

## **NJ Promise Church**

150 Grand Avenue, Leonia, NJ 07605 www.njpromise414.com (201) 461-2600

## 2025 Summer Camp Registration Form

Registration	No.	(접수번호`	):	

♦ Must fill out one application per child (두 명 이상의 자녀분이 계실 경우, 등록신청서를 따로 작성하셔야 합니다)

Student Name (이름)	Korean (국문): English (영문):			Gender (성	별): M남 F여		
DOB (생년월일): /	/ (mm/dd/yy)	( ) Grade in September 2025 금년 9월에 올라갈 학년		New Studen	t Returning Student		
Address (주소)				Need tax exem	npt letter □ Yes □ No		
Parent/Guardian Contact Information (보호자 연락처)	Mother/Guardian (어머니/보호	Father/Gua	Father/Guardian (아버지/보호자):				
	Phone # (전화번호):	Phone # (3	Phone # (전화번호):				
	E-mail:	E-mail:	E-mail:				
Emergency Contact (긴급 연락처)	Name (성명):	Phone # (전화번호):		Relationship (ᢋ	Relationship (관계):		
Siblings attending this summer camp	Name (성명):	명): Grade (학년):			DOB (생년월일): / /		
summer camp (여름학교 출석 형제)	Name (성명): Grade (학년):			DOB (생년월일	DOB (생년월일): / /		
Church Attending (출석 교회)	1) Church (교회): 2) Dot attending any church						
	T-shirt Size: Small Medium Large  Adult Small Adult Medium Adult Large						
	SUMMER SCHOOL						
	Registration		First Child	Second Child	Third Child		
	Fee	e \$1,300		\$1,200	\$1,100		
Designation (트로)	EXTENDED CARE						
Registration (등록)	Academics/STEM/Art & Music/Sports			\$800			
	Please make check payable to: NJ Promise Church REFUNDS (환불) In the case of your child not being able to participate in this program under any circumstance, we reserve the right to offer partial refund by date:						
PARENTAL/GUARDIAN RELEASE AND PERMISSION  In consideration of NJ Promise Church allowing the participant to participate in Summer Camp, I, the undersigned, do hereby release, forever discharge and agree to hold harmless NJ Promise Church, its pastors, directors, volunteers or employees from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the Participant while involved in activities. I, the parent or legal guardian of this participant hereby grant my permission for the participant to participate fully in activities.  Furthermore, I, on behalf of my minor participant, hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein. I hereby allow Summer Camp to take pictures (still or video) of my child and grant permission for these images to be used in church publications, presentations, publicity or promotions. I also give my consent to the church to make, reproduce, edit, broadcast or rebroadcast any video film, footage, sound track recordings and photo reproductions of my child for publication, display, or exhibition.  I have read this release and permission and approve of its terms.							
Parent/Guardian Signature (보호자 서명): Date (날짜):							

## **FOR OFFICE USE:**

Date Received	Check #:   Cash	Medical Release Form	UCHR & IMM
/ / 2025	Amount: \$	/ / 2025	/ / 2025