

REGISTRATION FORM

You can also register online at ootsalakebiblecamp.com



Camp Date _____

Last Name _____ (Camper 1)
First Name _____
Male Female Birth Dt. _____
Care Card# _____

Last Name _____ (Camper 2)
First Name _____
Male Female Birth Dt. _____
Care Card# _____

Last Name _____ (Camper 3)
First Name _____
Male Female Birth Dt. _____
Care Card# _____

Last Name _____ (Camper 4)
First Name _____
Male Female Birth Dt. _____
Care Card# _____

Family Camp Preferred Accommodation:

10 Bed Cabin 4 Bed Room Bringing RV

Mailing Address _____

Phone/Cell _____

Email _____

Parent/Guardian(s) _____

Phone/Cell _____

Two alternate emergency contacts:

Name _____

Phone/Cell _____

Name _____

Phone/Cell _____

Who is authorized to pick up your child?

Transportation Required? YES NO

Please list any food allergies, drug requirements, or any other concerns we should be aware of:

By signing below, I guarantee that the information contained in this form is complete, and that the form is signed by a parent or legal guardian.

AUTHORIZATION: I/We grant permission for our child named above to take part in Ootsa Lake Bible Camp and I/we agree to assume all financial responsibility in case of injury or accident arising out of such event. In case of injury or illness, I/we authorize Ootsa Lake Bible Camp staff to administer treatment, and in such case, it is understood that Camp is not responsible for medical costs.

Name of Parent/Guardian (please print):

Signature: _____

Date: _____

Photo Release: I/we give permission to use any photo taken of my child in any Ootsa Lake Bible Camp newsletter or other related publication.

YES NO