

## 2022 Summer Camp Registration

Camper name: \_\_\_\_\_

Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_ male female

Grade entering fall 2022 \_\_\_\_\_

T-shirt size (\$12): Adult S / M / L / XL or Youth S / M / L

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Church: \_\_\_\_\_

Parent/Guardian Name(s) (please print):  
\_\_\_\_\_

Cell: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent E-mail (for registration confirmation):  
\_\_\_\_\_

Check here if you would like to get camp's newsletter.

How did you hear about Covenant Park? \_\_\_\_\_

Emergency Contact (other than parent):  
\_\_\_\_\_

Phone: \_\_\_\_\_

I would like to be in the same cabin with:

(1) \_\_\_\_\_ (2) \_\_\_\_\_

Special pick up instructions for your camper:  
\_\_\_\_\_

First time Camper [  ] Returning Camper [  ]

**Camp week attending:** \_\_\_\_\_

Names of siblings or friends for discounts: \_\_\_\_\_

Please see discounts tab at [covenantpark.org/summercamp](http://covenantpark.org/summercamp) for qualifications.

**Payment: Please include a 20% deposit or full payment with your registration form.**

Please indicate if your child has problems with any of the following:

Asthma  Seizures  Diabetes  ADD/ADHD  Bedwetting  Emotional/Behavioral

Other: \_\_\_\_\_

Allergies  Life threatening allergies

Please list with reactions: \_\_\_\_\_

Dietary Restrictions: \_\_\_\_\_

**< Must complete and sign information on back side of page >**

[ [ [ [ ]

**Medications:** Check here if your child will be bringing medications to camp. Note: all campers bringing medications to camp must have a signed permission form to do so. Please bring detailed instructions signed by parent/guardian to camp at registration.

**Activity Restrictions/Special Needs.** If checked, please explain on separate sheet.

**Immunization record** (use most recent dates): DPT \_\_\_\_\_

MMR \_\_\_\_\_ Polio \_\_\_\_\_ Tetanus booster \_\_\_\_\_

Please Check Here if You Have Chosen Not To Vaccinate [  ]

Health Insurance Company: \_\_\_\_\_

Policy/Group number: \_\_\_\_\_

Please initial: I give my permission for pain medication to be administered by the designated medical personal onsite as needed to my child. \_\_\_\_\_

I have read, understand and agree to the terms of the full contract below:

**Participation, Treatment and Transportation Release Waiver**

>I understand that every effort will be made to protect and safeguard all campers. I acknowledge that participating in camp activities may be physically and emotionally challenging and potentially dangerous. I agree not to hold Covenant Park Bible Camp (CPBC), its staff and volunteers in liability or claims which may arise related to my child's (as listed above) participation in programs sponsored by CPBC. Activities that Covenant Park offers and recognizes as potentially dangerous include but are not limited to climbing tower activities, zip line, field and court sports, outdoor games, night games, running, throwing, swimming, boating and water sports, and low ropes elements. I (The Participant/Guardian) recognize and assume the risks and am participating/allowing my child to participate at will in these and other activities hosted or sponsored by Covenant Park.

>In the event that I cannot be reached in an emergency, I hereby give permission to the designated camp medic or administrator to obtain emergency transportation as needed, and to the designated physician to secure proper treatment, hospitalize, and to order injections, anesthesia, or surgery for my child or myself, as named above.

> I accept personal financial responsibility for any injury or other loss sustained during participation in camp activities and events either on camp property or offsite camp sponsored events, as well as for any medical treatment rendered to the participant that is deemed reasonably necessary by camp medical personal or leadership staff.

> I have read and understand the Carlton County Hold Harmless Agreement as it relates to my child/family on site at the Andersen Outpost. (Only for Jr. High, Sr. High, Adventure, and Family Camps. Found on website).

>I give my permission to for authorized CPBC staff to transport my child for medical reasons, Senior High Excursions offsite, Backpacking Trip or an Adventure Camp activity.

**Disciplinary Action Acknowledgement**

>I understand that any camper who willfully destroys property will be held responsible and charged accordingly.

> I also give the camp full authority in dealing with problems of discipline. I understand that any camper disregarding camp's rules is subject to being sent home without a refund.

**Promotional Agreement**

>I give my permission for comments, pictures, and/or video of the participant named above to be used for promotional and other uses relating to camp.

\*Please note that answering "no" will not allow the participant to be in any pictures or videos including cabin photos and those posted on Bunk1 for parental viewing.

**Sincerely Held Beliefs**

>Covenant Park operates according to its statement of faith and sincerely held beliefs as a Christian ministry. Scripture is central to the teachings, positions, operations and programming of CPBC. I understand that the teaching, counsel and general operations of Covenant Park will be based in its sincerely held beliefs.

**Cancellation, Refund and Transfer Policies**

>If a camp or event needs to be cancelled due to a stay at home order or other guidelines restricting camp operations, a full refund will be provided to all participants, including deposit. Cancellation on the part of the participant 5 days or more prior to the start date of the camp or event will be subject to a full refund minus the 20% deposit. Cancellations within 1- 5 days of the start of the camp or event will be charged 50% of the camp fee. Cancellations or no shows after the start of the camp or event will not receive a refund. Cancellations involving a t-shirt purchase will be charged the \$12 tshirt fee if cancelled after June 1.

>Transfers: Camper may switch to another camp within the same calendar year as space and opportunity allows. There will be no added fees, other than the cost of the camp for transfers. Payments may not be credited to an account to be used in another calendar year in the event of cancellation or over payment for a session.

>We appreciate as much notice as possible in the event of cancellations. Please contact [office@covenantpark.org](mailto:office@covenantpark.org) or 218-389-6398 for questions or cancellations.

Signature of parent/guardian \_\_\_\_\_ date \_\_\_\_\_