



Camp Registration 2018

(Revised MAR 18)

Circle the week of camp that you would like to register for:

Discovery Camp- 1st-6th- July 9-14 - \$125

Biblical Leadership Training - 7th-12th- July 16-21 - \$125

Canoe Camp - 9th-12th- July 23-28 - \$150

Name: _____

Age: _____ Grade: _____ Sex: M F Home Phone #: (____) _____

Address: _____ City/State: _____ Zip: _____

Emergency Contact name & phone #: _____ (____) _____

Parent/Guardian email: _____

Dr.'s Name: _____

Insurance Company and policy number: _____

Current medication used: _____

Known allergies to food or medication: _____

Legal Agreement

I hereby give my permission for the above named person to attend this camp and participate in all activities. I also give my permission for the staff of Clark Canyon Bible Camp to seek and administer medical assistance by a qualified medical provider in the event that these services are needed. I understand that I will be contacted immediately if any medical assistance is necessary. I also give my permission to Clark Canyon Bible Camp and its affiliates to use photos or video of the above named person in promotional material. I understand that no personal information will be used in conjunction with these materials.

Signed Parent/Guardian:

Name: (print) _____

Signature _____ Date: _____

Return completed registration with \$25 deposit to address below by June 23. Registrations received after this date will be charged an additional \$10 fee. Thank you!