

# ***Academy Christian School***

129 W. Border Rd., Rock Hill, SC 29730  
[803-327-5673](tel:803-327-5673)/[theacademy@comporium.net](mailto:theacademy@comporium.net)  
Web: [academychristianschool.org](http://academychristianschool.org)

## Camp Courageous Enrollment Form 2020

### **Camper Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ D.O.B \_\_\_\_\_ Full time or part time camper? \_\_\_\_\_

School attending: \_\_\_\_\_ Last grade completed: \_\_\_\_\_

### **Parent information:**

Father/Guardian's name: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Wk: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Mother/Guardian's name: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Wk: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Other children in family: \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Authorized people to pick up camper:

\_\_\_\_\_

\_\_\_\_\_

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## **Religious Information:**

Church attending: \_\_\_\_\_ Pastor: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you or any members of you family made a profession of faith in Jesus Christ? \_\_\_\_\_

If so, list: \_\_\_\_\_

## **Medical Information:**

Does camper have any allergies? (food, insects, environmental, etc.) \_\_\_\_\_

If so, list: \_\_\_\_\_

Does student take any current medications? \_\_\_\_\_

If so, list: \_\_\_\_\_

Is student up to date with all required immunizations for their age? \_\_\_\_\_

If no, please explain: \_\_\_\_\_

Do you authorize the staff at Camp Courageous, of Academy Christian School, to seek medical attention for your child in your absence? \_\_\_\_\_

If no, please explain? \_\_\_\_\_

Are there any activities that your camper is limited to due to medical or physical issues? \_\_\_\_\_

If so, list: \_\_\_\_\_

By signing below, I do hereby state that the above information is to be found true on behalf of the camper registered for the 2020 camping season.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator's Signature

\_\_\_\_\_  
Date

***All enrollment forms are to be turned back in to the school office with a non-refundable \$50 registration fee (this includes 1 camp t-shirt). Summer camp tuition for weekly campers is due by Friday each week. Daily camper's fees must be paid the morning of the day they will be attending. Upon receipt of this form, parents will need to sign a tuition contract before the camper may begin.***