



Summer 2017 Registration

Camper Information

Camper Name _____
 Birthdate ____/____/____ Grade Entering in Fall 2017 ____
 Address _____
 City _____ State _____ Zip _____
 Home Congregation & City _____
 Special Needs _____
 Confirmation Method Email _____ USPS

Parent/Guardian Info

Father's Name _____ Mother's Name _____
 Email _____ Email _____
 Address _____ Address _____
 City/State/Zip _____ City/State/Zip _____
 Home Phone _____ Home Phone _____
 Cell Phone _____ Cell Phone _____

Check Desired Camp

- | | | |
|--|--|--|
| <input type="radio"/> Day at Camp | <input type="radio"/> Jr. High Night Life | <input type="radio"/> 7 th -9 th Grade Go Fish'N |
| <input type="radio"/> 1 st -2 nd Grade Overnight | <input type="radio"/> Fine Arts Camp | <input type="radio"/> Jr./Sr. High Horse Camp |
| <input type="radio"/> 3 th -4 th Grade Camp | <input type="radio"/> Guitar Camp | <input type="radio"/> River Canoe 50-60 Mile |
| <input type="radio"/> 5 th -6 th Outdoor Explorers | <input type="radio"/> Drama Camp | <input type="radio"/> Lake Superior Kayak |
| <input type="radio"/> 5 th -6 th Grade Camp | <input type="radio"/> Sr. High Camp | <input type="radio"/> B.U.D.D.I.E.S. |
| <input type="radio"/> 5 th -6 th Grade Half Week | <input type="radio"/> Sr. High Night Life | <input type="radio"/> Grandparent/Grandchild |
| <input type="radio"/> 5 th -6 th Grade Horse Camp | <input type="radio"/> Pioneer Outpost | <input type="radio"/> Family Weekend Camp |
| <input type="radio"/> 5 th -6 th Grade Go Fish'N | <input type="radio"/> Trailblazer Outpost | <input type="radio"/> Family Camp |
| <input type="radio"/> Jr. High Confirmation | <input type="radio"/> River Kayak | <input type="radio"/> Families with Youth with
Developmental Disabilities |
| | <input type="radio"/> River Canoe 35-40 Mile | |

Camp Date

1st Choice _____ 2nd Choice _____

Cabin Mates

1st Choice _____ 2nd Choice _____

Payment

- Check Money Order Credit Card

Card Number _____ Exp. Date _____ CVV _____

I understand and certify that my child's participation in Luther Point Bible Camp (LPBC) and its activities is completely voluntary and I have familiarized myself with LPBC's program and activities. I recognize that certain hazards and dangers are inherent in LPBC events and programs and I acknowledge that although LPBC has taken safety measures to minimize the risk of injury, LPBC cannot guarantee that the participants, equipment, premises and/or activities will be free of hazards, accidents, and/or injuries. I further recognize and have instructed my child in the importance of knowing and abiding by LPBC's rules, regulations and procedures for the safety of participants. I waive any claim against LPBC and/or its personnel for any lost articles; for any injury to my minor child; and/or any injury to myself. LPBC assumes secondary coverage. I assume primary coverage. I hereby give permission for my child to be given emergency medical care; to be transported for off-site outings; and for photographs/video including my child and/or myself to be used in the promotion of LPBC and/or the ELCA

Parent/Guardian Signature _____

Where did you hear about us _____