



**FEBRUARY 10TH-11TH**

**(K-5TH GRADE)**

# **GIRLS SMALL GROUP SAFARI**



**Emergency Contact Name:**

**Phone:**

**Name of health insurance carrier:**

**Group no.:** \_\_\_\_\_ **Agreement #:** \_\_\_\_\_

**Medical & Liability Release** - In the event of sickness, injury, or some medical emergency, I/we request that my/our child receive medical attention or treatment deemed necessary. Therefore, I/we the parent(s) / guardian(s) give permission to any hospital, doctor, and/or health care provider to transport, treat, and/or admit for care my/our child. In the event that I am/we are not present at the time of the emergency, my/our child's care had been entrusted to the staff and designated ministry leadership of Kenosha First Assembly of Kenosha, WI, while attending the 2012 Girls Safari Excursion/Sleepover.

I/we also release Kenosha First Assembly, its agents, assigns, staff, employees as well as volunteer workers from any liability whatsoever arising out of property damage or loss as any injury, sickness or death which may be sustained by my/our child as the result of any participation in the 2012 Girls Safari Excursion/Sleepover.

**Photo Release** - I grant to KFA, its representatives and volunteers the right to take photographs of my child at the 2012 Girls Safari Excursion/Sleepover. I agree that KFA may use such photographs of my child with or without her name. KFA may use such photographs of my child for such purposes as publicity, illustration, and advertising.

**Signature of Parent(s) / Guardian(s):**

**Date:**

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# 2012 AFRICAN SAFARI

**Who: All girls K-5th Grade**

All moms are invited to attend this night of fun. If you have a daughter in Kindergarten - 2nd grade and they choose to spend the night then you must stay with them.

**Where: Kenosha First Assembly**

**When: February 10th/11th**

**Cost: \$10 each girl**

**Check-in: 6-6:30pm, Fri. the 10th**

**Pick-up: 10pm on Friday or 9am on Saturday**

(Check in and out at Children's Information)

**All forms must be turned in no later than February 1st!!**

**Parent's Name** \_\_\_\_\_

CHILD'S NAME	Grade	Safari Excursion (pick up at 10pm on 2/10)	Extended Safari Excursion (pick up at 9am on 2/11)

Allergies, Medications, Special Instructions:

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Allergies, Medications, Special Instructions:

MOTHER ATTENDING	Safari Excursion (leaving at 10pm on 2/10)	Extended Safari Excursion (leaving at 9am on 2/11)

Allergies, Medications, Special Instructions:

Amount Paid \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ Date \_\_\_\_\_ Rec. By \_\_\_\_\_