

# ENCOUNTER REGISTRATION FORM

Male  Female

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade (Sept. 2019) \_\_\_\_  
 Age (as of end of Dec. 2019) Day Month Year

Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Church you attend (if any) \_\_\_\_\_

Have you been to Gardom Lake Bible Summer Camp before? Yes  No

Same tent as\* \_\_\_\_\_, \_\_\_\_\_ (please put full name)  
 \*Both campers must request each other – limited to one request

## Parent/Guardian's Signature:

By my signature, I confirm that I have read and agree with all points in the liability waiver listed below.

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

### Liability Waiver:

- The Camp Director reserves the right to dismiss a camper who, in his opinion, is a hazard to the safety and the rights of others, or who appears to have rejected the reasonable controls of camp.
- I am confident that the Gardom Lake Bible Camp staff will do their best to give my child the necessary support and supervision needed and I understand that the safety and health rules will be observed. I give camp personnel the authority to act on my behalf in case of emergency, including medical treatment. (Parent/Guardian will be notified as soon as possible). I understand that I am financially responsible.
- Where the camp program involves leaving the camp premises (e.g. overnights, canoeing, hiking, horseback riding etc.), I give permission for my child to participate.
- I hereby release Gardom Lake Bible Camp and its personnel from all claims for damages arising from any accident or injury caused by my child's participation in the camp program.
- I authorize the dispensing of medications that accompany my child and the dispensing of common over-the-counter medications that might be needed.
- The parents/guardians submitting this application are those having legal custody over the child. Conditions of custody, if applicable, will be fully communicated, in writing, to the camp, including photocopy of the section of any court order referring to visitation rights.
- The parents or guardians submitting this application understand that their child's photo will appear in the camp video and may be used in Gardom Lake Bible Camp publications.

## MEDICAL INFORMATION

Campers Full Name \_\_\_\_\_

Personal Health No. (Care Care # **Must be Included**) \_\_\_\_\_

Emergency Contact (different than parent or guardian) \_\_\_\_\_

Emergency Contact Home & Work Phone #'s \_\_\_\_\_

My Child has the following limitations/ health issues: \_\_\_\_\_

My child is on the following medication: \_\_\_\_\_

My child has the following allergies / food allergies \_\_\_\_\_

My child has the following dietary concerns (eg. Vegetarian) \_\_\_\_\_

**Free Camp T-Shirt**  
 (Please check size)  
 Youth Medium  
 Youth Large  
 Adult Small  
 Adult Medium  
 Adult Large  
 Adult X-Large

## SUMMER DATES AND RATES

Camp #	Check <input checked="" type="checkbox"/> Camp	Camp Description	Ages	Dates	Base Fee	with GST
EN#1	<input type="checkbox"/>	Encounter Aim	13-16	June 30 – July 5	\$300.00	\$315.00
EN#2	<input type="checkbox"/>	Encounter Survival	12-14	July 7 - 12	\$260.00	\$273.00
EN#3	<input type="checkbox"/>	Encounter Teen Explore	13-16	July 14 - 19	\$260.00	\$273.00
EN#4	<input type="checkbox"/>	Encounter 101	10-11	July 21 - 24	\$155.00	\$162.75
EN#5	<input type="checkbox"/>	Encounter Boys Survival	11-13	July 28 - August 2	\$250.00	\$262.50
EN#6	<input type="checkbox"/>	Girls Adventure #1	13-16	Agusut 4 - 9	\$310.00	\$325.50
EN#7	<input type="checkbox"/>	Encounter H2O Adventure	13-16	August 11 - 16	\$310.00	\$325.50
EN#8	<input type="checkbox"/>	Girls Adventure #2	11-13	August 18 - 23	\$310.00	\$325.50
Camp# _____			AGE (Dec 31, 2019): _____		Fee with GST	\$
<b>Optional MI Ravine Paintball EN Camp# 2,3 &amp; 7</b>					<b>add \$25.00</b>	\$
<b>Optional All Encounter Photo - 5x7</b>					<b>add \$3.00</b>	\$
<b>Camp USB Video - Pre-order \$12 or \$15 at time of camp</b>					<b>add \$12.00</b>	\$
<b>Tuck - Daily Candy Store Allowance - Max \$15.00 (7.50 for EN #4)</b>					<b>add desired</b>	\$
<b>ENCOUNTER CAMP REGISTRATION + extras and optional donation</b>					<b>TOTAL</b>	\$
<b>Deposit of \$50.00</b>					<b>DEPOSIT</b>	\$
<b>BALANCE DUE JUNE 1, 2019</b>				<b>BALANCE (total less deposit)</b>		
Cheque # _____	Dated: _____		Cheque Total: \$ _____			
Post-dated Cheque # _____	Dated: _____		Cheque Total: \$ _____			

Register Online at [WWW.GARDOMLAKE.CA](http://WWW.GARDOMLAKE.CA) Or Mail This Form With Deposit to: 651 GLENMARY ROAD, ENDERBY, BC V0E1V3

Phone: 250-838-6645 Fax: 250-838-9604