

# SUMMER CAMP REGISTRATION 2017

Name of Camper \_\_\_\_\_  
Camp Session \_\_\_\_\_ Church \_\_\_\_\_  
Parents or Guardians \_\_\_\_\_  
Parent E-mail \_\_\_\_\_  
Camper E-mail \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_  
Father's Day/Cell Phone (\_\_\_\_) \_\_\_\_\_  
Mother's Day/Cell Phone (\_\_\_\_) \_\_\_\_\_  
Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_ Gender \_\_\_\_ Grade this fall \_\_\_\_  
Bus Stop Location: Departure \_\_\_\_\_ Return \_\_\_\_\_  
Cabin Pal 1 \_\_\_\_\_ Cabin Pal 2 \_\_\_\_\_

## Please indicate if your child has problems with any of the following:

- Asthma    Diabetes    Seizures    Longterm Medication  
 Life Threatening Allergies    Bedwetting    Attention Deficit  
 Mental Health Issues    Other Chronic Condition  
 Special Dietary Needs \_\_\_\_\_

## Payment Method

Camp Scholarship Fund Contribution:    \$10    \$20  
 Check    Scholarship Applied For (Scholarship application available upon request)  
 VISA    MasterCard    Discover  
Amount to Charge \$ \_\_\_\_\_  
Name on Card \_\_\_\_\_ Exp. Date \_\_\_\_\_  
Credit Card Acct. No. \_\_\_\_\_

I agree to hold Covenant Pines Bible Camp harmless for any and all claims for injuries, causes for action, or liability related to use of all camp facilities. I further authorize the camp to use photos or video taken of my child at camp for promotional purposes.

Parent/Guardian Signature \_\_\_\_\_

**IMPORTANT:** Covenant Pines Bible Camp is required to have a signed release form by parent or guardian of camper to authorize who will pick up the camper at camp or at the bus stop at the conclusion of the camp session. Only the person(s) authorized on this registration card will be allowed to pick up the camper. (Does not apply to senior high camps.)

Please check if the above named camper may be picked up by anyone who he/she knows.

The following is a list of names of all those who may pick up the above named camper including yourself:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ May NOT pick up the above named camper.

## MAIL THIS REGISTRATION FORM WITH PAYMENT OR REGISTER ONLINE AT COVENANTPINES.ORG

\$75 nonrefundable deposit required.

No refunds will be issued within 15 days of your camp's date.  
Confirmation packets will be sent out starting at the end of April.

NOTE: When the same child is registering for multiple camp sessions, separate registration forms must be filed. Please indicate your 1st camp session choice. 2nd choice sessions will be granted upon available space after June 1, 2017. Prior to June 1, 2017, preference will be given to single session registrants.

\*If a camper breaks a formal rule (i.e. swearing, fighting, abusive behavior), he/she will receive a warning. Campers are expected to follow all camp rules. Camp reserves the right to send campers home without refund if they break camp rules at the Camp Director's discretion.

\*In operation of our child nutrition program authorized by the U.S. Department of Agriculture, no child will be discriminated against because of race, sex, religion, color, national origin, age or handicap. If anyone believes they have been discriminated against, they should contact the Secretary of Agriculture, Washington, DC 20250.

**(FLIP TO OPPOSITE SIDE)**

## FAMILY CAMP REGISTRATION 2017

Name \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Church Name \_\_\_\_\_

### Additional Participants names and ages:

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

**Paying by:**    Check    VISA    MasterCard    Discover

Amount to Charge \$ \_\_\_\_\_

Name on Card \_\_\_\_\_ Exp. Date \_\_\_\_\_

Credit Card Acct. No. \_\_\_\_\_

\$50 nonrefundable deposit must accompany registration. Cancellations will receive a refund of fees paid minus a \$50 nonrefundable processing fee. No refunds will be issued for cancellations within 15 days of the family camp date. **Or register online at [covenantpines.org](http://covenantpines.org)**

## FAMILY CAMP INFORMATION

### Session Attending:

Work & Worship    July    August

Housing (Number in order of preference. Housing assigned on first-come, first-served basis.)

Special housing or dietary needs: \_\_\_\_\_

\_\_\_\_\_ Standard

\_\_\_\_\_ Deluxe

\_\_\_\_\_ Tent/Camper



**COVENANT PINES**

Bible Camp



**ADVENTUROUS**

Christians



**SILVER BEACH**

Family Area



**COVENANT PINES**

Day Camp