

Salvation Station International

Senior Kids' Camp 2012

Ages: 9 – 12
Monday July 2nd to Thursday July 5th

ONE FORM PER CAMPER PLEASE PRINT

Office Use Only

- Paid in Full
- Medical Issues
- Computer
- VBC License
- Meeting @ Camp

Camper's Name: _____ M or F _____ DOB: _____ Age: _____
Home Address: _____ City _____ State _____ ZIP _____
Legal Guardian: _____ Relationship _____
Home# (____) _____ Work #: (____) _____ Cell # (____) _____
Backup Contact Person: _____ Relationship _____
Home# (____) _____ Work #: (____) _____ Cell # (____) _____
Name of Doctor: _____ Telephone Number _____
Insurance Company _____ Policy Number _____
Allergies, Medications, or Medical Complications we need to be aware of: _____

Please indicate your child's shirt size: (Be as accurate as possible)

Child's S, M, L

Adult's S, M, L, XL, XXL, XXXL

I certify that I am the legal guardian of the above camper and hereby give permission for their involvement in this camp. I appoint the staff of Salvation Station to act in full authority with my consent to any and all medical, dental, and hospital care and treatment deemed necessary by a physician in case of injury or illness while participating in this camp. I understand that all attempts will be made to contact me in the case of an emergency. I release and forever discharge Salvation Station staff, camp volunteers, Family Worship Center, World Evangelism Fellowship, and World Evangelism Bible College and Seminary. To prevent panic, I agree that I will not remove my child from this camp early without signing the appropriate forms. Salvation Station will not be responsible for lost or stolen personal property. Please make sure names are on ALL ITEMS. Each camper is responsible to take care of their own "spending money". Video's and pictures taken during camp activities may be used by Sonlife Broadcasting Network, JSM, or Salvation Station to the Glory of God.

Signature of Legal Guardian: _____ Date: _____

By entering your name above you are agreeing to the conditions in the form above.

If you are a part of a church group attending this event, please tell us the name of the Church: _____

You will meet us at: FWC Baton Rouge _____ ABC Camp (Eunice, LA) _____

(Please turn over)

There are always children who, of no fault of their own, do not have the resources to be able to come to kids' camp. We hate to say "no". If you are able to sponsor a child, I know they would appreciate it.

The Registration fee of **\$130** includes a free T-shirt, transportation to and from Acadian Baptist Camp in Eunice, Louisiana, all meals and three nights in air-conditioned rooms. *Spiritual growth...no charge.*

Registration deadline is Sunday June 17th.

DO NOT FILL IN THIS SECTION UNLESS PAYMENT ACCOMPANIES THIS FORM

Deposit only (balance due before camper can be admitted): _____

Camper's Full Payment: _____

of campers you desire to sponsor _____ x **\$130**: _____

FOR ALL ADULTS: Volunteer Background Check Fee \$25: _____

Total Payment: _____

Cash _____ Money Order _____ Check _____ Credit Card _____

Credit Card Type: _____ Name on Card _____

Address: _____ City _____ State _____ Phone _____

Credit Card Number _____ Expiration Date: _____

CVN Number (Security Number located on the back of your card) _____

Amount to be placed on credit card: _____

Please make all checks payable to Salvation Station.

Rev. Michael Muzzerall
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Baton Rouge, LA 70810

(225) 768-3886
FAX (225) 768-4533
mikem@jsm.org

Check out this year's camp at www.abccamp.com. Please email all inquiries to mikem@jsm.org Transportation to and from the camp is included in this price!

There is limited space on the bus. First come...first served. Others will have to find their own way to and from the camp. We will be leaving from the church on Monday July 2nd at 1 PM from the Church. Registration starts at 10:00 AM. We will feed them lunch. We'll be back on Thursday July 5th around noon for the Award Ceremony at the FCA Gym.