

VACATION BIBLE SCHOOL/DAY CAMP

Sponsored by Zion Lutheran Church

426 W. Main Street, Fredericksburg, TX 78624 – (830) 997-2195 – email: zionfbg@gmail.com

Monday-Friday, July 31—Aug 4, 2023

8:00am-3:30pm (FREE)

For youth who have completed grades K-5th

(Drop off in parking lot at 411 W. Austin St, light breakfast served at 8am, lunch & snacks provided)



Cross Trails Ministry Camper Registration Form

One per child, please! Please print.

Name _____ Male/Female _____

Preferred Name _____ Birth Date _____

Address _____

City _____ State _____ Zip _____

Parent/Guardian Name(s) _____

Email _____

Home Phone (_____) _____ Work Phone (_____) _____

Emergency Contact _____ Phone (_____) _____

Home Church _____ City _____

Grade in School 2022-2023 _____ T-shirt Size (circle one) 6-8 10-12 14-16

Any restrictions to physical activities _____

Any allergic reactions (food, drugs, insects, etc.) _____

List any people and their phone numbers who may pick up your child at Day Camp _____

Mail or drop off registration form to the Zion Lutheran Church office at 415 W. Austin St
OR email it to zionfbg@gmail.com.

Registration forms can be found online at www.zion-lutheran.com

RELEASE

I will not hold Cross Trails Ministry or its staff responsible for accidents, claims and damages arising from my or my volunteer's participation in camp activities. I also give Cross Trails Ministry permission to use any photograph/video of me or my volunteer, taken at Day Camp, in future promotional materials for its sites and programs.

I further acknowledge, understand, appreciate, and agree that their participation may result in possible exposure to illness from infectious diseases, including, but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. Participant knowingly and freely assumes all such risks, both known and unknown, even if arising from the negligence of the releasees or others, and assume full responsibility for Participant's participation and exposure.

Parent/Guardian Signature _____ Date _____