

(Please Print)

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Gender: _____ Age: _____ Birthdate: _____ Grade in 2008-2009: _____

Parent or Guardian Name(s): _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Emergency Contact: _____ Relation: _____

Phone: _____

Church Name & City: _____

Amount Paid By Church: _____

Camp Information

Camp Program: _____ (ie Mini Camp) Sport (Christian Athlete Camp):

Dates: _____

1 or 2 Cabin Mates: _____

(Up to two cabin mates can be requested when they EACH request each other! We do our best to grant your rooming request. Note: Cabin assignments are made prior to arrival at camp.)

Invited By: _____ Siblings attending: _____

Payment Method:

Check: _____ Credit Card: _____ Credit Card Number: _____

3 Digit Security Code: _____ Expiration Date: _____

Our child has permission to take part in all camp activities under supervision, and we agree that the camp or its personnel will not be help responsible for accidents arising while here. I also give permission for the use of photographs, video, and electronic images including my child or family in camp promotions.

Parent or Guardian Signature: _____ Date: _____