

# CAMP AURORA REGISTRATION AND HEALTH FORM

## Junior, Intermediate, and Senior Camps

**Camp:**  Junior Camp    Intermediate Camp  Senior Camp    (Please check appropriate box)

Male    Female    Camper's Name: \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Age (as of first day of camp):** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Parent/Guardian Names:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Parent Cell #:** \_\_\_\_\_ **Parent Work #:** \_\_\_\_\_

**Parent Email:** \_\_\_\_\_

**I would like to be in the same cabin as:** \_\_\_\_\_

**This is my first time at Aurora Lutheran Bible Camp:**  Yes  No

**List previous experience away from home:** \_\_\_\_\_

**Swimming Level/Ability:**  Beginner  Intermediate  Advanced **Level (if applicable):** \_\_\_\_\_

**Allergies/Medical Concerns:** \_\_\_\_\_

**Medications:** \_\_\_\_\_

**Family Physician:** \_\_\_\_\_ **Health Card #:** \_\_\_\_\_

**Home Church Congregation (if applicable):** \_\_\_\_\_

**Where did you hear about Aurora Lutheran Bible Camp?:** \_\_\_\_\_

**If parent/guardian cannot be reached in case of emergency, please notify:**

1) \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

2) \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

- Check here if you **DO NOT** want Camp Aurora to use this camper's image in promotional materials.
- I am fully aware of any and all possible dangers and inherent risks involved in the camp program and activities.
- I hereby release Aurora Lutheran Bible Camp, its agents, members, Camp Board, employees and volunteers and hold them harmless from any and all liability for any accident, injury or claim arising from the camper's use of Camp Aurora or any of its facilities, or by virtue of participation in any of its programs.

**I hereby agree that the above information is correct. I have read and understand the conditions of enrolment, the release and waiver and I agree to be bound by its terms.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Payment by:**  Cheque/Cash     E-transfer

**Registration:** \_\_\_\_\_

**Discount:** \_\_\_\_\_ (\$25 for payment before May 1; \$50 for bringing a friend who has never been to Camp Aurora before – Friend's name: \_\_\_\_\_)

**Canteen (optional):** \_\_\_\_\_ (maximum \$20.00)

**T-Shirt (optional):** \_\_\_\_\_ (\$20.00 each -  Youth ( S  M  L  XL )  Adult ( S  M  L  XL ))

**TOTAL:** \_\_\_\_\_