



2010 Camp Registration Form

Camper Name: _____ M: ___ F: ___

Date of birth: _____ Entering Grade: _____

Address: _____

Address (line 2): _____

City: _____ Province: _____ Postal Code: ____ / ____

Email: _____ Phone: (____) _____ - _____

Home Church: _____ Pastor: _____ Phone: _____

Alberta Health Care #: _____ Medical/Diet Concerns: _____

How did you hear about Pine Lake Christian Camp?

Church: ___ Friend: ___ Website: ___ Radio Ad: ___ Newspaper/Magazine Ad: ___

Other (please specify): _____

Parent/Guardian: _____ Phone: _____ Email: _____

Alternate Contact: _____ Phone: _____ Email: _____

The signing of this registration form by the parent/guardian gives permission for the listed camper to attend Pine Lake Christian Camp for the period listed; to be given emergency medical treatment if required; to ride as a passenger in camp vehicles; to be evacuated by air if necessary; and to participate in all camp activities as outlined in the camp literature. Any exceptions should be noted here:

Pine Lake Christian Camp takes great pride in maintaining safe practices. All programs run under rigid safety guidelines and procedures. Nonetheless, ***participants need to be aware that there is a risk inherent in any outdoor adventure program.***

Our signatures below indicate a desire to participate in the Pine Lake Christian Camp program, and an understanding of its nature. The camper agrees to abide by the rules of the camp.

Signature of camper: _____ Date: _____

Signature of parent(s): _____ Date: _____

Or Guardian(s): _____ Date: _____

Photo Release: if you are willing to allow Pine Lake Christian Camp to use photographs in which you or your child appear for appropriate promotional materials, *please sign below*

Signature of parent or guardian _____

Date _____

Camp: _____ Dates: _____ Fee: \$ _____

Cheque Visa MasterCard

Register 3 weeks prior to start date of camp and receive \$25 off registration of kid's camps (except rookies where you receive \$15 off)

Refund Policies:

1. If cancellation is made seven (7) days prior to start of camp, the full registration fee will be refunded.
2. If cancellation is made within seven (7) days of start of camp, the registration fee less 25 % will be refunded. If there are medical or emergency circumstances, the full amount will be refunded
3. No refund will be given for campers sent home for discipline reasons
4. No refunds will be given for late arrivals or early departure.
5. In the event of withdrawal from camping on Doctor's orders a refund for the number of days remaining in the camping week will be refunded to the camper.

Credit card holder name (as it appears on card): _____

Signature: _____

Credit card #: _____ Expiry Date: ____/____

MAIL TO: Pine Lake Christian Camp, Box 41, Pine Lake, AB. T0M 1S0

(Cheques payable to Pine Lake Christian Camp)