

CAMP JOY REGISTRATION FORM

Camper's Name _____ Age _____ D.O.B. _____
Parents' Names (Father) _____ (Mother) _____ Phone _____
Address _____ City _____ State _____ Zip _____

PLEASE READ CAREFULLY! This form must be read and signed by both parents (or guardians) before the above named child will be allowed to attend Camp JOY. Although Camp JOY and its entire staff of workers are watching and working for the safety and wellbeing of all campers, release and absolvance from all liability of sickness, accident, injury, or death is required by every parent (or guardian) and camper.

ALL CAMPERS MUST HAVE THIS FORM SIGNED!

I hereby give permission for my child to take part in all camp activities including sports (unless otherwise indicated), and absolve the camp from liability to me or my child because of any injury received while attending Camp JOY. In case of any accident or serious illness, I hereby authorize the Camp to call upon a physician of their choice and to follow his or her instructions. If emergency treatment or hospitalization is required, I request the Camp to notify me.

SIGNATURE OF BOTH PARENTS (OR GUARDIANS) (Indicates the above paragraph has been read and agreed to)

Signature(s) _____ Emergency Number (_____) _____

There is no 'pre-registration' at Camp JOY. Simply fill out the above form and submit it along with your payment when checking in your child. **Only one child may be registered per form.**

You may print up to 2 forms on one sheet of paper by re-inserting this sheet so that the next copy prints on the empty space below.