

# CAMP JUDAH 2020 REGISTRATION

Name \_\_\_\_\_ Age \_\_\_\_\_ M or F

Address \_\_\_\_\_

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

Email \_\_\_\_\_

(Your registration will be confirmed by email so be sure it is accurate and current.)

Parent/Guardian \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Church \_\_\_\_\_

Person to Contact in Case of Emergency (other than parent noted above)

Name \_\_\_\_\_ Relationship to camper \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Person other than parents camper may go home with \_\_\_\_\_

**SENIOR CAMP: JUNE 28<sup>th</sup> – July 3<sup>rd</sup>, 2020**

**JUNIOR CAMP: AUGUST 16<sup>th</sup> – 21<sup>st</sup>, 2020**

Please indicate which camp you will be attending:

Sr. Camp (ages 12-18) \$190 early registration; \$215 for registrations postmarked after 6/8/20

Jr. Camp (ages 8-12) \$190 early registration; \$215 for registrations postmarked after 7/27/20

Optional for ***Sr. Campers only***: I would like to participate in Paintball (add \$10)

I release my child to participate in Paintball (parent's signature): \_\_\_\_\_

Optional for ***All Campers***: I would like to use the Hickory Hill Rock Wall (add \$10) I release my child to climb the Rock Wall (parent's signature): \_\_\_\_\_

Optional for ***All Campers***: I would like to use the Hickory Hill Zip Line/Ropes Course (add \$10)

I release my child to use the Zip Line/Ropes Course (parent's signature): \_\_\_\_\_

**ALL REGISTRATION FEES ARE NON-REFUNDABLE & NON-TRANSFERABLE**

CAMPER, please read and sign: *"I agree to abide by the rules of Camp Judah while at camp."*

Signed \_\_\_\_\_ Date \_\_\_\_\_

You may request ONE (1) SAME AGE Cabin-Mate if you desire \_\_\_\_\_  
(We'll do our best but there are no guarantees.)

FOR PARENTS (Please sign below if you agree with the statement):

"I give my consent to allow Camp Judah to use photographs or video footage of my child for use in future camp publications, including promotional materials."

\_\_\_\_\_  
Signature of parent or guardian Date

Checks may be made out to Camp Judah.

Please send completed registration, health form and payment to:

Camp Judah, 2444 N. Main St., Warsaw, NY 14569 (585)786-2969 campjudah@gmail.com