# **2023 SUMMER CAMP REGISTRATION**

(Make copies of this form to register more than one camper)

## CIRCLE CAMP(S) YOUR CHILD WILL ATTEND:

		After June 1
TEEN CAMP	\$160	\$175
JH CAMP	\$150	\$165
JUNIOR A	\$105	\$120
JUNIOR B	\$150	\$165
JH GIRLS CAMPOUT	\$80	\$95
JUNIOR C	\$140	\$155
BOY'S CAMP OUT	\$ 105	\$120
JUNIOR GIRLS CAMP	\$130	\$145
HS CAMPOUT	\$120	\$135

Make check payable to CAMP ASSURANCE Send enclosed registration and payment to: Suzy Gonzales PO Box 101

Allen, NE 68710

PREREGISTRATION WORKSHEET		office	
REGISTRATION FEE			
SPEAKER OFFERING			
\$15 Fee Per Camper After June 1			
TOTAL FEES			
Office use only DATE REG. RECEIVED/20 CHECK NO Name:			
Male Female Birth Date// Age at camp Grade Completed			

Mailing Address		
City, State, Zip		
e-mail (optional)		
Parent's Names		
Home Phone ()		
Emergency Phone ()		
Home Church		
If a church or organization is paying fees:		
Scholarship Donor		
Contact Person		
Phone		
Scholarship Amount \$		
Fees scholarship covers		
Circle T-shirt: Size YS YM YL YXL		
AS AM AL AXL A2XL A3XL		
MEDICAL INFORMATION		
Tetanus Shot Up to Date?:YESNO		
Allergies		
Medications		
Bunk Request		

## PARENT/CAMPER STATEMENTS

I understand that our personal insurance is the primary coverage for my child and that each camper is covered by limited insurance. In case of emergency I give the camp permission to prescribe medication and secure treatment for my child's care. The camp will contact me as soon as possible. I will not hold the Camp Assurance, or its staff responsible in case of accident or illness. I give my permission for my child to participate in all camp activities including trips away from the campgrounds.

### PARENT/GUARDIAN SIGNATURE

I will cheerfully obey the camp rules and conduct myself as I am instructed. I also agree to follow camp's "modesty standard". By my signature I agree to be held accountable to this statement.

### CAMPER SIGNATURE