

**Bear Creek Camp – Summer Registration Form 2010**

(Side 2)

Bear Creek Camp PO Box 278 Bear Creek PA 18602

Please Print Clearly And Fill Out The Two-Sided Form Completely  
Please notify us if you have not received confirmation within 3-4 weeks.



I hereby give my child permission to attend Bear Creek Camp and participate in all special events, field trips, activities, and programs sponsored by the camp during the session they attend. The camp may use any pictures or images of my child taken while participating in special events, field trips, activities, and programs for promotional purposes, free of future claims. I understand that the camp is not financially responsible for costs related to illness or injuries that occur while my child is at camp and I agree to cover any such costs.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

CAMPER NAME: \_\_\_\_\_

AGE \_\_\_\_\_

To help ensure the best possible experience for your camper, please answer these questions completely and honestly. **Explain any "Yes" answers below.**

- 1. Has your child received counseling or medication for emotional challenges in the past 12 months? No \_\_\_ Yes \_\_\_
- 2. Are there any family crisis/problems that may influence the campers stay at camp? No \_\_\_ Yes \_\_\_
- 3. Are there any custodial rights concerning the camper that the camp should be aware of? No \_\_\_ Yes \_\_\_
- 4. Does your child have any physical limitations or injuries that may affect their participation? No \_\_\_ Yes \_\_\_
- 5. Is there any reason your child should not be placed in a group with children of their own age? No \_\_\_ Yes \_\_\_
- 6. Does your child have any special needs that our staff should be aware of? No \_\_\_ Yes \_\_\_
- 7. Are there any other issues/concerns that would be helpful for the camp or counselor to know? No \_\_\_ Yes \_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(use additional sheet if necessary)

The camp reserves the right to send home any child who refuses to follow camp rules or, in the opinion of the director(s), is unable to function adequately in the camp setting. Please indicate a person below who is able to pick up your child if you are not available.

\_\_\_\_\_  
Name (First and Last)

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Relationship to Camper

In order to assist your child's counselor in planning activities for the week, please complete the below information with your child.

Some things I enjoy doing at home are: \_\_\_\_\_

The activity I would like to do most at camp is: \_\_\_\_\_

Worries I have about going to camp are: \_\_\_\_\_

I enjoy these activities too: (please check all that apply)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Swimming               | <input type="checkbox"/> Hiking          | <input type="checkbox"/> Singing                     |
| <input type="checkbox"/> Arts & Crafts          | <input type="checkbox"/> Outdoor Cooking | <input type="checkbox"/> Acting                      |
| <input type="checkbox"/> High Ropes/Confidence  | <input type="checkbox"/> Frisbee Golf    | <input type="checkbox"/> Climbing Wall               |
| <input type="checkbox"/> Low Ropes/Teambuilding | <input type="checkbox"/> Outdoor Games   | <input type="checkbox"/> Orienteering/Compass Skills |
| <input type="checkbox"/> Sports                 | <input type="checkbox"/> Writing         | <input type="checkbox"/> Board Games                 |
| <input type="checkbox"/> Nature Programs        | <input type="checkbox"/> Reading         |  |

# Bear Creek Camp – Summer Registration Form 2010 (side 1)

Bear Creek Camp PO Box 278 Bear Creek PA 18602

Please Print Clearly And Fill Out The Two-Sided Form Completely

Please notify us if you have not received confirmation within 3-4 weeks.

Camper's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M / F \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Gender Birth Date

Grade Completed in June 2010 \_\_\_\_\_ I am a 1<sup>st</sup> Time BCC Camper \_\_\_\_\_

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

Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

Custodial Parent/Guardian Name (first & last) \_\_\_\_\_ Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ send registration confirmation to this email

Second Parent/Guardian Name (first & last) \_\_\_\_\_ Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Church Membership \_\_\_\_\_ Denomination \_\_\_\_\_ City \_\_\_\_\_

Amount of Church Subsidy \_\_\_\_\_ Pastor's Name (please print) \_\_\_\_\_ Pastor's Signature \_\_\_\_\_  
Circle one: MC/VISA/Discover **Acct #** \_\_\_\_\_ **Exp Date** \_\_\_\_\_

Billing Address \_\_\_\_\_

## Request of 1 Camp Friend

- If more than one name is listed we cannot process this request.
- Camp Friends can only be honored in pairs and when both campers request each other and campers are attending the same session and same program.
- The request for a Camp Friend cannot be guaranteed in all situations.

I Would Like To Apply For Financial Assistance \_\_\_\_\_

Program Fee \$ \_\_\_\_\_

For Early Bird Discount total payment must be Included at time of registration & postmarked by March 1, 2010.

\*If applying for a campership please do not include discounts

Pastor's Signature Discount - \_\_\_\_\_

### Discount Rates

Residential: \$10

Nature Day Camps: \$5

BCA Discount - \_\_\_\_\_

**Total Camp Fee \$** \_\_\_\_\_

Optional Canteen Card (Residential Camps) \$8 + \_\_\_\_\_

Optional Camp Photo (Residential Camps) \$8 + \_\_\_\_\_

Optional Photo CD (Residential Camps) \$8 + \_\_\_\_\_

Optional Campership Donation + \_\_\_\_\_

Weekend Stay-over \$65 + \_\_\_\_\_

**Total Due \$** \_\_\_\_\_

(Minimum \$100 Non-Refundable Camp Deposit)

**Amount Enclosed \$** \_\_\_\_\_

Please Make Checks Payable to **Bear Creek Camp**

PO Box 278 Bear Creek PA 18602

## Session Choices

**Residential Programs:** Please write a 1 in all first choice sessions and a 2 in all second choose sessions, in the grid below.

**Nature Day Camps:** Please put a check mark in all sessions you would like to attend, in the grid below.

Session 1    Session 2    Session 3    Session 4    Session 5    Session 6    Session 7    Session 8  
6/20-6/26    6/27-7/3    7/4-7/10    7/11-7/17    7/18-7/24    7/25-7/31    8/1-8/7    8/8-8/14

**Please denote all 1<sup>st</sup> choice sessions with a #1 and all 2<sup>nd</sup> choice sessions with a #2. You may sign up for more than 1 session.**

	Session 1	Session 2	Session 3	Session 4	Session 5	Session 6	Session 7	Session 8
Sample Camp	1		2		1	2		
Try-Camp A Block Completed Grades 1-2								
Try-Camp B Block Completed Grades 1-2								
Juniors Completed Grades 2-4								
Middlers Completed Grades 5-6								
Junior High Completed Grades 7-8		FLOAT TRIP						
River Runners Completed Grades 7-8								
Appalachian Adventure Completed Grades 7-8								
Seniors 2-night Completed Grades 9-11		FLOAT TRIP						
Seniors 3-night Completed Grades 9-11								
Appalachian Adventure Completed Grades 9-11								
Adirondack Expedition Completed Grades 10-12								
Disciples Completed Grades 11-12								

**Please put a checkmark to denote each Nature Day Camp session you will be attending.**

	Session 1	Session 2	Session 3	Session 4	Session 5	Session 6	Session 7	Session 8
Sample Camp	✓		✓	✓				✓
Young Naturalists Age 4- Completed Kindergarten								
Jr. Explorers Completed Grades 1-4								
Sr. Explorers Completed Grades 5-8								

## For Office Use Only

Date \_\_\_\_\_ Ck# \_\_\_\_\_ From \_\_\_\_\_ \$ \_\_\_\_\_

Date \_\_\_\_\_ Ck# \_\_\_\_\_ From \_\_\_\_\_ \$ \_\_\_\_\_ Confirmation Sent \_\_\_\_\_ by \_\_\_\_\_