

Medical Release

(for each registered child)

I hereby authorize Edwards Road Baptist Church Weekday Early Education program staff to secure medical attention for my child, _____ in case of serious illness or accident. I will assume full cost of said medical treatment and will not hold Edwards Road Baptist Church or the Weekday Early Education Program financially responsible for these costs. I do hereby release Edwards Road Baptist Church, Weekday Early Education Program, their staff and/or volunteers from any and all claim and liabilities of whatsoever nature both individually and collectively, that may arise from my child participating in activities at the Weekday Program of Edwards Road Baptist Church.



Edwards Road Baptist Church Weekday program admits students of any race, color, and national or ethnic origin.

DSS registration #266

Parent Signature _____

Date _____

Subscribed and sworn to before me

this _____ day of _____ 2017

State of South Carolina County of Greenville

Notary Public _____

My commission expires _____

*****Medical release to be notarized*****

Edwards Road Baptist 5 weeks Summer Camp

July 11, 2016 thru August 9, 2017
Tuesdays and Wednesdays
9am – 1pm



For age 2 by Sept.1 thru entering 1st grade

Options

All 5 weeks = Tues. and Wed. (10 days) = \$250

Pick 4 weeks = Tues. and Wed. (8 days) = \$200

864-292-0194

www.edwardsroadpreschool.org

rblackwelder@erbc-sc.org

What will we be doing??

Bible Lessons ** Games ** Crafts

Special Theme Days ** Mid morning snack

Lunch (bring your own) ** NO NAP

All activities take place on the church campus

\$75 non-refundable deposit

Due by March 24, 2017
with application

additional applications at WEE office
(deposit applies to fee)

Balance

\$175 or \$125 due by May 5

10 days = \$250

8 days = \$200

Tuesdays AND Wednesdays

JULY 2017

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31	July Holidays Independence Day - 4				

AUGUST 2017

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

return this form to WEE office

Application for ☀Summer☀ Program

Edwards Road Baptist WEEKDAY

July 11, 2017 thru August 9, 2017

9am – 1pm

Tuesdays & Wednesdays

Age 2 by 9-1-17 thru entering 1st grade

**New families, please submit current DHEC immunization certificate

Today's date _____

Child's name _____

Allergic to: _____

Child's birthdate _____

Parent's names _____

Home Address _____

City, state, zip _____

Cell phone _____ - _____ - _____

Network: AT&T, Sprint, T-mobile, Verizon, other _____

Email _____

Emergency Contact #1 _____ phone _____

Emergency Contact #2 _____ phone _____

\$75 deposit (due on March 24, 2017 applies toward summer fee)

Balance (\$175 or \$125) due May 5, 2017

Select registration options: My choice



_____ all 5 weeks – \$ 250 (10 days)

_____ 4 weeks - \$200 (8 days): (circle absent week)

July 11, 12; 18, 19; 25, 26; Aug 1, 2; 8, 9

***** SIGN MEDICAL RELEASE ON BACK *****