



# We look forward to seeing you this summer!

Red, White & Blue Mini-Camp • June 30 – July 2, 2025 (Mon, Tue, Wed) • 9:00am-2:00pm

Space Camp • July 7 - 11, 2025 (Mon, Tue, Wed, Thu, Fri) • 9:00am-2:00pm

• Remember to bring lunch!

## Summer Camp Emergency Information *(all requested information is **REQUIRED** by the State of MN)*

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail: \_\_\_\_\_  
*(Where you can be reached during summer camp hours)*

Parent #1 \_\_\_\_\_ Phone \_\_\_\_\_

Parent #2 \_\_\_\_\_ Phone \_\_\_\_\_

### **Two (2) Emergency Contacts *(other than parents)* are required by MN Department of Human Services**

1<sup>st</sup> Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

2<sup>nd</sup> Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Child's Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Child's Dentist \_\_\_\_\_ Phone \_\_\_\_\_

I have been informed of the above activity sponsored by Zion Pre-Kindergarten and hereby give my consent for my minor child to participate in these activities. I understand that all reasonable safety precautions will be taken by the leader of each activity, and that the possibility of an unforeseen hazard does exist. I further agree not to hold Zion Lutheran Church, Zion Pre-Kindergarten, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the minor listed on this form. In addition, by completing and signing this form, I hereby give permission for photographs of my child to be taken and used for information and/or publicity regarding Zion Pre-Kindergarten. I authorize Zion Pre-Kindergarten Staff to apply provided sunscreen (non-aerosol) to my child. I give permission for occasional use of alcohol-based hand sanitizer by my child. I give permission to Zion Pre-Kindergarten Staff to take my child on supervised neighborhood walking trips.

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