

**Summer Alternative Break at Overlook Farm Application
The First Church of Nashua, NH**

For office use only:

Date/time application received: _____ Deposit payment: \$25.00 paid

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (home) _____ (cell) _____

E-mail _____

Date of Birth _____ Grade _____ (Fall 2012) Gender (circle one) M F

Parents/Guardians Names _____

Phone number(s) _____

Email(s) _____

Have you ever participated in any Summer Camps or Service Learning opportunities?
If yes, please detail:

Why are you interested in participating in this trip? _____

I understand the following: (please initial)

____ I am responsible for paying/raising the agreed upon financial support

____ I am responsible for attending team meetings in preparation for the trip

Health Information

Please describe your general health condition: Excellent _____ Good _____ Fair _____

Do you have any allergies? Yes No (If yes, please explain) _____

Do you have any physical challenges? Yes No (If yes, please explain)

Do you have any emotional challenges? Yes No (If yes, please explain)

Dietary Restrictions? Yes No (If yes, please explain)

Medications:

Emergency Contact Information for while you are on the trip

Contact _____ Relationship _____

Address _____

City _____ State _____ Zip _____

Telephone (home) _____ (cell) _____

Email _____