

2009 Camp Stratiotes Application

Please complete the Application and return to the church office with your fee no later than May 17th, 2009. The fee for camp this year is \$125 for the first family member, \$100 for the second, and \$75 for each additional family member.

Name: _____

Address: _____

City: _____ **St.** _____ **Zip** _____

Age: _____ **Date of Birth** _____

Grade Completed: _____

Church Affiliation: _____ **Member** _____

T-Shirt Size: (Youth) S M L XL
(Adult) S M L XL XXL

Does your child have permission to swim? _____

List of child's allergies: _____

Is your child on Medication? _____ **What kind and what was it prescribed for?** _____

Name of Insurance Company _____

Policy Number: _____

coming for Thursday Supper _____

Do you need a ride home for your child? _____

What other camper does your child not want to be separated from? _____

Date of Last Tetanus Immunization_____

Will you give permission for the camp director to take your child to the nearest hospital in the event of an emergency?_____

In case of an emergency who should we contact?

Home Phone:_____

Work Phone:_____

We hereby for ourselves, or as parents, guardians, or executors and administrators, waive and release any and all rights and claims for damages for ourselves, or in any said capacities, may have against the Mt. Juliet church of Christ, the Bible Camp, and any employees or volunteer workers or any others associated with the camp for any and all injuries or accidents suffered us, or our said children, as the case may be.

Name of Child:_____

Signatures of both parents and legal guardians:

Signed by the camper. I have read over and will obey all the camp rules. I understand the dress code and agree to follow it.
