

Surfside Methodist
Children's Center
800 13th Ave. N
Surfside Beach, SC 29575
843-238-2734
surfsideumc.org

Summer Registration Form
2018

Date _____ Lil Tots ____ 3 day ____ 5 day Camp (ages 3-5th grade) Promoting to grade _____

Child's Name _____ Date of Birth _____

Parent/Guardian _____

Mother's Place of Employment _____ Work Phone Number _____

Father's Place of Employment _____ Work Phone Number _____

Address _____

Phone Number _____

Mother's Cell _____ Father's Cell _____

Email _____

Emergency Contacts 1. _____

Name Phone #

2. _____

Name Phone #

Allergies _____

Physician's Name _____ Phone # _____

I give permission for my child (or legal ward) _____

To be treated or attended to by authorized medical personnel in the event of an emergency. I, therefore, hold free from liability, Surfside United Methodist Church Children's Center, staff, and all attending medical personnel acting according to the accustomed procedure and rendering general and special medical related treatment on the behalf if and for the goodwill of my child (or legal ward).

Mother's Signature _____ Date _____

Father's Signature _____ Date _____

Permission slips and agreements:

I agree to abide by the rules and regulations stipulated in the SMCC Handbook.

Parent signature _____ Date _____

Appropriate behavior is expected of all children. The school reserves the right to require the removal of any child who will not conform to this standard.

I have read and agree with the above statement.

Parent Signature _____ Date _____

I give permission for my child’s picture to appear on the Church / SMCC web site. I understand no names are to be listed on-line.

YES ____ NO ____ Parent Signature _____ Date _____

Medical Emergency Procedure:

Each child **must** have an “Emergency Contact” card on file before the first day of school. This card **must** have at least three different emergency numbers; i.e. the Mother, the Father, and one other name and number. Parents are responsible to notify the school in writing of any changes during the year.

In the event of a non-serious injury, the SMCC personnel will administer first-aid as per American Red Cross/Heart Assoc. training procedures and contact the parents if any further treatment is necessary. If no contacts are reached in a reasonable amount of time, EMS will be called if deemed necessary.

In the event of a serious injury, the SMCC will immediately contact EMS and a name from the “Emergency Contact Card” and follow the American First-Aid procedures until EMS arrives.

Mother’s Signature _____ Date: _____

Father’s Signature _____ Date: _____

In order to adequately and efficiently provide our summer camp, a 3 day per week minimum fee is required whether your child is attending or not during a given week. All outstanding fees must be paid prior to your child returning. Monies for camp and activities cannot be carried over to another week.