

Hickory Cove Bible Camp Summer 2010 Registration Form

Mail this form with your full payment to Hickory Cove Bible Camp, 170 Ferguson Lane, Taylorsville, NC 28681

PLEASE PRINT CLEARLY

Camper's Full Name _____ Date of Birth (m) _____ / (d) _____ / (y) _____
 Address _____ Preferred Name _____
 City _____ State _____ Zip _____ Age _____ Grade _____ Male Female
 (in fall 2010)
 This is a new address Home Phone (_____) _____ - _____
 Email _____ Home Church Affiliation _____
 Dorm Friends: (limit of two Dorm Friends, must be requested by all families involved) _____
 New to Hickory Cove? Yes No If so, where did you hear about Hickory Cove? _____

PARENT OR GUARDIAN INFORMATION

Name _____ Relationship to camper _____
 Address _____ Home Phone (_____) _____ - _____
 City _____ State _____ Zip _____ Cell Phone (_____) _____ - _____
 Email _____

SECOND PARENT/EMERGENCY CONTACT

Name _____ Relationship to camper _____
 Address _____ Home Phone (_____) _____ - _____
 City _____ State _____ Zip _____ Cell Phone (_____) _____ - _____
 Email _____

CALCULATE COSTS (Please check all that apply)

FEES: (Choose fee that applies)

- Camp fee (postmarked after April 15) \$275
 - Early Bird Registration Fee (postmarked no later than April 15) \$255
 - Trading Post (\$20-\$25 Recommended) \$ _____
 - Donation to Camper Scholarship Fund \$ _____
- TOTAL FEES:** \$ _____

OPTIONAL AMOUNTS:

- Trading Post (\$20-\$25 Recommended) \$ _____
- Donation to Camper Scholarship Fund \$ _____

DISCOUNTS: (call for explanation of discounts)

Choose one of the two options below, if they apply:

- \$30 Multiple Child Discount LESS \$ _____
(Two or more children from one family)
 - \$30 Military Family Discount LESS \$ _____
- TOTAL DISCOUNTS:** \$ _____

TOTAL COST: (total fee *minus* total discount) \$ _____

AMOUNT ENCLOSED: (\$50 minimum non-refundable deposit) \$ _____

BALANCE DUE: (total cost *minus* amount enclosed) \$ _____

(Final payment and medical form due by JUNE 1 for all camps)

PAYMENT METHOD: (Please check either option)

- Check - Please make payable to "Hickory Cove Bible Camp"
 - Credit Card: Master Card Visa Discover Credit Card # _____ Exp. Date _____
- Signature _____ Print Name _____

Please check the week you are registering for below:

- June 20-25, 9th-12th Grade
- July 4-9, Church Camp **FULL!**
- July 11-16, 3rd-5th #1
- July 18-23, 6th-8th Grade
- July 25-30, Church Camp **FULL!**
- August 1-6, 5th-7th Grade
- August 8-13, 3rd-5th Grade #2

Call for more information on Family Camp, July 1-4.

- Scholarship Requested (registration must be accompanied by a Scholarship Application)

The above named minor has my permission, as his/her parent or legal guardian to attend Hickory Cove Bible Camp and to participate in all aspects of the program unless I notify the camp and have specified otherwise. I am aware that some of the activities carry an inherent risk of injury. I knowingly assume full responsibility for all risk of injury. While precautions will be taken to ensure the welfare of all campers, Hickory Cove Bible Camp, it's trustees, officers, staff, and volunteers are hereby released from any and all liability in the event of any accident, injury, or illness. I further hold such parties harmless and indemnify them against any cost or charge resulting from an incident involving my child. Final permission is given to include this camper in any camp photographs, video productions and /or promotional materials without further notification or permission.

Signature _____ Print Name _____