

**O.V.C.C. REGISTRATION FORM -- 2020**

CAMPER'S NAME: \_\_\_\_\_ MALE ( ) FEMALE ( )

STREET/BOX: \_\_\_\_\_ E-mail? \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

DATE OF BIRTH: Mo. \_\_\_\_\_ Day \_\_\_\_\_ Yr \_\_\_\_\_ AGE LAST BIRTHDAY: \_\_\_\_\_

GRADE THIS FALL: \_\_\_\_\_ IS CAMPER AN IMMERSSED BELIEVER IN CHRIST? \_\_\_\_\_

CHURCH YOU ATTEND: \_\_\_\_\_

**CHOOSE THE RIGHT CAMP SESSION FOR YOUR AGE:**

- ( ) FIRST CHANCE, June 28 – 30, is for those entering grades 2 and 3.
- ( ) INTERMEDIATE, June 21 – 26, is for those entering grades 4, 5, or 6.
- ( ) JUNIOR HIGH, June 14 – 19, is for those entering grades 7, 8, or 9.
- ( ) SENIOR HIGH RETREAT, June 12 – 14, is for those entering grades 10, 11, or 12.

**IMPORTANT MEDICAL INFORMATION:**

<b>Has this camper had:</b>	<b>YES</b>	<b>NO</b>
Heart Disease.....	( )	( )
Asthma.....	( )	( )
Recent Infection.....	( )	( )
Current Tetanus Shot.....	( )	( )
Penicillin Allergy.....	( )	( )
Other Allergy: _____	( )	( )

**PARENT/GUARDIAN INFORMATION:**

Mother: \_\_\_\_\_

Day Phone: ( ) \_\_\_\_\_

Night Phone: ( ) \_\_\_\_\_

Father: \_\_\_\_\_

List any medication or assistance camper will bring or need during camp:

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

Day Phone: ( ) \_\_\_\_\_

Night Phone: ( ) \_\_\_\_\_

Other contact: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Phone(s): ( ) \_\_\_\_\_

Policy #: \_\_\_\_\_

In case of emergency, call: \_\_\_\_\_

I/We give permission for the camp faculty to transport our child to a place of recreation or class activity within a 30-mile radius of the campground. I/We hereby give consent and authorization for a qualified Medical Doctor to give emergency treatment, including medication and/or regularly accepted medical procedures to the camper registered above. I/We understand that the Camp provides supplemental insurance protection for medical treatment and hospitalization up to the limits of the policy. I/We understand that Camp insurance does not cover illness/disease/injury that the camper incurred prior to the date of the camping event.

Signed: \_\_\_\_\_

Cost for First Chance: \$35; Junior High & Intermediate: \$75; Senior Hi Retreat: \$45.

*Pre-Register* (form received by 1 week in advance) and get a free T-shirt. **SIZE:** (circle choice);

Adult sizing: SMALL MEDIUM LARGE X-LARGE 2XL 3XL or Youth: YS YM YL

( ) Check here if you're registering later and wish to purchase a T-shirt for \$10 (while supplies last).

If part or all of camper's fee is to be paid by your or another church, enter the following information:

Amount church will pay: \$ \_\_\_\_\_ Name of Church: \_\_\_\_\_

Signature of Minister or Elder, giving approval: \_\_\_\_\_

**SEND REGISTRATION TO:**

Ohio Valley Christian Camp  
c/o Tammy Renfrow  
2006 Calvert City Road  
Calvert City, KY 42029

*(To be filled out by Camp office:)*

Advance Registration: \_\_\_\_\_

Payment by Camper: \_\_\_\_\_

Balance due: \_\_\_\_\_