



# WV BlackHills Free Methodist Church Camp

Teen Camp – Registration

Teens may arrive between 3:00 PM and 5:00 PM on Sunday, June 18 for sign-in and room assignment.

Camp opening is at 5:00 PM in the tabernacle.

All campers must be picked-up at NOON on Thursday Afternoon

**NO TEEN WILL BE PERMITTED TO LEAVE CAMP EARLY UNLESS PREVIOUSLY ARRANGED**

This is a CLOSED camp and visitors may only come during the evening service.

Please mail this form, the medical form, along with the payment, and rules form to:

**Laura DeLeurere**

**130 Circle Drive**

**Bridgeport, WV 26330**

**(304) 584-7BHC (Use this number to call the camp)**

Make checks payable to:

**"WV BlackHills Camp"**

Camp cost per person:

**\$80.00 if registration and payment is postmarked by June 1<sup>st</sup>.**

(Each additional person from the same immediate family is \$75.)

**\$100.00 if registration is received after June 1<sup>st</sup>.**

(Each additional person from the same immediate family is \$95.)

\*Please remember to bring warm clothes, clothes that you can get messy in, tennis shoes, and a Bible!

Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Grade (going into): \_\_\_\_\_ ("G" if just graduated) Gender: M / F

E-mail address: \_\_\_\_\_

Please list your choice for ONLY ONE roommate (no guarantees): \_\_\_\_\_

By signing this form, I am allowing the camp to possibly use my child's photograph or video in promotional material for the camp.

Signature of Parent or Guardian: \_\_\_\_\_

This form along with the required CAMP MEDICAL FORM and RULES FORM must be completed in full and submitted in advance or at registration.

T-Shirts will be available for purchase during sign-in time.

The cost of the T-Shirt is **NOT** included in the camp registration fee and may be paid directly to the T-Shirt Company at the time of registration.

Do not send the T-Shirt money now.

Please circle the adult size you would like to purchase: S M L XL XXL

Approximate T-Shirt cost: \$7.00 - \$9.00

# Medical Form

## WV Free Methodist BlackHills Camps

### Camper Information

Name: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

### Parent/Guardian Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Emergency Contact (other than parent/guardian listed above)

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

### Insurance Information

Company: \_\_\_\_\_ Policy #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Policyholder: \_\_\_\_\_

### Medical Information

List any allergies \_\_\_\_\_  
Present Medications \_\_\_\_\_  
(include dosage) \_\_\_\_\_  
List any medical \_\_\_\_\_  
Problems \_\_\_\_\_  
Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_  
Date of Last Tetanus Shot: \_\_\_/\_\_\_/\_\_\_

### Release and Signatures

In case of emergency, the camp directors have my permission to treat or sign for medical/surgical treatment at a health care facility. (Every attempt will be made to notify parents/guardians.)

Authorization is given for camp staff to give my child Tylenol as needed for minor aches, pains, etc.

I have read the above and I give my consent for treatment of my child. I also further agree that the BlackHills Camp, Camp Association, the Free Methodist Church, nor camp staff will be held liable or responsible for any injury or incident involving my child.

Signed: \_\_\_\_\_ \_\_\_/\_\_\_/\_\_\_  
Witness: \_\_\_\_\_