



WV BlackHills

Free Methodist Church Camp

Teen Camp – Registration

Teens may arrive between 2:30 PM and 4:30 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, June 22.

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:

\$95.00 if registration and payment is postmarked by May 1st.

(Each additional person from the same immediate family is \$90.)

\$110.00 if registration and payment is postmarked by June 1st.

(Each additional person from the same immediate family is \$105.)

\$125.00 if registration is received after June 1st.

(Each additional person from the same immediate family is \$120.)

Churches paying for their teens - please contact the phone number above for a church discount.

*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 are provided by Star Furniture.

Due to shipping issues, all campers that want a t-shirt must pre-register with their shirt size.

Those that do not pre-register will not receive a camp shirt. Please circle the adult size you would like: S M L XL XXL XXXL

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: _____