

Riverside Bible Camp Registration Form 2010 (one per camper Please) Page 1 of 2

Please make sure all address information is complete.

Date: _____

Name: _____ Age at camp time _____ Boy ___ Girl ___

Address: _____ City: _____ PC _____

Home Phone: _____ Work Phone: _____

Cabin Partner _____ Church _____

(Only one of similar age, optional)

(if you attend)

Parents/Guardians Names: _____

Childs swimming ability: _____

Please register for one: Deduct \$10.00 for registrations received before June 15, 2010.

<input type="checkbox"/> Family Camp	July 1 to 4		
<input type="checkbox"/> #1-16-18 Senior Camp	July 4 to 14	\$150.00	Payable to: <u>Riverside Bible Camp</u>
<input type="checkbox"/> #2-8-10 Children's Camp	July 18 to 23	\$75.00	Mail registration to:
<input type="checkbox"/> #3-13-15 Camp	July 25 to 31	\$100.00	Annabelle Screpnek
<input type="checkbox"/> #4-10-11 Camp	Aug 1 to 6	\$80.00	Box 6, Nampa, Alberta
<input type="checkbox"/> #5-Squirts Camp	Aug 10 to 12	\$30.00	TOH 2R0
<input type="checkbox"/> #6-11-12 Camp	Aug 15 to 20	\$80.00	
<input type="checkbox"/> #7-College & Careers	Aug 20 to 22	\$60.00	

IMPORTANT THINGS TO KNOW:

Our staff is safety oriented. We have a full time director, Qualified First Aid staff on the grounds at all times. Reserve your bunk by pre-registering and pre-paying. Register two weeks prior to the camp that you are attending.

There will not be any walk ons!

Registration for all camps will be after 4:30pm. There will be supper on the Sunday.

Camp #1 will be ending Wednesday the 14th at noon.

Camp #2, #4 and #6 will be ending with a talent show on the Friday Afternoon at 3:30 and supper.

Camp #3 will be ending on Saturday morning the 31st at noon.

Camp #5, the campers come at 4:30 on Tuesday, pick up time is 6 pm on Thursday.

Consider your application accepted unless you hear from us. Applications received after the camp is full will be placed on a waiting list and you will be notified.

NOTE TO PARENTS: While your child is at camp, they are required to be at events scheduled throughout the day. Therefore, if you come to visit, they are still required to be at the current event unless approved by the Directors. Thank you.

Campers: Failure to follow the rules of the camp and its director and staff, may result in you being sent home.

Parent's Release Form

In signing this consent form, You are giving the camp permission to use pictures of your child for promotional use.

The undersigned, intending to be bound hereby, realizing it is the camp's desire to give each camper a safe and beneficial stay and realizing each camper is covered by a reputable insurance plan, releases forever the Riverside Bible Camp and all individuals associated therewith, from any and all liability for any injury or damage which may be sustained by the undersigned and/or child of the undersigned or property of the same at or in transit to or from any camp conducted activity or under the auspices of the Riverside Gospel Fellowship. In case of emergency, I hereby give permission to the physician selected by the camp to hospitalize, secure proper treatment for and to order proper procedures for the treatment.

Camper application MUST be signed by Parent or Guardian

Medical / Health Information to be completed by a parent or guardian:

Camper's Name _____

Camper's AHC# _____

Is there any knowledge of past or present conditions?

Asthma _____ Diabetes _____ Home sickness _____ Bed wetting _____

Allergies _____

(If you have allergy meds or need EPI pens, Please supply your own)

Physical Restrictions (explain) _____

Is there any condition and/or treatment requiring care by the camper or staff? _____

List any medications that you do not want administered to your child? _____

PLEASE TURN IN ALL MEDICATIONS UPON ARRIVAL AT CAMP.

- *Medications need to be picked up before the camper leaves the camp grounds.
- *The cost of prescription drugs needed during camp will be paid by the parent or guardian.
- *There is a first aid person at camp 24 hours a day.
- *Parents will be notified by the camp of any illness or injury that may occur during the camp
- *Emergency intervention will be administered to a child considered in distress, pending safe transport to nearest medical facility.

Signature of Parent or Guardian **Parent / guardian names (please print clearly)**

Name and phone of person picking up my camper: (note camp ending times on Page 1)
Phone: _____

Please print; this must be determined before camp!
If this has not been determined; Please call Annabelle at the camp and inform of any changes.
Camp phone: 780-971-2273

Please make a copy of this application for your records.