



# 才艺品格营

## Charis Character Camp

### REGISTRATION

Student Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

School \_\_\_\_\_ Upcoming grade \_\_\_\_\_

Has your child previously enrolled in any type of Chinese language learning program?

None  1-2 years  3-4 years  5-6 years  >7 years

Besides the core classes (mandarin, asian cultural immersion, math & music, arts & crafts), please number the top three choices of your child's preferred activities:

Drama  Martial arts  Computer coding  
 Dance  Cooking  Video making

T-Shirt size:  Youth  Adult  XS  S  M  L  XL

Which week(s) are you registering your child for?

Both weeks  Week 1 (June 11-15)  Week 2 (June 18-22)

Early bird registration (postmarked before May 15) \$150 per week.

Regular registration (postmarked on/after May 15) \$180 per week.

Do you need before or after care?  Yes  No

before-care (\$20/week per child):  Week 1  Week 2

after-care (\$40/week per child):  Week 1  Week 2

Total payment due \$ \_\_\_\_\_

Your registration is not completed until we receive all signed forms and payment in order to reserve your spot. All payments are non refundable. Please make your check payable to **Crossroads District**, write "Charis Character Camp" on the memo line, and mail to:

Charis Character Camp

11401 Twisted Oak Road, OKC., OK 73120

For more information, please email: [charischaracter@gmail.com](mailto:charischaracter@gmail.com) or call (405)7FunFun

# STUDENT'S PARENT/GUARDIAN INFORMATION

## EMERGENCY CONTACT INFORMATION

**Contact #1:** Name \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

**Contact #2:** Name \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

## STUDENT'S MEDICAL INFORMATION

Physician's Name: \_\_\_\_\_ Physician Phone #: \_\_\_\_\_  
Medical Insurance Provider \_\_\_\_\_ Policy# \_\_\_\_\_  
Name of Insured Party (Parent/Guardian) \_\_\_\_\_ Phone # \_\_\_\_\_

### Please mark whether the following apply:

Medical restrictions (check one):  Yes  No If yes, please explain: \_\_\_\_\_

Current medications (check one):  Yes  No If yes, please explain: \_\_\_\_\_

Dietary restrictions (check one):  Yes  No If yes, please explain: \_\_\_\_\_

Allergies (check one):  Yes  No If yes, please explain: \_\_\_\_\_

Date of last tetanus shot \_\_\_\_\_

Other medical information \_\_\_\_\_

In case of medical emergency, I understand that every reasonable attempt will be made to contact me or the emergency contact named above. However, in the event that I or my named contacts cannot be reached, I give my permission to the adults in charge of the programs to secure and receive emergency medical or first aid treatment for my child, including transport via ambulance to a hospital if necessary. I consent to the sharing and release of any medical information listed above with the appropriate staff members of the program and/or medical personnel that may be necessary to ensure the safety and wellbeing of my child. I agree to pay for any charges for emergency medical treatment that are not covered by my personal health insurance.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# RELEASE FOR CHARIS CHARACTER CAMP AT CHURCH OF THE SERVANT

**Release and Waiver.** I, the undersigned, hereby acknowledge that certain risks of injury are inherent to any camp's program, including but not limited to participation in recreational activities, a child's failure to follow instructions of supervisors, communicable illness, and independent acts of third parties not under the control of supervisors. I acknowledge that all risks cannot be prevented, and assume those beyond the control of the staff. These types of injuries may be minor or serious and may result from one's actions, or the actions or inactions of others or a combination of both. I will take responsibility to see that my child is prepared for all activities and is in good health each day of the session.

I hereby assume all risks associated with participation in CHARIS Character Camp (CCC) and agree to hold harmless CCC, the Church of the Servant (the Church), its directors, officers, employees, volunteers, et al, from and against any and all claims, damages, demands, action or right of action, losses or liability of any kind or nature which may arise in connection with injuries suffered to my child while enrolled/participating in their program. I have read and understand the above informed consent agreement in its entirety and hereby give my consent for my child to participate knowing all of the foregoing. **Initials:** \_\_\_\_\_

**Photo/Video Release.** I understand that CCC may produce promotional material relating to its activities. As a participant at CCC, my child may be included in videotapes or photographs taken during the camp. I grant to CCC the right to photograph and/or videotape the child and to utilize such videotapes and photographs, the child's name, face likeness, voice and appearance as part of the camp. **Initials:** \_\_\_\_\_

**Transportation.** I certify and agree that I am to pick-up and drop-off my child only at the designated places and times. **Initials:** \_\_\_\_\_

**Rules and Expectations.** I understand that my child must abide by the rules and behaviors expected to ensure everyone's safety and enjoyment of CCC (see attached sheet). Failure to comply with these rules may result in the child's removal from CCC. I will notify the CCC Supervisors immediately of any injuries the child sustains, any inappropriate behavior, or of any incidents of sexual misconduct, harassment or assault. **Initials:** \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Date

# CHARIS CHARACTER CAMP RULES AND EXPECTATIONS

**We want you to enjoy this camp and have a wonderful experience with us. Parents, please review the following guidelines with your child.**

1. Be respectful and courteous.
2. Cooperate and participate in all activities.
3. Be open minded to the Asian culture presented.
4. Give the teachers and teaching assistants your full attention.
5. Refrain from any disruptive behaviors, including talking at inappropriate times.
6. Electronic device and cellphone use are not allowed during class time.
7. Please keep your hands to yourselves during class time.
8. Pick up after yourself and keep the classroom space clean.
9. No form of bullying or harassment will be tolerated. Student will be sent home if such behavior occurs.

*I have read the above Rules and Expectation in detail with my child and we agreed to comply.*

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Camper's Signature

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Date

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Parent's Signature

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Date