



2023 REGISTRATION FORM

**Mail Payment &
Registration Form To:**
NEW LIFE BIBLE CAMP.
451 TAR WATER HOLLOW RD
BUFFALO MILLS, PA 15534

You can also register online at www.newlifebiblecamp.com. Online registration is fast and easy, and it instantly secures your spot. Also remember that if you register and pay in full by April 1st, deduct \$10 from the Camp Fee.

CAMPER INFORMATION

Please use a separate registration form for each camper. Provide as much information as possible.

CAMPER Name (Given Last/First):			Camper Name (Preferred):		
CAMPER Address:		City:	ST:	Zip:	
Date of Birth: / /	Sex: M / F	Attending Church:		Grade (Fall 2019):	
Counselor Request*:		Roommate Request*:			

* New Life Bible Camp will try to fulfill these requests, but may not be able to accommodate every request. Priority is given to Roommate Requests.

ACCOUNT / HOUSEHOLD INFORMATION

Parent / Guardians - Please provide as much information as possible.

PARENT 1 Name: (First / Last):	PARENT 2 Name: (First / Last):
PARENT 1 Email:	PARENT 2 Email (Optional):
PARENT 1 Home Phone:	PARENT 2 Home Phone:
PARENT 1 Work Phone:	PARENT 2 Work Phone:
PARENT 1 Cell Phone:	PARENT 2 Cell Phone:
PARENT 1 Address:	City: ST: Zip:

EMERGENCY CONTACT INFORMATION

In the event that the primary account contacts cannot be reached.

EMERGENCY CONTACT Name:	Relationship to Camper:
EMERGENCY CONTACT Phone - HOME:	WORK: CELL:

CAMPER HEALTH INFORMATION

New Life Bible Camp provides secondary coverage for all campers.

Allergies:	Epipen Required: Y / N
Dietary Restrictions / Allergies: (New Life Bible Camp will accommodate all "Medical" dietary restrictions. We do not cater to "preference" diets.)	
Medications: In the event that your child needs medication while at camp, please select your approval or denial for the following medications. New Life will still notify you if these meds are given. Allowed / Not Allowed <input type="checkbox"/> <input type="checkbox"/> Acetaminiphen (Tylenol): <input type="checkbox"/> <input type="checkbox"/> Antihistamines (Benadryl, Diphenhydramine) <input type="checkbox"/> <input type="checkbox"/> Aspirin <input type="checkbox"/> <input type="checkbox"/> Ibuprofen (Advil) <input type="checkbox"/> <input type="checkbox"/> Pepto-Bismol <input type="checkbox"/> <input type="checkbox"/> Sore Throat Spray	Insurance Carrier: Policy / ID #: Group / Member #: Activity Restrictions: Additional comments or concerns that New Life Staff need to be aware of:
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> PLEASE INITIAL THAT YOU AGREE TO THE ABOVE. _____ </div>	
Continue to Week Selection / Payment / Signature	

Select Week(s) of Camp (Entering Grade in Fall 2023)

See the brochure for more information on fees and weeks. Remember, register and pay in full by April 1st and deduct \$10.

DAY CAMP: A day-only camp from 9:00 a.m. - 6:00 p.m. (Monday - Friday)

<input type="checkbox"/> June 12 - 16	Soccer Camp	\$160	<input type="checkbox"/> July 10 - 14	Tails	\$160
<input type="checkbox"/> June 19 - 23	Mechanics	\$160	<input type="checkbox"/> July 17 - 21	Horse Camp II	\$175
<input type="checkbox"/> June 26 - 30	Wings	\$160	<input type="checkbox"/> July 24 - 28	Scales	\$160
<input type="checkbox"/> July 3 - 7	Horse Camp I	\$175	<input type="checkbox"/> July 31 - Aug 4	Fins	\$160

CAMP KAINOS: Residential Camp at the Main Lodge

<input type="checkbox"/> June 12 - 16	Grades 2-3	\$194	<input type="checkbox"/> July 9 - 14	Grades 8-9	\$224
<input type="checkbox"/> June 18 - 23	Grades 4-5	\$214	<input type="checkbox"/> July 16 - 21	Grades 8-9	\$224
<input type="checkbox"/> June 25 - 30	Grades 4-5	\$214	<input type="checkbox"/> July 23 - 28	Grades 6-7	\$214
<input type="checkbox"/> July 2 - 7	Grades 10-12 (Teen Week)	\$240	<input type="checkbox"/> July 30 - Aug 4	Grades 6-7	\$214
<input type="checkbox"/> Optional Activity: Whitewater Rafting - Add \$50					

ADVENTURE CAMP: An Outdoor Adventure Program on Curly Mountain

<input type="checkbox"/> June 18 - 23	Explorer I (Grades 6-8)	\$256	<input type="checkbox"/> July 16 - 21	High Adventure II (Grades 9-12)	\$344
<input type="checkbox"/> June 25 - 30	High Adventure I (Grades 9-12)	\$344	<input type="checkbox"/> July 23 - 28	Water I (Grades 9-12)	\$344
<input type="checkbox"/> July 5 - 7	Junior Adventure (Grades 4-6)	\$115	<input type="checkbox"/> July 30 - Aug 4	Water II (Grades 6-8)	\$316
<input type="checkbox"/> July 9 - 14	Explorer II (Grades 6-8)	\$256			

Payment Information & Additional Requests

Camp Fees:	+ \$	Subtotal From Left Column:	\$	For more information on the following Applications, read the Registration Notes. <input type="checkbox"/> I Request a Scholarship Application <input type="checkbox"/> I Request a Weekend Application NOTE: A \$25 non-refundable deposit is required for <u>EACH</u> week of camp.
Activity Fee (Teen Week):	+ \$	Discounts:	- \$	
Snack Shop Deposit:	+ \$	TOTAL:	\$	
Subtotal:	\$	Check / Money Order #:		

Parent's Authorization Form

By signing this registration form below, I/we, as parent(s) and/or guardian(s) of my child named below, a minor, give permission for him or her camper to engage in all prescribed camp activities except as noted. I understand and certify that my child's participation in New Life Bible Camp and its activities is completely voluntary and I have familiarized myself with the camp's program and activities in which my child will be participating. I recognize that certain hazards and dangers are inherent in camp events and programs, and particularly but not limited to the activities of swimming (for those going to Shawnee Lake), hiking, horses, organized recreational activities and games, and team building activities.

I acknowledge that although New Life Bible Camp has taken safety measures to minimize the risk of injury to camp participants, New Life cannot ensure nor guarantee that the participants, equipment, premises and/or activities will be free of hazards, accidents and/or injuries. I/we, as parent(s) and/or guardian(s) of my child, a minor, acknowledge that participation in camp involves risk to the participant (and to the participant's parents or guardians, if the participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, including but not limited to exposure to COVID-19 or coronavirus(es), bodily injury, death, emotional injury, personal injury, property damage, and financial damage. I/we further recognize and have instructed my child in the importance of knowing and abiding by the camp's rules, regulations and procedures for safety of all camp participants.

By my signature on this registration form, I/we, as parent(s) and/or guardian of my child, a minor, agree to waive and forever release all claims for damage or injury to the person or property of my child, a minor, including but not limited to serious personal injury, disfigurement, and death, and to indemnify, defend, and hold harmless New Life Bible Camp, its owners, Board members (present and future), agents, servants, employees, representatives, insurers, successors, and assigns against any and all claims, suits, demands, causes of action, judgments, verdicts, costs, damages, expenses and joiners for sole liability, contribution, or indemnity which may be incurred by them as a result of any such claim, demand, or lawsuit which I/we or our agents, heirs, executors, administrators, successors, and assigns might file against them arising from my child's presence at or participation in activities at New Life Bible Camp, including reimbursement to the parties being indemnified hereunder for any attorney's fees and expenses incurred by them in connection therewith. I/we, as parent and/or guardian, also hereby give my permission to the physician selected by the camp to hospitalize, secure proper treatment for; and order injection, anesthesia, or surgery for my child, a minor. I/we, as parent and/or guardian, also grant permission for my child, a minor, to be included in camp photos, audio, and/or video that may be used for promotional purposes.

Important Note: Signature Needed

This form must be signed by the parent or legal guardian of **Child's Name:** _____
 I agree to the Parent's Authorization Policy above.

Signature of Parent or Guardian: _____

Please Print Name: _____ **Date:** ____ / ____ / ____