

WINTERBLAST 2010!!

Registration Form for Students

Complete and give this form to your youth leader as soon as possible!! Cost \$120.00

Youth group: _____ Date attending camp: _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Yes! I want an extra cool Winter Blast 2010 Long Sleeve T-Shirt to remember our weekend!

Cost \$15.00 Due with Registration

Circle Size: Youth: YM, YL Adult: S, M, L, XL, XXL

Payment: _____ \$40.00 Deposit only

_____ \$120.00 Full Payment _____ \$15.00 Shirt

Total Enclosed \$ _____

Balance due December 1 for January Camps or January 2 for February and March Camps Please submit balance before those dates so your youth leader can secure your spot.

Fees Non-Refundable after Balance due dates. No exceptions!

Health Information: Please attach a copy of your health insurance card.

Emergency Contacts: _____

Health Info and Parental Permission:

List any health disorders or surgeries: _____

List any allergies: _____

List any current medications (including dosage and times):

This health history is correct as far as I know, and the camper/worker listed has permission to engage in all prescribed camp activities including travel to and from Camp Orchard Hill for off site activities, except as noted by me. **I give permission for the group leader that takes my child to Winter Blast at Camp Orchard Hill to provide ongoing health care and to select local medical personnel to order tests and treatment as needed for the camper listed.**

In the event, I cannot be reached in an emergency, I hereby give permission to the physician selected by the group leader to hospitalize, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for the person listed.

Signature of Parent/guardian _____ Date: _____

Policy Holder's Name: _____

Insurance Company Name: _____

Insurance Company Address: _____

Policy Identification Number: _____

Youth Leader: Please copy this Registration Form and use for your registration process.
Bring the completed forms with you, so you and we can have access to emergency contacts and the permission to treat waiver. Thanks!!