

# 2019 CAMP EDEN REGISTRATION FORM



**Register Your Camper**—All campers must complete the Camper Start-up Information, the Financial Worksheet, the Safety and Health Form (both sides of this page), and appropriate adventure release forms and submit these forms along with a \$25 non-refundable registration fee.

**At Least Two Weeks Before Camp**—Campers who are attending a week long camp (Timberline Camp, Teen Camp, LAST Camp) must complete the Physical Form and Medication Form. These forms, along with adventure activity release forms, must be received by Camp Eden no later than two weeks prior to your week of camp.

**First Day of Camp**—The total amount due (“Sub-total” less “Amount Paid with Registration”) must be paid in full at campsite registration on the first day of camp.

**Checks**—Please make checks payable to your church (if registrations will be submitted together) or Camp Eden (if registration will be submitted individually).

## Camper Start-up Information

This form is necessary for all camps and

### Personal Information

Male  Female Age \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_ (Grade your camper will be in for the 2017-2018 school year.)

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

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

Church Name \_\_\_\_\_

I would like to room with \_\_\_\_\_.  
(You may select only one roommate. Roommate must be within one school grade.)

## Financial Worksheet

This form is necessary for all camps and must be turned in with registration.

Camp Details				Adventure Activities (Indicate if camper will participate)		Finances				
Check Week	Camp Dates	Type of Camp	Speaker	Price	Trail Ride? (Included)	Rock Climbing? (Included)	Discounts*	Sub-total	Amount Paid with Registration**	Total Amount Due
	June 10-22	LAST Leadership Camp		\$200						
	June 17-22	Timberline	Nathan Steadman	\$290						
	June 20-21	Starter	Camp Staff	\$58						
	June 24-29	Teen	Todd Sivnksty	\$290						

Adventure Release Forms can be downloaded from [www.campeden.org/register](http://www.campeden.org/register)

\* Call Camp Eden or see your church registration coordinator for details on “multiple camper” or other discounts.

\*\* Must be at least \$25.

Staff Use Only:

# Safety and Health Form

This form is necessary for all camps and must be turned in with registration.

## Important Health Information

Are there any past or current medical conditions that should be brought to the attention of the Camp Eden medical staff?

Are there any allergic conditions (medications/food/other) that should be brought to the attention of the Camp Eden medical staff?

Are there any camp activities in which this camper should NOT participate?

## General Parental Release

The above camper has permission to participate in all camp activities, on and off the campsite (this includes Camp Eden transportation to activities off the campsite), except as noted below by me and/or the examining physician. I give permission to the physician selected by Camp Eden to order X-rays, routine tests, and treatment for the health of my child. If I cannot be reached in a medical emergency, I give permission to the physician selected by Camp Eden to hospitalize, secure proper treatment for, and order injection, anesthesia, and/or surgery for my child. I also affirm that the information on this medical form is both complete and correct. For promotional purposes, Camp Eden reserves the right to use any photography or video taken while your child is at camp. Camp Eden makes every attempt to provide continuous camper supervision by assigned counselors. However, occasionally (during activity-choice options or transition times) campers are supervised by strategically placed camp staff members.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Persons NOT permitted to take camper from camp \_\_\_\_\_  
Please list the names, addresses, and phone numbers of any persons, other than camper's father, mother, or emergency contacts who may remove camper from campsite:

Father's Contact Information—Is father permitted to take camper from campsite? ____ Yes ____ No		
Name	Home Phone	Place of Employment
Address	Cell Phone	Employment Address
City, State, Zip	E-mail	Employment Phone

Mother's Contact Information—Is mother permitted to take camper from campsite? ____ Yes ____ No		
Name	Home Phone	Place of Employment
Address	Cell Phone	Employment Address
City, State, Zip	E-mail	Employment Phone

Emergency Contact #1—Is this emergency contact permitted to take camper from campsite? ____ Yes ____ No		
Name	Home Phone	Place of Employment
Address	Cell Phone	Employment Phone
City, State, Zip	E-mail	

Emergency Contact #2—Is this emergency contact permitted to take camper from campsite? ____ Yes ____ No		
Name	Home Phone	Place of Employment
Address	Cell Phone	Employment Phone
City, State, Zip	E-mail	

Insurance Information			
Medical Insurance	Name	Phone	Plan/Group Name or #
Camper Doctor	Name	Phone	
Camper Dentist	Name	Phone	

Your child is being enrolled in a child care program that is licensed by the Colorado Department of Human Services. The license indicates that the program has met the required standards for the operation of a child care facility. This facility has made every effort to provide a safe and healthy facility for your child. If you believe that your child has been abused, you can contact the Gilpin County Department of Social Services at 303-582-5444. Colorado law requires that child care providers report all known or suspected cases of child abuse or neglect. To review a file for a licensed child care facility please call 303-866-5088. For additional information, please consult the Colorado Division of Child Care at 1575 Sherman Street, Denver, CO 80203 or call 303-866-5958.