

HANGING ROCK CHRISTIAN ASSEMBLY, INC. 2009 SUMMER CAMP REGISTRATION FORM

ONLINE REGISTRATION AVAILABLE AT WWW.HANGINGROCK.ORG

Register only one camper per form. If camper is registering for more than one camp, fill out a separate form for each camp. Do not use this form for Family Camp or H.S. Youth Group Camp. Registration Forms for those camps are available online or in your church office. Mail Registration Form and fees to: HRCA, PO Box 218, West Lebanon, IN 47991-0218

Please print or type.

Camper Name _____ E-mail _____

Mailing Address _____ City, State, Zip _____

Male Female Birth Date _____ School Grade in Fall _____

Has camper been baptized by immersion? yes no

Home Church _____ City _____

Minister Signature *(needed if church is paying full or partial camp fees)* _____

Name of Parent or Legal Guardian _____

Home Phone _____ Work Phone _____ Cell Phone _____

Emergency Contact Name & Phone *(other than parent / legal guardian)* _____

Mark box for corresponding camp. (Mark only one camp per registration form.)

Preschool & Kindergarten

- Day Camp 1 - June 2
- Day Camp 2 - June 4

1st - 6th Graders

- Lakeside Fishing Camp - June 12-13
(camper must be accompanied by an adult)
- Father / Son Wilderness Camp - June 25-27

1st & 2nd Graders

- Super Saturday - June 13
- 1st & 2nd Grade Overnight - July 17-18
(camper must be accompanied by an adult)

3rd & 4th Graders

- Middler 1 - June 21-23
- Middler 2 - July 19-21
- Middler Wilderness 1 - June 19-20
- Middler Wilderness 2 - July 17-18

5th & 6th Graders

- Junior 1 - July 12-16
- Junior 2 - July 26-30
- Junior Wilderness - June 21-24
- Junior "Girls Only" Wilderness - July 26-28
- Junior "Boys Only" Wilderness - July 29-31

5th - 8th Graders

- Sports Camp - August 2-6

6th - 9th Graders

- Horse Camp 1 - June 1-5

7th & 8th Graders

- Jr. High 1 - June 14-19
- Jr. High 2 - July 5-10
- Jr. High Wilderness 1 - July 5-9
- Jr. High Wilderness 2 - July 12-16

6th - 12th Graders

- Horse Camp 2 - June 8-12

7th - 12th Graders

- Mountain Bike Adventure - August 2-7

9th-12th Graders

- High School - June 28 - July 3
- High School Wilderness - June 14-19
- High School Youth Group - July 23-26

Other Camps

- Handi-Camp - June 24-26
- Home School Camp - August 20-23

**SEE SUMMER
BROCHURE FOR
CAMP FEES!!**

| |
|--|
| \$ _____ Registration Fee |
| \$ _____ Amount Enclosed <i>(Write checks payable to HRCA)</i> |

Please remove Registration Form from center of booklet before mailing.

Medical Information and Activity Release on back. Please turn over.

**1st & 2nd Grade Overnight, Lakeside Fishing Camp, Father / Son Wilderness, and Home School Camp ONLY
(Both child and adult need to fill out separate forms)**

Name of adult attending with child: _____ male female

Sports Camp ONLY

Choose sport: (please mark one) Basketball Baseball Tennis Soccer Volleyball Golf
T-shirt size: (adult sizes) S M L XL XXL

Medical Information for Youth Camps: (All camper medications must be in original bottles.)

List current prescription medications: _____

List any surgeries within the last year: _____

Date of last tetanus booster: _____

Is camper currently under physician's care? no yes Explain: _____

Is camper recovering from any injuries? no yes Explain: _____

Does camper have any of the following? asthma food allergies medication allergies convulsions other

List allergies: _____

Please explain any of the above medical conditions: _____

List physical activity limitations to hiking, running, swimming, rock climbing, rappelling, zipline, etc.: _____

Explain any other physical, emotional, or mental concerns: _____

Physician's Name & Phone: _____

Please note: any camper with an above normal temperature will be sent home.

I give permission for my child to participate in all planned activities, including indoor rock climbing, ziplines, and rappelling at HRCA.

I DO NOT give permission for my child to participate in indoor rock climbing, ziplines, and rappelling at HRCA.

I will not hold the camp management or sponsoring churches responsible for accidents caused by negligence or disobedience on the part of my child. I give permission for medical treatment if necessary. I accept primary responsibility of medical coverage while my child is participating in camp session. Further, I give Hanging Rock permission to use photos and video taken at camp in promotional materials.

Parent / Legal Guardian Signature: _____ Date: _____

Medical Insurance Co. _____ Policy No. _____