



Children who have completed grades 1 to 5 are eligible to participate.

When: August 9th to 13th, 2021

Where: St. George's Anglican Church
3909 St. George's Ln, Victoria, BC V8N 4E3

Cost: Early Bird Registration (Deadline June 30, 2021)
\$30.00 1st child
\$25.00 2nd child
\$20.00 3rd and additional child

After June 30th, 2021
\$40.00 1st child
\$35.00 2nd child
\$30.00 3rd and additional child

Registration Deadline August 2, 2021

Children with special needs may attend.

Registration forms (with payment) can be returned to:

St. Luke Cedar Hill Anglican Church: 3821 Cedar Hill Cross Rd, Victoria, BC V8P 2M6
Lutheran Church of the Cross Anglican Church: 3787 Cedar Hill Rd, Victoria, BC V8P 3Z4
St. George's Anglican Church: 3909 St. George's Ln, Victoria, BC V8N 4E3

Completed registration forms can also be scanned and e-mailed to amazing4kids17@gmail.com

On line registration form available at: <https://www.iotform.com/build/201096136801246>

Make cheques payable to: Lutheran Church of the Cross. Please write "Amazing Journey" on the memo line.

If you wish to make an e-transfer please contact Lutheran Church of the Cross at lutheranchurchofthecross@shaw.ca or call 250-477-6222

Visit our Facebook page at Amazing Journey Summer Day Camp at:
<https://www.facebook.com/amazingjourneysummercamp/>

AMAZING JOURNEY 2021 REGISTRATION FORM

Child's Name	Pronoun	Date of Birth (YY/MM/DD)	Grade Completed
1.			
2.			
3.			
4.			
Allergies, diet restrictions, or health challenges: (list individually for each child)			
Things we can do to make your child more comfortable at camp:			
Parent(s)/Guardian(s) First and Last Name: Relation:			
Address:			
City:	Postal Code:	Home Phone:	Cell Phone #
E-mail:			
Contact # in case of emergency:	Name:	Relationship:	
	Daytime Phone #:	Alternate Phone #:	
Person(s) picking child(ren) up	Note: Children will only be released to those listed on this form.		
	Name:	Name:	
	Phone #:	Phone #:	
How did you hear of this program?	Church _____ Which Church? _____ (Pre) School _____ Which (Pre) School _____ E-Mail _____ Advertising _____ Where? _____ Friend _____ Attended Previous Years _____ Other (Specify) _____		
I <u>GIVE</u> permission for my child(ren) to be part of the Amazing Journey Program ____ Photograph/Video permission: We intend to take pictures and video recordings during this event to be used for future promotion, including newsletters and our websites. I <u>GIVE</u> permission for my child(ren) to be photographed/video recorded ____ I <u>DO NOT GIVE</u> permission for my child to be photographed/video recorded ____			
Signature of Parent or Guardian			Date
Office Use Only	Paid _____	Amount Paid _____	Payment Format _____