

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

# MAKE PROMISES HAPPEN 2010 CAMPER REGISTRATION FORM



MPH is a program of Central Christian Camp.

Please fill out the form COMPLETELY

Camps registering for (please check all events you would like to register for):

<u>SPRING EVENTS</u>	<u>SUMMER EVENTS</u>	<u>FALL EVENTS</u>	<u>OTHER EVENTS</u>
<input type="checkbox"/> MARCH YOUTH WEEKEND NORTHWOODS VILLAGE	<input type="checkbox"/> JULY YOUTH WEEK NORTHWOODS VILLAGE	<input type="checkbox"/> OCTOBER YOUTH WEEKEND NORTHWOODS VILLAGE	<input type="checkbox"/> OCCRA RACE ALL AGES NORTHWOODS VILLAGE
<input type="checkbox"/> MARCH YOUTH WEEKEND CAMP TANGLEWOOD	<input type="checkbox"/> JULY YOUTH WEEKEND NORTHWOODS VILLAGE	<input type="checkbox"/> OCTOBER YOUTH WEEKEND CAMP TANGLEWOOD	<input type="checkbox"/> CAMP HORIZON (PRADER- WILLI) CAMP TANGLEWOOD
<input type="checkbox"/> JAN. YOUNG ADULT WEEKEND NORTHWOODS VILLAGE	<input type="checkbox"/> JULY YOUNG ADULT WEEK CAMP TANGLEWOOD	<input type="checkbox"/> SEP. YOUNG ADULT WEEKEND NORTHWOODS VILLAGE	<input type="checkbox"/> MPH-NEUROMUSCULAR NORTHWOODS VILLAGE
<input type="checkbox"/> JAN. YOUNG ADULT WEEKEND CAMP TANGLEWOOD	<input type="checkbox"/> AUGUST YOUNG ADULT WEEK NORTHWOODS VILLAGE	<input type="checkbox"/> SEP. YOUNG ADULT WEEKEND CAMP TANGLEWOOD	
<input type="checkbox"/> FEBRUARY ADULT WEEKEND NORTHWOODS VILLAGE	<input type="checkbox"/> ADULT WITH VOLUNTEERS NORTHWOODS VILLAGE	<input type="checkbox"/> NOVEMBER ADULT WEEKEND NORTHWOODS VILLAGE	
<input type="checkbox"/> FEBRUARY ADULT WEEKEND CAMP TANGLEWOOD	<input type="checkbox"/> ADULT WITH CAREGIVERS NORTHWOODS VILLAGE	<input type="checkbox"/> NOVEMBER ADULT WEEKEND CAMP TANGLEWOOD	

New Camper \_\_\_\_\_ Returning Camper \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Shirt Size \_\_\_\_\_ (Adult or Youth)

Nickname \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

My address has changed recently

Address \_\_\_\_\_ E-mail \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

What is the camper's primary disability? \_\_\_\_\_

Does the camper have any secondary disabilities? \_\_\_\_\_

How did you hear about MPH? \_\_\_\_\_

### PARENT/ CAREGIVER INFORMATION:

1<sup>st</sup> Parent/caregiver \_\_\_\_\_ Relationship \_\_\_\_\_ E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

2<sup>nd</sup> Parent/caregiver \_\_\_\_\_ Relationship \_\_\_\_\_ E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Camper Full Name: \_\_\_\_\_

**FINANCIAL ASSISTANCE:**

[ ] If you would like set up payments for this year’s camp please check this box and complete the form below

Total amount you owe for all camps	Amount of each payment	When you can pay that amount
\$	\$	

[ ] If you would like to request a scholarship to help pay for camp please check this box and complete the form below

Name of Camp	Amount you <u>CAN</u> pay	When you can pay that amount
	\$	
	\$	
	\$	
	\$	

**EMERGENCY RELEASE:**

Central Christian Camp and Conference Center’s Make Promises Happen camping program hereinafter referred to as the “Camp” requires a signature for all attendees of the Camp and participants of the Camp activities. I hereby give permission for the camper listed on this form to attend the Camps listed on this form and to take part in all Camp activities. Also, I give permission to the Camp to provide routine health care, administer prescribed medication and to seek emergency medical treatment for the camper listed on this form.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

**PHOTO CONSENT:**

MPH regularly photographs and films our camp for fundraising and publicity purposes. The following consent form allows MPH to use your (your camper’s) photograph or film for these purposes.

In consideration of Make Promises Happen permitting me (my camper) to attend MPH camp, I hereby give my consent to MPH to use my (my camper’s) name, picture, likeness, writings, biographical information, audio tape and/or videotape recordings and sound and/or silent motion pictures of me (my camper) in any medium for editorial, educational, promotional and advertising purposes, for the solicitation of contributions and for any other purpose in the furtherance of the corporate purposes and objectives of MPH.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

[ ] Make Promises Happen embarks on adventure camping trips at different times throughout the year. These trips are by invitation only. If you or your camper would be interested in attending these trip camps, please check the box.

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**The following items are required before a camper will be registered:**

\_\_A recent photograph of the camper (recommended for new campers, but not required)

\_\_Completed Camper Registration Form with ALL signatures

\_\_The deposit amount indicated on the flyer for your camp or a completed Financial Assistance portion of this form

**Please return registration forms to:**

**Make Promises Happen  
#1 Twin Cedar Lane  
Guthrie, OK 73044**

Please visit our website at [www.centralchristiancamp.org](http://www.centralchristiancamp.org)