



**Take me out to the ballgame!**

**And other sights in DC...**

**3 Day “Mini” Field Trip Camp**

**July 30<sup>th</sup> – August 1<sup>st</sup>.**

**What?** - 2 days touring museums in our  
nation’s capital

1 day at Nationals’ Park (Nats vs Mets)

**Who?** - **Current** 3<sup>rd</sup> to 6<sup>th</sup> graders

**How?** - Transportation by Metro – drop-off/pick-up at  
Braddock Rd. – Mon. & Tues. 9:30-3:30; Wed. 9:30-4:30

**Cost?** - \$250 per camper with a \$100, non-refundable  
deposit

**Looking Froward to Touring DC With Your  
Children!**

**Registration form is on the back>>>**

**Jeannette Stoiber – [Jstoiber@bssva.org](mailto:Jstoiber@bssva.org)**

**Carolina Henriquez – [Chenriquez@bssva.org](mailto:Chenriquez@bssva.org)**

# REGISTRATION FORM – “MINI” FIELD TRIP CAMP

Please print all the information clearly. Turn in the form, to the school office with the deposit, in an envelope marked “MINI” **FIELD TRIP CAMP – ATTENTION: JEANNETTE STOIBER**

Child’s Name: \_\_\_\_\_ Age \_\_\_\_\_ D.O.B. \_\_\_\_\_

Parent/Guardian’s Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Emergency Contact (Name) and Phone: \_\_\_\_\_

\*\*\* T-shirt size: **YOUTH: S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_**      **ADULT: S \_\_\_ M \_\_\_ L \_\_\_**

\*\*\* Metro fare card is included in the price of the camp

\*\*\* Campers will need to bring their own lunch & drink or bring money to purchase them.

\_\_\_\_ Enclosed is a check for \$100 per child as a **non-refundable deposit fee.** I understand that the remaining balance is due on or before the first day of camp.

\_\_\_\_ Enclosed is a check to cover the entire camp fee. Should I decide I no longer want my child to attend camp, before the first day, **all but \$100 will be refunded. If I cancel after the first day of camp, I understand that there will be no refund.**

**PLEASE CHECK:**    “Mini” Field Trip Camp \_\_\_\_\_

If you have any questions or concerns, please feel free to email Jeannette Stoiber – [jstoiber@blessedsacramentcc.org](mailto:jstoiber@blessedsacramentcc.org).

### Parent/Guardian Consent:

I give my child permission to participate in the field trip camp indicated above. I have no knowledge of any physical impairment which would keep my child from participating in the camp’s program. Upon signing this form I agree that in the case of an accident while participating in Blessed Sacrament Field Trip Camp, I release the camp, the camp director and counselors, Blessed Sacrament School and other educational facilities that may be used for camp from any and all liability.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Check here to give us permission to use your child’s image for “in house only” promotional flyers.