

2022 SUMMER REGISTRATION FORM

*Asterisks indicate required answers. You must fill out all required answers for your registration to be processed.

CAMPER QUESTIONS

*First name _____ *Last name _____ *Gender Male Female
*Date of birth _____ *Grade _____ *Email address _____
As of the 2022-2023 school year
*Phone number _____ *Address _____
Street/PO Box
School _____ City _____ State _____ Zip code
Home church _____

Roommate Request Policy

We try to accommodate as many roommate requests as possible. We can only put two campers who know each other in the same cabin. However, we can only do this when both campers are the same grade or one grade apart and when both campers request each other on the registration form. Sorry, but we are limited to one request per camper and we are unable to process requests at check-in.

Roommate request (only one) _____
First and last name of one person either same grade or one year apart

MEDICAL FORM

Health or behavioral conditions _____

Dietary restrictions or allergies (Please include the severity of the allergy/restriction) _____

Special Diets: If you indicate that your camper has dietary needs, we will contact you before their week of camp to let you know how we handle their specific situation. Please note, we are a nut free camp, so we ask that substitutions not include nuts.

Other allergies _____

Medications taken regularly _____

Important note: Please bring medications in their original containers!

*Date of last tetanus shot _____ *Insurance Company _____
Write "none" if not immunized
*Doctor's name _____ *Policy number _____
*Doctor's number _____ Emergency contact phone _____

PARENT/GUARDIAN QUESTIONS

*First name _____ *Last name _____ *Gender Male Female
*Date of birth _____ Phone number _____
Address Check if same as camper address

Street/PO Box

City

State

Zip code

