Bridgeway Christian Church
Registration and Consent Form

Please return this form, Sierra Pines' Registration form and your payment by:
Junior High Campers: January 6
High School Campers: January 31

Name:_____
Birthday:_____ Age:_____
Address:_____
_____

Emergency Contact info
Name of Parent / Guardian:_____
Contact #:_____
Alternate #:_____
Medical Ins Carrier:_____
Doctor Name:_____
Doctor #:_____

Consent, Liability & Medical Release

I hereby authorize my child to attend the Sierra Pines Winter Camp, and state to the best of my knowledge my child is healthy and fit for an active program. I acknowledge that there may be the inherent possibility of risk and therefore release all parties involved from any liability for loss, damage, injury, disease or death involving my child, resulting from any activities during this trip; January 22-24, 2010 (Junior High) or February 12-15, 2010 (High School).

Further I authorize the staff and/or volunteer adult leaders for this trip to consent for any medical care, dental care or both in the event that it is needed, in the event that I cannot be reached. Refuge Youth Ministries/Edge Youth Ministries or Bridgeway Christian Church are not liable for lost or stolen property.

Signed:_____ DATE:_____