

**2010 Blue Lake Summer Camp
Day Camp Registration Form
June 21-25**

Please print in ink. To register more than one volunteer please photocopy this form. Please only list one participant per form. Additional forms are available at www.bluelakecamp.com.

Name _____

Preferred Name for Nametag _____

Male _____ Female _____ Is this participant a Child _____ or Volunteer _____

Date of Birth _____ If child, Grade Completed _____

If Child, Name of Guardian and contact number (home/work/cell)

Guardian 1 _____

Guardian 2 _____

Address _____ City/State/Zip _____

Email (to confirm registration) _____

Church Name _____ City/State _____

Emergency Contact _____ Relationship _____ Phone _____

Participants will be divided into activity groups for Day Camp. Please use the space below to request group mates for the day.

Group Mate Request (1) _____ (2) _____

Please select the participant's T-Shirt Size from the list below.

___ Yth Small ___ Yth Medium ___ Yth Large ___ Adult Small ___ Adult Medium ___ Adult Large ___ Adult XL ___ Adult XXL ___ Adult XXXL

Please select the days you plan to attend. The cost for Day Camp is **\$30 per day or \$140 for the entire week**. The volunteer rate is **\$15 per day or \$70 for the entire week**.

___ Entire Week ___ Monday 6/21 ___ Tuesday 6/22 ___ Wednesday 6/23 ___ Thursday 6/24 ___ Friday 6/25

Cancellations and Refunds: If you cancel your registration for any reason more than 2 weeks before your camp session, then 50% of your day camp fees are refundable. If you cancel your registration for any reason less than 2 weeks before you camp session, then all fees are non-refundable.

Camp Scholarships: I would like to help Blue Lake Camp provide meaningful experiences for all children. In addition to the cost for my registration, I am enclosing \$ _____ as a contribution to help pay the camp fee for a family in need.

Credit Card Info: If paying with a credit card, please provide the information as indicated below. (We accept Visa/Mastercard/ EFT)

Account No. (and routing number if using EFT) _____

Exp. Date _____ 3 digit security code on back of card _____ Amt. to charge to card _____

Printed name of card holder _____

Signature _____

I understand and will comply with the Blue Lake Camp registration process and refund policy. I give my permission for Blue Lake Camp to use photos or videos of me in promotional materials.

Signature _____ Date _____

Please mail this form, full payment, health form, and a hold harmless form to the address below. In addition to a registration form, all volunteers must submit an adult Health form and must have a Background Check on file. Forms can be found at www.bluelakecamp.com or can be requested directly from our office.

Blue Lake Camp c/o Registrar
8500 Oakwood Lane, Andalusia, AL 36420
Phone: 334-222-5407 Fax: 334-427-1469