

Additional forms available to download online at www.driftcreek.org

Camper Name _____

Address _____

City/State/Zip _____

Camper phone _____

Camper email _____

Cabin friend request (list 1-2 names) _____

Church _____ Birth date _____

Current grade as of May 2015 _____ Gender: Male Female

First time camper at Drift Creek Camp

Check box for camp week:

Parent & Me, June 19-21, \$170 Adult attending _____

Grades 9-12, June 21-26, \$250 Grades 5-6, July 5-10, \$235

Grades 7-8, June 28-July 3, \$235 Grades 3-4, July 12-17, \$235

\$ _____ Camp cost

\$ _____ Tax-deductible donation to help DCC cover expenses

less \$ _____ Discount (explain) _____

less \$ _____ Amount enclosed (\$50 minimum deposit)

\$ _____ Balance due at camp

Please charge my credit card \$ _____

Visa Card Number _____

MasterCard Exp. Date _____ CCV _ _ _

Discover Billing Zip Code _____

Signature _____ date _____

Parent/Guardian Name _____

Day Phone _____ Evening _____ Parent email _____

Insurance Name _____

Policy # _____

Physician Name _____

Physician Phone _____

Allergies _____

Physical or other restrictions (please attach explanation)

Current Tetanus (please get a tetanus before camp if not within past 10 years)

Approval is given by the parent/guardian for the camper named above to participate in Drift Creek Camp (DCC) activities except as indicated. I authorize DCC staff to approve and obtain medical attention necessary for the health and safety of the camper as ordered by professional medical personnel with the understanding that all reasonable attempts have been made to contact the parent/guardian except in the case of minor illness and/or first aid. Photographs and information of camper may be used in camp promotional publications without further consent. I understand that if my child needs to be sent home, I am responsible for providing transportation.

Signature of Parent/Guardian _____

As a camper, my responsibilities include:

1. Be respectful of other campers and staff.
2. Treat the natural surroundings and camp facilities with respect.
3. Use appropriate language.
4. Avoid public displays of affection.
5. Dress modestly.
6. Leave all candy, gum, electronic devices, knives and pranking supplies at home.

I understand that disregarding camp policies, and bullying, of any sort, will result in me being sent home immediately.

Signature of Camper _____

Drift Creek Camp is a Christ-centered ministry of the Mennonite Camp Association of Oregon, Inc

Return Form to: Drift Creek Camp • PO Box 1110 • Lincoln City OR 97367

Telephones: Camp 541-996-3978 / Office 541-992-2556

Registration

Medical

Acknowledgement