

Grace Bible Camp **REGISTRATION and HEALTH HISTORY FORM**

Date Form _____

Rec'd by Registrar _____

CAMPER [or Staff Member's] **NAME:** _____
(Print Clearly) (First and Last Name)

NOTE...Use one form per camper [or staff member]. **Make photocopies** of **both sides** if more than one camper is registered.

Unsigned or incomplete forms will be returned causing delay in registration.

[This Form is to be used ONLY if you do not have access to a computer.]

Register Online by going to www.gracebiblechurchonline and follow all instructions.

Text or Email Camp Director if you have questions, need copy of Camp Flyer, need help registering or are in need of financial help for your child to attend Camp: Cell #: 715-790-0176 or Email: mcdcommun@centurytel.net

IMPORTANT... READ Camp Flyer and Back of This Form before registering.

All Registration and Health Forms and \$Monies for Camp Fee, Canteen/Crafts and Camp Photo (if ordered) must be sent to Camp Registrar before July 1st for camper to attend Camp.

ADDRESS: (Print) _____ CITY _____ STATE _____
ZIP _____

AGE: _____ (circle) MALE or FEMALE GRADE: (Fall of camp year) _____ CELL #: ()

*** Do you want an 8"x10" **Color Camp Photo** at \$4.00 each? How many? _____ **Check box** if a **First-Time camper?** [] yes

If you invited First-Time Camper, **Print Campers Name Here:** _____ Grade: _____
(circle) Male or Female

EMERGENCY CONTACTS: [PRINT] (provide at least two contacts)

(Print name) (Relationship) (Area code) (Emergency CELL #)

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Health Insurance Carrier _____ Camp Ins. is secondary coverage after parent/guardian Insurance coverage.

FAMILY PHYSICIAN: (Print Name) _____ **Physician Contact #:**()

Have you had a physical exam within past 24 months? [] yes [] no **Is your Tetanus Immunization up to date?** [] yes [] no

WI Statutes recommend Physical Exam within 24 months prior to camp performed by Physician, Physician Assistant or Registered Nurse.

HEALTH CONDITIONS: (check any that apply)

ALLERGIES: (check any that apply and list specifics)

- [] Diabetes [] Insect Stings _____
- [] Asthma
- [] Foods _____
- [] Epilepsy
- [] Medications _____
- [] Have had dizziness, light-headedness or fainting

[] Other _____
associated with exercise.

Do any allergies require an injection? [] yes [] no

[] A physician has restricted physical exercise.

Medications will be sent with camper/staff member.

[] yes [] no

Describe any limitation or restrictions of camp activities:

(Attach to this form a separate sheet listing any physical / mental or emotional condition or allergies not listed requiring special consideration.)

All medications must be in original containers and turned into the Camp Health Supervisor during Registration.

IN CASE OF EMERGENCY: By signing this form I give my permission for the camp health supervisor to administer necessary medications and medical treatment for Camper [or Staff Member] while he / or she is attending Grace Bible Camp. **I attest that all information on this form is correct.**

****PARENT (or GUARDIAN) [or Staff Member] SIGNATURE:** _____

Name: (**PRINT** Clearly) _____

[Parent (or Guardian) [and Staff] need to Sign here and on the BACK of this form]

E-Mail Address and (or Cell #) needed to send notification of Camp to you next year. These are for Camp purposes ONLY !

PRINT CLEARLY E-Mail Address here:

CELL # : _____
(form updated 2/26/20)

<p>INFORMATION FOR PARENTS (or GUARDIANS) <u>and</u> CAMPERS REGARDING CAMP</p>
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Please take the time to go over Camp Flyer and read the following information with your camper.

If you have questions regarding these standards, please feel free to **text** Camp Director at **715-790-0176**

or email at mcducommun@centurytel.net

- Do **NOT** send Camp Registrations to Kamp Kenwood address. Camp Registrar's address is on Camp Flyer.
- Camper registrations **WILL NOT BE ACCEPTED** at camp. Exceptions are to be cleared with Camp Director.
- Camper "check-in" time begins at **3 p.m.** on Sunday. Those bringing campers, be CAREFULL driving on Camp property. Park in area by Game Field. **Do not drive by big Lodge or in pathways to cabins.**
- All monies brought to camp must be deposited in the Camp Canteen Fund for safekeeping.
- The following items are **NOT** to be brought to camp: radios, CD or DVD players, electronic games, improper magazines or books, **any illegal substances**, or any other item(s) that may detract from the atmosphere of a Bible Camp.
- Clothing should be appropriate for the activities the camper will be involved in at camp.

Shorts must have at least a 5" inseam. All shirts worn by boys, girls or staff must have sleeves and cover to the waistline.

No spandex shorts, "skinny jeans", "yoga pants" or leggings, bikinis or French-cut swimsuits. **"Modesty" is the standard.** Any clothing found to be improper by the Camp Staff will be confiscated and returned to camper at the end of camp week.

- Deliberate destruction of property, theft, fighting, injurious behavior, cursing, or any other behavior unbecoming a person attending a Bible Camp will not be tolerated.
- We have a Boy / Girl **"no contact policy"** regarding touching, holding hands, kissing, etc. between Campers.
- Violations of these standards (or any other behavior deemed inappropriate by the Camp Director and Camp Board) may result in loss of privileges at camp, financial liability for repair or replacement of damaged item(s), and/or expulsion from Camp.
- Parents (or Guardians) will be responsible for picking up camper expelled from Camp. Provide cell number(s) on Registration Form where you may be reached if it should become necessary to come and pick up camper in the event of illness, injury or disciplinary action.

Campers **MUST BE PICKED UP BY 10 a.m. on Friday morning,** however, campers are to remain until camp has been cleaned, inspected and the condition of camp facilities are satisfactory to Camp Director.

IMPORTANT !!

Parents (or Guardians), **Camper** [and Camp Staff] **Must READ and Sign** Below.
(Camp Dir.)

Signature of **BOTH parent** (or Guardian) **AND camper** on the lines below indicates that **both** have read, understand and agree to follow camp standards and instructions. Signatures **required** for completing registration.

Parent (or Guardian) of camper, Camper and **Staff** hereby agree to hold harmless WI Farmers Union, WFU Kamp Kenwood, any sponsors or staff of Grace Bible Camp for any and all costs from injuries, accidents, or death that may occur at camp.

(Camp Insurance will be secondary coverage after Parent (Guardian) [or Staff] insurance coverage.)

Signature of Parent (or Guardian) [or Staff]:

Print Full Name Clearly:

Signature of Camper:

Print Full Name Clearly:
