

# SUMMER CAMP 2016 REGISTRATION

FOR CAMPERS AND LEADERS AGES 18 AND OVER  
A BACKGROUND CHECK IS REQUIRED OF ALL THOSE AGES 18+  
BACKGROUND CHECK FEE is included in the registration cost.

JULY 3-5 • CAMP WEST, SPICEWOOD, TX

- PLEASE PRINT CLEARLY WITH BLUE OR BLACK INK
- FILL OUT ALL SECTIONS **COMPLETELY**
- THERE WILL BE A \$10 FEE ASSESSED FOR ANY INCOMPLETE FORMS

- |                          |                                   |
|--------------------------|-----------------------------------|
| <input type="checkbox"/> | <b>EARLY</b><br>\$145 BY JUNE 10  |
| <input type="checkbox"/> | <b>REGULAR</b><br>\$155 BY JULY 1 |
| <input type="checkbox"/> | <b>ON-SITE</b><br>\$170           |

## CAMPERS INFORMATION

FULL LEGAL NAME:

SEX:

BIRTHDATE:

MAILING ADDRESS:

PHONE:

CHURCH NAME:

CITY/STATE/ZIP

PASTOR'S SIGNATURE

**PLEASE ATTACH A COPY OF YOUR DRIVER'S LICENSE. FORMS WILL NOT BE PROCESSED WITHOUT A COPY OF YOUR D.L.**

## HEALTH INFORMATION

PLEASE INDICATE IF ANY OF THESE APPLY TO YOU. IF NOT, YOU MUST INDICATE WITH "NA"  
NO FORM WILL BE ACCEPTED IF BLANK. FOR EMERGENCY USE ONLY.

HEART:

DIABETES:

EYES:

LUNGS:

ALLERGIES:

EARS:

SKIN:

NERVES:

IF ANY OF THESE CONDITIONS APPLY PLEASE EXPLAIN:

DO YOU HAVE ANY PHYSICAL RESTRICTIONS?

EXPLAIN:

ARE YOU TAKING ANY SPECIAL MEDICATIONS?

EXPLAIN:

ARE YOU ALLERGIC TO ANY MEDICATION?

EXPLAIN:

## ASSUMPTION OF RISK

I \_\_\_\_\_, agree to abide by the camp policies. I understand that I will be held responsible for any medical expenses that may occur. I am willing to have a criminal background check done by a law enforcement agency. As a participant in this event, I authorize the Texas Louisiana Hispanic District Council of the Assemblies of God to use my likeness in photographs or video in any and all of its publications and in any and all other media. I will make no monetary or other claim against the District for the use of such photographs or video. I also authorize TLYM to run a background check on my behalf.

SIGNATURE:

DATE:

EMERGENCY PHONE NUMBER:

ALTERNATE PHONE NUMBER

A \$50 PER PERSON NON-REFUNDABLE CHURCH CHECK OR MONEY ORDER MADE OUT TO TLYM MUST ACCOMPANY EACH REGISTRATION FORM TO SECURE YOUR SPOT. BALANCE IS DUE UPON ARRIVAL TO CAMP.



MAIL COMPLETED FORMS TO:  
TEXAS LOUISIANA YOUTH MINISTRIES  
PO BOX 38751, Houston, TX 77238

IF YOU HAVE ANY QUESTIONS REGARDING YOUR REGISTRATION, PLEASE CONTACT THE DISTRICT OFFICE AT (281) 407-0719 or [INFO@TLYM.ORG](mailto:INFO@TLYM.ORG)

The district office is not responsible for lost, stolen or destroyed mail.

Cancellation Policy: There will be absolutely NO refunds for any registrations. However, registration may be transferred to another registrant at no additional cost.