

# COPPER BASIN BIBLE CAMP

3300 Copper Basin Road, Prescott, AZ 86303

1-928-445-4636

<http://copperbasinbiblecamp.org/>

## SUMMER CAMP REGISTRATION FORM

Name of Camper \_\_\_\_\_ Sex: M F  
Birth Date \_\_\_\_\_ Grade Completed \_\_\_\_\_ Age at Camp \_\_\_\_\_  
Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Parent/Guardian \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_ Church You Attend \_\_\_\_\_

### EMERGENCY CONTACT

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Relationship \_\_\_\_\_

### CAMP INFORMATION

Desired Camp Session \_\_\_\_\_  
T-Shirt Size Child S M L or Adult S M L XL XXL  
Cabin Buddy Request \_\_\_\_\_

### SUMMER CAMP 2011 SESSIONS

Cub Camp, 1	June 5 – 7	\$85
Cub Camp, 2	June 9 – 11	\$85
4th - 6th Camp, 1	June 12 - 17	\$175
4th - 6th Camp, 2	June 26 - July 1	\$175
Jr. High Camp, 1	July 19 - 24	\$175
Jr. High Camp, 2	July 3 – 8	\$175
High School Camp	July 10 - 15	\$175

### MEDICAL INFORMATION

Allergies \_\_\_\_\_  
Special Medical Problems/Handicaps \_\_\_\_\_  
Medication (Name & Dosage) \_\_\_\_\_

Name of Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

### INSURANCE INFORMATION (Please send a copy of your Insurance ID Card with registration)

Name of Insurance Company \_\_\_\_\_  
ID# \_\_\_\_\_ Phone \_\_\_\_\_

1.) I/We, the Parents/Legal Guardians of \_\_\_\_\_ (camper) do hereby authorize Copper Basin Bible Camp, their employees, staff, volunteers, directors, or others acting on their behalf as agents for the above minor child to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and medical care facilities (i.e. hospital, urgent care, doctors office) which is deemed advisable by any physician or surgeon for my child as named above. I further accept the financial responsibility for all medical attention, which may be needed so long as a licensed and qualified physician or surgeon, prescribes this medical attention (i.e. prescribed medicines, x-rays, medical imaging or any other procedures).

2.) Furthermore, I/We do hereby agree to release, indemnify and hold forever harmless Copper Basin Bible Camp, their employees, staff, volunteers, directors, or others acting on their behalf or assigns against loss from any and all claims, demands or actions in law or in equity that may hereafter be made or brought by the said minor child or by anyone on behalf of said minor child for the purposes of enforcing a claim for damages on account of any fatality and/or injury incurred in consequences of an accident that any be sustained by said minor child at Copper Basin Bible Camp.

3.) Furthermore, I/We hereby acknowledge the photographing, videotaping (and other relevant media sources) of my child at camp and the reproduction of those images to be used in the camp scrapbook, advertisement, and promotion of Copper Basin Bible Camp.

4.) Furthermore, I have read, understand and reviewed; with the camper, all camp rules and standards of conduct.

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

**TO REGISTER:** You must register and provide full payment at least 3-weeks prior to your camp session. Registration at the door is not accepted. If you require financial assistance, please seek it from your home congregation first. If necessary, then contact the camp at board@copperbasinbiblecamp.org and give your name, phone number and the best time to call.

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