apply.
- When participating in any activities, I will exercise the necessary precautions to ensure my own health and safety. I understand that adult supervision is available and intervention measures will be administered when necessary. Furthermore, parents or adult chaperones are responsible for their child's safety and welfare.
- I agree to assume the risk and liability for the people listed on this registration form during the Makiki Christian Church 'Ohana Camp from Friday, August 16, 2019 through Sunday, August 18, 2019 at Camp Homelani, and waive any claim against Makiki Christian Church or its leaders, for liability, loss, or payment of any compensation for any property loss or personal injury suffered or incurred.
- In the event that an emergency occurs and cannot be attended to by first aid, permission is granted to transport me to a hospital.

Camper's Name _____ Signature _____ Date _____

ALL CAMPERS UNDER AGE 18 MUST HAVE THEIR PARENT OR GUARDIAN SIGN THE REVERSE SIDE OF THIS FORM

ADDITIONAL ACKNOWLEDGEMENT FOR PARENTS OF CAMPERS UNDER 18 YEARS OF AGE

Children of all ages are welcome to participate in this camp. However, please note that this camp is for the enjoyment of all families and individuals and is not a camp designated exclusively for young children and teens. There will be no designated youth counselors or chaperones. Every family is responsible for watching over their own children at all times.

If you are not able to attend but would like your children to enjoy this weekend camp, we require that they be chaperoned by a designated adult whom you trust will take personal responsibility for the care and behavior of your children. Both you and your designated adult chaperone must consent to the assignment of responsibility over the duration of the camp. Designated adult chaperones must be at least 26 years of age and can take responsibility for no more than two minor children.

The camp's leadership reserves the right to decline any chaperone requests at their sole judgement.

MY CHILD WILL BE ATTENDING CAMP WITH ME

PARENTS' ACKNOWLEDGEMENT OF RESPONSIBILITY

I grant permission for my child to attend this camp under my sole care and understand that I must be physically present with my child on the camp premises. I agree to the Waiver and Emergency Consent terms stated on the front of this registration form and understand that as a parent, I am solely responsible for the care and protection of my child.

Parent/Guardian Name

Signature

Date

Parent/Guardian Name

Signature

Date

MY CHILD WILL BE ATTENDING CAMP WITH MY DESIGNATED ADULT CHAPERONE

PARENTS' ACKNOWLEDGEMENT OF RESPONSIBILITY

I grant permission for my child aged 12-17 to attend this camp under the care and responsibility of the designated adult chaperone listed on this registration form. I agree to the Waiver and Emergency Consent terms stated on the front of this registration form and understand that as a parent, I am ultimately responsible for the care and protection of my child and am comfortable in placing him/her under the care of the person that I've designated below.

Parent/Guardian Name

Signature

Date

Parent/Guardian Name

Signature

Date

DESIGNATED ADULT CHAPERONE'S ACKNOWLEDGEMENT OF RESPONSIBILITY

I declare that I am age 26 or older and consent to being named the designated adult chaperone of the child listed on this camp registration form. I further understand that I will be held fully accountable for their safety and behavior during the duration of this camp.

Chaperone Name

Signature

Date