

KINGDOM CASTERS 2023 REGISTRATION FORM

For the safety of your child and our staff and volunteers, all information in the registration packet must be completed in order to participate in camp. Registration should be completed by the parent or guardian of the child to ensure that we have proper and legal documentation on file. Completed registration packets can be given to a CHANGED in Christ Inc. Director or emailed to info@CHANGEDinChrist.org. No fishing license is required for your child as they are only required for ages 17 and up.

Kingdom Casters Day Camps are open to boys between the ages of 12 and 16. Spots are limited and will be filled on a first come first serve basis, with the exception of special circumstances which will be determined by CHANGED in Christ Inc. Parents/Guardians will be notified via phone/email upon their child being successfully registered.

Please select which day camp you would like to sign your boy up for. (selecting a second choice is ideal in case your first choice is filled. You can mark your first choice with a number 1 and your second choice with a number 2)

_____ **June 24**
Registration deadline June 10th

_____ **August 26**
Registration deadline August 12th

_____ **July 29**
Registration deadline July 15th

_____ **September 30****
Registration deadline September 16th

****this date is reserved for boys who have already been to a Kingdom Casters Camp and are returning**

REGISTRATION INFORMATION

Child's Name _____ Child's Date of Birth _____

Parent/Guardian Name(s) _____ Cell Phone _____

Work Phone _____ Email Address _____

Mailing Address _____

Does your child have any known allergies? _____ YES _____ NO (if yes, please explain below)

Will your child need any medications during the day? _____ YES _____ NO (if yes, please explain below)

Does your child carry emergency medications with them? _____ YES _____ NO (if yes, please explain below)

If your child requires special accommodations or has special needs you would like us to be aware of, please explain

Has your child ever been fishing? _____ YES _____ NO (please note: fishing experience is NOT required)

What size shirt does your child wear? _____ S _____ M _____ L _____ XL (Youth Adult)

Please select the items your child will eat so we can plan meals accordingly.

Breakfast: _____ Pancakes _____ Eggs _____ Bacon _____ Sausage _____ Muffin _____ Cereal

Lunch: _____ Hot Dog _____ Hamburger _____ Lunch Meat Sandwich _____ Mac & Cheese _____ Chips

Dinner: _____ Fried Fish _____ Chicken Nuggets _____ French Fries _____ Cookies

EMERGENCY CONTACT INFORMATION

First Emergency Contact:

Emergency Contact Name _____ Relationship to Child _____

Primary Phone Number _____ Seconday Phone Number _____

Second Emergency Contact:

Emergency Contact Name _____ Relationship to Child _____

Primary Phone Number _____ Seconday Phone Number _____

RELEASE OF LIABILITY/EMERGENCY TREATMENT

I, _____, the parent/guardian of _____, hereby release CHANGED in Christ Inc., Kingdom Casters, and all of its affiliates and volunteers from all responsibility arising from any accidents, injuries, and any and all known foreseeable and unforeseeable bodily and personal injuries, including damage to property for my child. I understand that my child will be given the opportunity to fish with authentic fishing equipment from shore as well as from a rowboat, and will be participating in activities within the program. I also give the staff and volunteers of CHANGED in Christ Inc., Kingdom Casters, and all of its affiliates permission to treat my child or seek needed treatment for my child if an emergency occurs with the understanding that I and/or my emergency contacts will be notified as soon as the situation allows. I accept responsibility for the costs of all such medical treatment.

By signing this I am stating that I have read and agree with the above statements.

Parent/Guardian Signature _____ Date _____

PHOTOGRAPHY/VIDEO RELEASE

At times during camp, CHANGED in Christ Inc. / Kingdom Casters may take photos or videos to document the boy's experiences. These photos or videos may be used for advertising or promotional needs. By signing below, you consent that your child's image, likeness, and name may be used by CHANGED in Christ Inc., Kingdom Casters, and its affiliates. You also understand that this may include, but is not limited to, advertisement brochures, documents, videos, web pages, and other digital or print media.

By signing this I am stating that I have read and agree with the above statements.

Parent/Guardian Signature _____ Date _____

Please contact CHANGED in Christ Inc. / Kingdom Casters before signing if you have any questions.

AUTHORIZED PICK-UP

These are the persons, other than the parent or guardian, that are authorized to pick my child up from Kingdom Casters Day Camp. I understand that these persons, including the parent or guardian, may be asked to present identification for the safety of my child.

Name _____ Relationship to Child _____

Name _____ Relationship to Child _____

DROP OFF / PICK UP INFORMATION

Kingdom Casters takes place on Upper Jephtha Lake in Bloomingdale, MI. The drop off and pick up address is:

47407 Dobben Dr, Bloomingdale MI 49026

Boys should be dropped off at 8:30am and picked up at 8:30pm.

WHAT TO BRING

All food, materials, resources, and fishing equipment will be provided. However, we recommend sending your child with sunglasses, sunscreen, and a light jacket or hoodie for the evening.

CHANGED in Christ Inc. / Kingdom Casters is following state/federal recommendations regarding COVID-19. The health and safety of our community is important to us. If you have questions regarding the status of a camp, please contact us.

Contact Information:

CHANGED in Christ Inc. / Kingdom Casters

2015 Sunnyside Drive

Kalamazoo, MI 49048

email - info@CHANGEDinChrist.org

website - www.CHANGEDinChrist.org

phone - 269-888-5320

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