

# Camp Registration Forms 2010

(Print Icon Above) Check Camp Information Page for Important Information on drop off, pick up, camp rules and what to bring. BONNYVILLE BAPTIST CAMP SHEKINAH - REGISTRATION

Please (print and) return this form to: Camp Shekinah Registrar, Bonnyville Baptist Church, 4111 - 43 Avenue, Bonnyville, AB T9N 1S7 or Fax: 780-826-1886 (if faxing use black pen).

Applying for: \_\_\_ Junior Camp or \_\_\_ Teen Camp Age as of camp date: \_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender: M \_\_\_ F \_\_\_  
(MM/DD/YY) Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

Alberta Health Care #: \_\_\_\_\_ Alberta Blue Cross #: \_\_\_\_\_  
Special Health (include any allergies and emergency medications) and/or Learning Needs: \_\_\_\_\_

marks, scars, bruises or other injuries or rashes (indicate size and location): \_\_\_\_\_

Birth

Custodial Parent(s)/Legal Guardian: Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Non-Custodial Parent, if applicable: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Address: \_\_\_\_\_ Authorized designate other than  
custodial parent(s) who may pick up child and serve as contact in your absence: Name and Phone  
# \_\_\_\_\_

Privacy Matters: May we include your child in any photos taken at camp? \_\_\_ Yes \_\_\_ No. If you do not want your child included in any pictures for promotional purposes please check here [ ] .

We would like you to feel more comfortable at camp, so if you wish, who would you like to bunk with at Camp Shekinah?  
\_\_\_\_\_ (we will try to put you with one of your requests.)

Are you also going to the MOOSE LAKE (MALLAIG) BAPTIST BIBLE CAMP? \_\_\_ Yes \_\_\_ No INCLUSIVE  
CONSENT, WAIVER AND MEDICAL RELEASE FORM (This must be read and signed by custodial parent/guardian and by the child/youth if age 14 yrs. or older)

I/we give permission for my child/youth as named above to attend junior/teen camp. I/we understand that precautions are taken for the safety of my child/youth, and I hereby release Bonnyville Baptist Church, its staff, and its volunteers from any liability pertaining to any and all risks associated with attending camp, including travel.

In the case of emergency, I/we give permission to the leaders of the camp to secure proper treatment for my child/youth named on this form with the assurance that I/we will be notified as soon as possible. In the case of surgical emergency, I/we hereby give permission to the physician selected by Bonnyville Baptist Church to hospitalize, secure proper treatment for, and to order injection, anaesthesia or surgery for my child/youth as named above.

My child/youth agrees to abide by the "camp rules" and I/we will take responsibility should there be any disciplinary problems with my child/youth.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Camper's Signature (if over 14yrs) \_\_\_\_\_ Date: \_\_\_\_\_

Camp t-shirts are available. If you wish to purchase please circle the approximate size (if you are unsure, please circle the closest size to your child's current size). Pay when you come to camp: T-shirts for \$15 Sizes Youth L/XL Adult S /M/L/XL /XXL