

Southeastern District Church of the Brethren Outdoor Ministries
Camper Registration Form
Camp Carmel and Camp Placid

*Please fill out the registration form completely. Leave nothing blank. Upon proper completion, mail forms to the Camp Manager or Camp Director for your camp. This information can be found at the bottom of the form or on our website: www.sedcob.org/camps/

This camper will attend _____ (name of camping session) at

Camp _____ (Carmel/Placid) from _____ (start date) to _____ (end date).

Camper First Name: _____

Last Name: _____

Date of Birth: _____ Age during camp: _____

Grade Completed: _____ Male Female

Home Phone: _____

Cell Phone: _____

Home Address: _____

City/State/Zip: _____

E-mail Address: _____

Home Church: _____

Reminder: Do NOT leave any fields blank!

If necessary, write SAME AS ABOVE or N/A.

-----**Father/Guardian**-----

-----**Mother/Guardian**-----

Name: _____

Name: _____

Street: _____

Street: _____

City: _____

City: _____

State: _____ Zip Code: _____

State: _____ Zip Code: _____

E-mail Address: _____

E-mail Address: _____

Employer: _____

Employer: _____

-----**Emergency Contact**-----

-----**Pick Up Authorization**-----

Contact Name: _____

Person(s) authorized to transport camper to/from camp: _____

Relationship to Camper: _____

Person(s) NOT authorized to transport camper to/from camp: _____

Phone: _____

FOR CAMPERS: I understand that this camp seeks to provide a safe, spiritually enthusiastic environment that allows participants to grow in Christ and to develop Christian community. All leaders, campers, and volunteers are expected to:

- Respect one another,
- Respect the camp property, including the natural setting,
- Use no profanity, tobacco products, alcohol, or illegal drugs,
- Wear modest and appropriate clothing,
- Participate and cooperate in all activities, and
- Behave in a way that is not disruptive to the program.

The camper's signature below indicates his/her willingness to abide by the above guidelines:

Camper's Signature: _____ **Date:** _____

FOR PARENTS: I understand that all campers are expected to participate in the camping program and take direction from the Camp Manager, Camp Directors, and Camp Leaders. Campers who are consistently unable to follow camp rules and/or take directions, could, at the discretion of the Camp Manager or Camp Director, be dismissed. Parents, under these circumstances, would then be contacted to make arrangements to have their camper picked up as soon as possible and prior to the scheduled end of camp.

Parent/Guardian Signature: _____ **Date:** _____

FOR PROPER REGISTRATION OF YOUR CAMPER:

Please complete and send in all of the following:

- Camper Registration Form
- Medical Record and Authorization Form
- Photo Release and Liability Release Form
- Enclosed Payment or Scholarship Application (Or other information regarding your payment)

Forms must be mailed or e-mailed to the appropriate Camp Manager(s):

Camp Carmel:

Marty & Wallace Cole
campcarmel@bellsouth.net
3037 Middlebrook Dr.
Clemmons, NC 27012
(336) 473-3126

Camp Placid:

Dot Rhoton
campplacid@outlook.com
224 Camp Placid Rd.
Blountville, TN 37617
(423) 534-9511