

(complete **ONE** form per child) Additional forms & information available at: trinitysanrafael.org/children)

This Christian Summer Camp Program is designed for children ages 3 to 12 years.

*ALL children must be able to function in a group setting *ALL children must be potty trained

Please direct questions to Dave Levy
@ (415) 233-2695 or davedce@gmail.com

Trinity Lutheran Church
333 Woodland Avenue
San Rafael, CA 94901

COST:
\$50 per student
for Bible Camp (9 am-12 pm)

Child's Name: _____ Group # (camp use only) _____

Street Address _____

CITY _____ ZIP _____

Cell Phone _____

Parent 1: _____ Phone # to reach Parent 1 during VBS _____

Parent 2: _____ Phone # to reach Parent 2 during VBS _____

Age _____ Birth Date _____ Grade in the Fall _____ School _____

e-mail _____

Name of special friend your child would like to be with _____

Person(s) scheduled to pick up your child [if different from parent(s)] _____

I hereby grant permission for (child) _____ to participate in "RAINFOREST FALLS" activities sponsored by Trinity from AUGUST 3 – 7, 2026 from 9:00am to 12:00pm and to receive any necessary emergency first-aid, medical or surgical attention in the event of accident or illness.

Participation will grant permission to take photographs and video of your child that may be used for any lawful purpose, such as publicity, illustration, advertising, and web content. Please contact Dave Levy with any questions.

Are there any special accommodations or allergies we need to consider for your child?

Signature (parent or guardian): _____ Date _____

Emergency contact [if parent/guardian(s) are unavailable] _____

Relationship to child _____ Phone # _____

I am interested in helping with Trinity's "RAINFOREST FALLS" - Bible Camp

Name _____ Phone _____

I prefer to assist with (circle your options):

Tech | Snacks | Games | Crafts | Preschool | Crews | Other: _____

Elementary-aged EXTENDED PROGRAM is also available from 12:00 pm to 3:00 pm at \$150 per student. Details on a separate form.

