



Registration Form

Kid's Creek Sports Camp

All Children (Pre K - 5th grade)
August 5-7, 2008 from 6:15 p.m. - 8:45 p.m.
Camp Location: Lansing Christian School

Child's Full Name: _____

Birth Date: _____ Grade child will enter in 2008-09 school year: _____

Address: _____

City/State/Zip: _____

Phone #: _____

Parent/Guardian Name: _____

Address (if different): _____

City/Zip: _____

Phone #: _____

Relationship (if not parent): _____

Medical Concerns: _____

Food Allergies: _____

My child is interested in participating in the following activity (please circle one):

Basketball Football (flag) Soccer Softball/Kickball Dance Science projects

*all pre-school aged children will participate in child friendly, fun games.

Medical Consent

I _____ give Sycamore Creek Church permission to treat
(child's name) _____ for any minor bumps and bruises.

Parent/Guardian Signature: _____

Date: _____

*Please hand in form to the Kid's Creek Registration on a Sunday morning or mail the form to:
Sycamore Creek Church
Attn: Kid's Creek
5127 Aurelius Rd. Ste. D
Lansing, MI 48911