



CHURCH: _____

NAME OF CAMPER: _____

AGE at time of day camp: _____ GRADE completed by June 2015: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PARENT(S) NAME(S): _____

PRIMARY PHONE: _____

SECONDARY PHONE: _____

EMAIL ADDRESS: _____

ALLERGIES: _____

MEDICAL NEEDS: _____

AUTHORIZED PERSONS TO PICK UP MY CHILD: _____

The camper above has permission to engage in all activities at [add your church here] whether those take place on or off church property. I agree that my camper is voluntarily participating with the knowledge of inherent and other risks, both known and unknown, in these activities and programs. My camper and I accept full responsibility for any injury, damage, death or loss resulting from these risks and/or resulting from my camper's own negligence or other misconduct. I understand, too, that although Johnsonburg Presbyterian Center has taken precautions to provide proper organization, supervision, instruction and equipment for each activity it is impossible for the program to guarantee absolute safety. Also, I understand that I share responsibility for safety and I assume that responsibility. Further, I waive any claim that may arise against Presbyterian Camps and Conferences, Inc. (Johnsonburg) and/or its employees as a result of participation in their programs.

I give permission and consent to allow photographs, videotapes, and interviews to be taken during the camp session, of the camper named above. I further give permission and consent for any such photographs, videotapes, or interviews to be used to illustrate, report, promote and advertise Johnsonburg Presbyterian Center. Use of any such photographs, videotapes, or interviews may include, but is not limited to: brochures, posters, letters, news articles, videos, ads, electronic news, web sites, blogs and social media promoting or reporting on Johnsonburg Presbyterian Center.

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____