



Bethlehem Enrichment Academy  
Summer Enrichment Program  
July 7-18, 2025  
Registration Form

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Student Name: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ \*Sex: \_\_\_\_\_

\*Race/Ethnicity: \_\_\_\_\_

**Note: \*Gender, Race/Ethnicity identification is for statistical purposes only.**

Current School: \_\_\_\_\_

Grade Completed 2024-2025 School-year: \_\_\_\_\_

List some of the subjects or activities that interest you.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Allergies/Medical/Special Needs Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Parent Info:

Child lives with: Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Guardian \_\_\_\_\_

Other: \_\_\_\_\_

Parent or Legal Guardian: \_\_\_\_\_

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Place of Employment: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email \_\_\_\_\_

Parent or Legal Guardian: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email \_\_\_\_\_

Provide the name ('s) of person ('s), other than the parent, allowed to pick up the student.

Name	Relationship to student	Phone Number
1. _____		
2. _____		
3. _____		
4. _____		

**CHURCH INFORMATION:** (If applicable):

Name of Church Attending: \_\_\_\_\_  
Pastor: \_\_\_\_\_  
Church Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_

Tee-Shirt Size: \_\_\_\_\_

**ACTIVITY/FIELD TRIP PERMISSION FORM**

I give my child, \_\_\_\_\_ permission to attend all FIELD TRIPS/ACTIVITIES/ SPORTS planned by Bethlehem Baptist Union Summer Enrichment Program. Bethlehem Baptist Union, Inc. will take every reasonable precaution to keep your child safe; however; Bethlehem Baptist Union, Inc. does not assume legal responsibility for circumstances beyond its control.

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

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## Parental Consent for Release of Student Photograph and Media Information

I hereby give permission for Bethlehem Baptist Union, Inc. to use my child's photograph, video image, writing, voice recording, name, grade level, school name, description of participation and statistics in officially recognized activities and sports, diplomas and awards received, in annual yearbooks, newspapers, graduation programs, playbills, school productions, web sites, etc and/or similar school publications or in school approved news media interviews, articles and photographs. I understand that, without my signature, my child's name and photograph cannot and will not be included in any publications or presentations, including a school yearbook.

----- Date -----  
Signature of Parent/Guardian

**Summer Enrichment Program Fee: \$0.00 (The Program is Free to All Students)**

### **Please Note:**

1. The Summer Enrichment Program will apply only to students who will be in the 6<sup>th</sup> – 9<sup>th</sup> grade in the 2025-2026 school year.
2. The program will be held from July 7-18, 2025 at the Bethlehem Baptist Union Building, located at 5556 Carolina Highway, Denmark, SC, from 9:00 AM – 3:00 PM.
3. Students and Parents should complete the Registration Form and email it to [lenbrooker@centurylink.net](mailto:lenbrooker@centurylink.net) or mail to the address below by June 15, 2024:

Bethlehem Baptist Union  
P. O. Box 277  
Denmark, SC 29042

4. Registration can also be completed online at Bethlehem Baptist Union website at [www.bethlehemunion.org](http://www.bethlehemunion.org) and should be submitted by June 15, 2025.
5. If you have any questions about the program or the registration process, please contact Lenon Brooker, Program Director by email at [lenbrooker@centurylink.net](mailto:lenbrooker@centurylink.net) or by phone at (803) 571-1296.

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