

Morning Star Farm Ministries, Inc.
“Where Faith, Family and Nature CONNECT”

2018 is the “**Year of Celebration of God’s Goodness!**” We are excited to offer three choices for camp at the farm this year.

The “*age-appropriate*” fun activities and learning experiences include: Paddle-Boats, Fishing, Nature Walks, Horse Education & Guided Horse Rides, Playground fun (swings, building sand castles) Gardening, Volleyball, Crafts, Hayrides, and making new friends with others and our farm animals.

2018 Schedule of MSFM Kids Day Camp
Camp 1: June 18-22, Camp 2: June 25-29,
Camp 3: July 9-13, Camp 4: July 16-20,
Camp 5: July 23-27 Camp 6: July 30-August 3.

Info to Know:

Each week is open to students who have completed kindergarten through 8th grade. Students are asked to bring their own packed lunch each day. Beverages & snacks provided. Please have your student wear/bring tennis shoes if they plan on horseback riding. (Please be advised that students are to wear a safety helmet while riding horses.)

Registration Fees:

1. **First student is \$75.00 per week, Second student (in same family) \$65.00 per week.**
2. **Half Week (2 1/2 days) \$40.00 per student (no discounts)**
3. **Friday Evening Camp (6:00 - 9:00pm) \$10.00 (reduced in celebration of our 10th Anniversary) per camper with parent/adult FREE! Dates: June 15, July 6, and August 10.**

Each registration for full weeks of camp will receive a \$10.00 discount for each camper in celebration of our 10th year of operation of Morning Star Farm Ministries. To get the \$10.00 discount please register by July 23, 2018. This discount is our way of saying, “Thanks” and we have not increased our fees for day camps in the last four years.

Note: In order to reserve a spot for your student, please remit a minimum of \$25.00 of registration (which is non-refundable) and the balance must be paid one week prior to the start of the camp week..

You may register two ways: (1) Go to our website, download the form and e-mail to us. You may pay your tuition online (through PAYPAL) under donation (making note that it is for Day Camp. (2) Mail your completed registration form along with your check (made payable to Morning Star Farm Ministries) to Morning Star Farm Ministries, 9241 Friendsville Rd., Seville, OH 44273.

The MSFM team is looking forward to having your child/children with us this summer!

Any questions, please contact Denise Shauger, Activities Director of MSFM at 330-618-8056 or by e-mail: Suomian@aol.com

**Morning Star Farm Ministries 2018
Kids Day Camp Registration Form**

(Registration form must be completed for each child)

Name _____ Male ___ Female ___

Street Address _____

City _____ State _____ Zip _____

Phone: Home () _____ Full Birthdate: _____

Grade entering in Fall: _____ Child resides with: _____

Custodial parent is: Mother ___ Father ___ Both/Shared ___ Other _____

MSFM T-Shirt Size (S-M-L) Child _____ Youth _____ Adult _____

Date of Camp Week: 1st choice _____ 2nd Choice _____

Please complete the following Health Report (a physician's signature is NOT required.) Check any of the following conditions that apply to the student. In the space provided, please add any information that you believe would be helpful:

Asthma ___ Diabetes ___ Seizures ___ Other _____

Explain: _____

Allergies: Hay fever ___ Insect Stings ___ Ivy Poisonings ___ Food _____

Describe allergic reaction: _____

Additional Medical Information: ALL MEDICATION MUST BE IN ORIGINAL CONTAINERS.

Medications(s) _____

Any snack restrictions? _____

Date of last tetanus shot ___/___/___

Medical Problems and/or Behavioral Issues? (please provide the best way you'd like us to help your student have a great time with us & the other students.)

Parent/Guardian

Name _____
Address: ()Same as child ()Other
Street: _____
City: _____ Zip: _____
Phone 1 () _____ Home__ Cell__ Work__
Phone 2 () _____ Home__ Cell__ Work__
Email: _____

Parent/Guardian

Name _____
Address: ()Same as child ()Other
Street: _____
City: _____ Zip: _____
Phone 1 () _____ Home__ Cell__ Work__
Phone 2 () _____ Home__ Cell__ Work__
Email: _____

Additional Emergency Contact

Name _____
Home Phone () _____
Work Phone () _____
Cell Phone () _____

Medical Authorization: I hereby authorize qualified camp personnel to give emergency medical care and determine the need for a physician’s service. I understand that every attempt will be made to contact me before treatment is rendered.

Other instructions: _____

Activity Release:

I understand that parts of these activities may be physically or emotionally demanding. I affirm that I (or the participant) am in good health and am not under a physician’s care for any undisclosed condition that bears upon my (or their) ability to participate in this activity. I recognize the inherent risk of injury or disability and understand that each participant must assume the risk of physical injury that could result. I release Morning Star Farm Ministries, Inc., it’s staff members, volunteers, and Board of Directors from any liability for any injury resulting from participation in these activities.

Parent/Guardian Signature: _____

Date: _____

For Office Use:

Check/Money Order Enclosed? _____

(Yes) ____ (No) ____ (when payment will be made?)