



A weekend overnight camp. June 14th - 16th 2024.

Camp Sunrise is founded on the understanding that every child deserves the opportunity to grieve in a safe, supportive, and understanding environment. With loving support children grieving a death can share their experience with acceptance as they move through the healing process. Support for parents and caregivers will further enhance the grieving child's journey to health.

Camp Sunrise Registration Form

Complete and email to Kat@hospiceofredmond.org or mail to
Camp Sunrise - 732 SW 23rd - Redmond, OR 97756

Camper's Name: _____ Nickname _____

Camper's address: _____

City, State, & Zip: _____

Phone Number: _____ Date of Birth: _____ Current age: _____

child's med child's large child's x-large

Camper Gender / Pronoun _____ **Camper's T-shirt Size:** adult med adult large adult x-large

Name of Deceased: _____ & relationship to child: _____

Date of Death: _____ Cause of Death: _____

Parent/Legal Guardian Name: _____

Best Way to Contact Parent/Guardian: _____

Email address: (helpful but optional) _____

How did you hear about Camp Sunrise? _____

YES! (Check all that apply)

I am willing and desire my child/ward to participate in Camp Sunrise and authorize him/her to participate in all camp activities including hiking.

I authorize my child/ward to receive emergency medical care as needed while at camp.

I authorize Camp Sunrise to use photographs of my child/ward in the promotion and publicity of Camp Sunrise with the understanding that my child/ward's name will be withheld.

By signing below, I understand that it is required for me to attend a pre-camp interview, and to attend Parent Orientation the first week.

By signing below, I also understand that I am responsible for transporting my camper to and from Camp Sunrise held at Suttle Lake UMC.

Signed: _____ (Parent/Guardian) Date: _____

To ensure your child's reservation please return as soon as possible. Camp Sunrise is filled on a first come first served basis.