

Fall 2017 Camp Registration

Camper's Name _____ Birth Gender _____
 Parent/Guardian Name _____
 Grade (Science Camp) _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Camper's DOB _____
 Cell Phone _____
 Email address _____
 Insurance Company _____
 Policy # _____
 Pastor's Name and Church _____

Fall Camp: **Total cost:** **# Attending:**

Ladies' Retreat (September 14-16)	\$105	
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I would like to receive e-mail confirmation of my registration.

A non-refundable registration fee is due with this form for all camps. (This fee is included in the total camp cost above.)

- Retreat = \$25

To reserve a bathroom cabin, there is an additional fee of \$10 per camper for Ladies' Retreat.

I would like to reserve a Bathroom Cabin

Please answer the following questions:

1. Is the camper allergic to any food, drugs, or other substances? Yes No

Explain: _____

2. Is the camper currently taking any medications? Yes No

If the answer is yes, what medication(s)? _____

3. In the event of an emergency, is there any other information we should know about the camper that would be pertinent to seeking treatment?

4. In the event I am unavailable at the time, I hereby give my permission to the physician, which the camp director chooses, to perform any EMERGENCY medical treatment (including surgery) as may be necessary. Should my camper need to see a doctor, I agree to send Red Cliff Bible Camp \$100 to partially defray the travel cost for care.

5. For promotional or marketing purposes, Red Cliff reserves the right to use

any audio, video, and/or photography of guests or campers participating at Red Cliff facilities.

Required Signature / Date (must be signed by parent/guardian if camper is under 18)

(This signature is required for any camper to attend.)

Please mail completed registration to:

Red Cliff Bible Camp

PO Box 846

Pinedale, WY 82941

OR

Email completed form to: redcliffcamp@gmail.com

Questions? Call us at (307) 367-2536 or email redcliffcamp@gmail.com