

C.U.P.C. APPLICATION '10

Summer Camp / Special Programs

1. Advance Payment for grades 1-7 - six weeks - \$625 per child, paid in total in advance (*BY JUNE 7th, 2010*), for 8th grade - six weeks - \$450 per child, also paid in total in advance (*BY JUNE 7th, 2010*)
2. Weekly Payment for grades 1-7 - \$125 per child. To reserve, send 50% of total registration. Payment in full by June 7th, 2010 for 8th grade - \$90 per child. Also, to reserve a place, send 50% of total registration. Payment in full by June 7th, 2010.
3. Weekly Payment for Extended Sessions, \$150 per child per week.
4. **NO REFUNDS. NO EXCEPTIONS**

<p><i>Complete forms and send with payment to:</i></p> <p>C.U.P.C. Summer Camp 1700 Sutter St. San Francisco, CA 94115</p>	<p>Overnight Trip: Advance payment: \$115 by June 7 2010 . After June 7, the cost will be \$150 . To register for the overnight trip, you must be registered for the week of June 28th - July 2nd.</p> <p>T-Shirts: C.U.P.C. Summer Camp T-shirt can be ordered at a cost of \$10 per t-shirt. To order, please indicate the child's size: S, M, L -- Adult sizes S, M, L, XL, XXL) and include payment with the registration form. T-shirts are 50/50 cotton polyester blend. Replacement or extra T-shirts will also be sold during camp.</p>
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<p style="text-align: center;">CHILD'S NAME:</p> <p>_____</p> <p>Gender: M F</p> <p>Grade in Sept: _____</p> <p>T-shirst (\$10) Size: _____</p> <p>Please Mark Weeks Attending:</p>	<p style="text-align: center;">CHILD'S NAME:</p> <p>_____</p> <p>Gender: M F</p> <p>Grade in Sept: _____</p> <p>T-shirst (\$10) Size: _____</p> <p>Please Mark Weeks Attending:</p>	<p style="text-align: center;">CHILD'S NAME:</p> <p>_____</p> <p>Gender: M F</p> <p>Grade in Sept: _____</p> <p>T-shirst (\$10) Size: _____</p> <p>Please Mark Weeks Attending:</p>
<p>Adv. Payment 6 Weeks: \$625</p> <p>Adv. Payment</p> <p style="text-align: center;">8th Grade Special: \$450</p>	<p>Adv. Payment 6 Weeks: \$625</p> <p>Adv. Payment</p> <p style="text-align: center;">8th Grade Special: \$450</p>	<p>Adv. Payment 6 Weeks: \$625</p> <p>Adv. Payment</p> <p style="text-align: center;">8th Grade Special: \$450</p>
<p>1. 06/14 - 06/18 \$ _____</p> <p>2. 06/21 - 06/25 \$ _____</p> <p>3. 06/28 - 07/02 \$ _____</p> <p>4. 07/06 - 07/09 \$ _____</p> <p>5. 07/12 - 07/16 \$ _____</p> <p>6. 07/19 - 07/23 \$ _____</p> <p style="text-align: center;">Special Programs (\$150/week)</p> <p>Extended Weeks</p> <p>1. 07/26 - 07/30 \$ _____</p> <p>2. 08/02 - 08/06 \$ _____</p> <p>Overnight Trip \$ _____</p> <p style="text-align: right;">Subtotal: \$ _____</p>	<p>1. 06/14 - 06/18 \$ _____</p> <p>2. 06/21 - 06/25 \$ _____</p> <p>3. 06/28 - 07/02 \$ _____</p> <p>4. 07/06 - 07/09 \$ _____</p> <p>5. 07/12 - 07/16 \$ _____</p> <p>6. 07/19 - 07/23 \$ _____</p> <p style="text-align: center;">Special Programs (\$150/week)</p> <p>Extended Weeks</p> <p>1. 07/26 - 07/30 \$ _____</p> <p>2. 08/02 - 08/06 \$ _____</p> <p>Overnight Trip \$ _____</p> <p style="text-align: right;">Subtotal: \$ _____</p>	<p>1. 06/14 - 06/18 \$ _____</p> <p>2. 06/21 - 06/25 \$ _____</p> <p>3. 06/28 - 07/02 \$ _____</p> <p>4. 07/06 - 07/09 \$ _____</p> <p>5. 07/12 - 07/16 \$ _____</p> <p>6. 07/19 - 07/23 \$ _____</p> <p style="text-align: center;">Special Programs (\$150/week)</p> <p>Extended Weeks</p> <p>1. 07/26 - 07/30 \$ _____</p> <p>2. 08/02 - 08/06 \$ _____</p> <p>Overnight Trip \$ _____</p> <p style="text-align: right;">Subtotal: \$ _____</p>

<p><input type="checkbox"/> My child(ren) has attended C.U.P.C. Summer Camp in the past.</p> <p style="text-align: center; color: red;">Important: Remember that a health form must also be included with registration for each child.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Grand Total:</td> <td style="padding: 2px;">\$ _____</td> </tr> <tr> <td style="padding: 2px;">Payment Enclosed:</td> <td style="padding: 2px;">\$ _____</td> </tr> <tr> <td style="padding: 2px;">Balance Due:</td> <td style="padding: 2px;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;">(Due by June 7, 2010)</td> </tr> </table>	Grand Total:	\$ _____	Payment Enclosed:	\$ _____	Balance Due:	\$ _____	(Due by June 7, 2010)	
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(Due by June 7, 2010)									

I would like to receive the Church's monthly newsletter, The Visiting Pastor, to read about the latest events and articles about Christ United Presbyterian Church in Japantown.

Please check your dates and payments carefully before registering with us. In sending payment for C.U.P.C. Summer Camp, you agree to the terms and conditions as stated in this brochure. You understand that **there will be no refunds**, and that there will be **NO EXCEPTIONS** to this policy. You also acknowledge that any weeks not paid for by June 7, 2010 will result in the cancellation of your reservations for those weeks.

C.U.P.C Summer Camp
Parental Permission and Health Authorization

(to be filled out by parent/guardian. One per child. Duplicate if needed)

Camper's Name (Last) (First) (Middle)

Phone

Address

Birthday (Month/Day/Year)

City

Zip

Mother/(Guardian)

Phone (Work)

Work Address/City

E-mail Address

Father/(Guardian)

Phone (Work)

Work Address/City

E-mail Address

Relative/Friend not living with Family in case parent/guardian cannot be reached.

Phone (Home)

Family Doctor and/or Health Plan I.D. Number

Phone

Health History

(Answer yes or no)

_____ Date of last Tetanus shot

_____ Penicillian Allergy

_____ Poison Oak Allergy

_____ Diabetes

_____ Asthma

_____ Insect/Bee Sting Allergy

Indicate any medical conditions or allergies that may affect your child:

If a serious emergency arises, it may be necessary for a physician to attend to your child before the staff can get in touch with your. Such care will be provided only if you sign the "authorization for medical treatment." The statement below must be signed before your child will be accepted at camp.

My child _____ has my permission to attend the CUPC Summer Camp program. I authorize a physician to provide medical care for him/her in any emergency which may occur while participating in the summer camp program.

Signature of parent/guardian

Date

CUPC PICTURE/MEDIA ACCESS FORM

Dear Parent or Guardian,

Throughout the summer, staff and volunteers in the program will be taking pictures of the children. The pictures may be used for one of four purposes:

- Parent's Night Slide Show
- Next year's brochure
- The Summer Camp website
- In addition, there may be times when our Summer Camp Program may be featured in a news story. Reporters, photographers and/or film crews from television or radio stations, newspapers or magazines may wish to interview and/or photograph your child in relation to a story about the church program. Your child's name and the church may be included in the report. Please sign and return the attached form only if you **DO NOT** want your child's picture used in the four areas above.

We will make every effort to honor your request, but please be aware that there may be circumstances when the press may be at a location where our campers will be and may be inadvertently interviewed, photographed or filmed beyond our control.

Check if you don't want your child's picture taken or to have contact with the media.

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PLEASE SIGN AND RETURN WITH REGISTRATION FORM

_____ I DO NOT want my child's picture taken or to have contact with the media while participating in CUPC's Summer Camp Program.

Child's Name: _____

Signature of Parent/Guardian: _____

Date: _____