

CAMP REGISTRATION FORM

Child's Name _____ Date of birth: _____

Parent's Name _____

Address _____

Phone Number _____

Emergency Number _____

Any Allergies _____

Any Food Intolerances _____

Any Special Considerations _____

Medications your child will be taking at camp _____

T-shirt size _____ (The T-shirt sizes tend to run small)

***There will be at least 2 Registered Nurses at camp at all times. Please send your child's medication in its **original container** and we will make sure that your child receives his/her medication as prescribed. If the medication is not sent in the original container we regret that we will not be able to administer the medication.

***If you give permission for a Registered Nurse to administer Tylenol or Benadryl on an as needed basis, please check "yes". Yes _____ No _____

PERMISSION SLIP

I give my permission for my child, _____ to attend camp at Penn Grove Retreat in Hanover, PA with the Middletown Baptist Church from August 2nd to August 6th, 2010. I also give my permission for my child to be transported by bus/van/car to and from camp.

Parent's Signature

Please return this form with the necessary registration fee to Judy Kulhanek by July 18, 2010. The registration fee is as follows: \$70 for one child, \$120 for two children, and \$140 for three or more children in the same family.

****Registrations will not be accepted after July 18th.**

****Space is limited—please register early. The registration process is not complete until the registration fee is paid.**