

All Out!! Hidden Acres Summer Camp Registration Form-2010

Last name _____

First name _____

Camp attending _____ Cost of camp \$ _____

Date of camp attending _____

Contact email _____

Boy / Girl (Circle one)

Birth date / / grade going into in the fall _____
M D Y

Parent/Guardian Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____

Evening /Cell Phone _____

Home church/City _____

Emergency Contact #1-Name, relationship & phone _____

Emergency Contact #2- _____

Cabin bunkmate request _____

Payment enclosed _____ (\$79 required minimum) Check # _____

Please use my Credit card # _____ - _____ - _____ - _____ exp ____/____
Visa-Mastercard-Discover accepted

Amount to charge \$ _____ Signature _____

Don't forget about the \$20 off early bird discount if mailed before April 1st!!

Health Information

Does your child have any special needs that Hidden Acres should anticipate (examples: medications**, diabetes, asthma, physical/mental/behavioral challenges, ADHD, etc)?

Allergies? _____ Special Diet? _____

Tetanus shot date ____/____/____

May over the counter medications be given? Yes / No (circle one)

Insurance Company _____

Address _____

City _____ State _____ Zip _____

Telephone Number _____

Policy # or SSN _____

**All medicine must be brought in original container.

1. In case of medical emergency, every attempt will be made to contact a parent/guardian. If parent/guardian cannot be found I hereby give permission to the physician selected by Hidden Acres to hospitalize and secure proper treatment for my child.
2. I approve this application and agree to the terms stated herein. I also give permission for the applicant to participate in all activities as they pertain to his/her particular program (including overnights & short trips).
3. I give my permission for the use of the camper's name and picture in any media account of this event.

_____ date _____

Parent's signature is required to register this child

Mail to: Hidden Acres 3837 Union Ave Dayton, IA 50530
515-547-2751 or www.hacamps.org or office@hacamps.org