

# Peterkin Camp and Conference Center 2009 Summer Camp Registration

Please complete one form per camper per camp. Camp fees can be found on page 2.

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| <input type="checkbox"/> <b>Senior Camp</b> (June 21-27)       | <input type="checkbox"/> <b>Family Camp</b> (July 19-25)           |
| <input type="checkbox"/> <b>Mini Camp</b> (June 29-July1)      | <input type="checkbox"/> <b>Hallelujah Hike</b> (July 25-August 1) |
| <input type="checkbox"/> <b>Junior Camp</b> (July 5-11)        | <input type="checkbox"/> <b>Creative Arts</b> (July 26-August 1)   |
| <input type="checkbox"/> <b>Intermediate Camp</b> (July 12-18) |  |

## Camper Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Male Female  
Camper Email: \_\_\_\_\_ Grade in Fall '09: \_\_\_\_\_ T-shirt Size: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Name you wish to go by at camp: \_\_\_\_\_

## Parent/Guardian Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work/Day #: \_\_\_\_\_  
Diocese or Denomination: \_\_\_\_\_ Church: \_\_\_\_\_

## Transportation Information:

We must know in writing who will be transporting your child from camp to home. Only the person authorized by the parent/guardian will be permitted to transport your child home from camp.

\_\_\_\_\_ is authorized to transport \_\_\_\_\_ from Peterkin to home.  
(Driver's name) (Camper's name)

A part of the camp checkout procedure is the verification of the name of the person authorized to transport the camper home. Please notify Peterkin before the close of camp if there is a change from the person named above.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Camper Name: \_\_\_\_\_

**NOTE: It is the policy of the Diocese of West Virginia that no young person be denied the Peterkin camping experience because of cost. Scholarships are available through your local congregation. Please contact Peterkin (304-822-4519) if you need further financial assistance, but please do so by April 15, 2009.**

Name of person responsible for payment: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Method of payment (check all that apply):  Check  Visa or MasterCard  Scholarship

Please make checks payable to **Peterkin Camp and Conference Center**.

If using Visa or Mastercard, Name on card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

Camp Fee \_\_\_\_\_

Amount Enclosed \* - \_\_\_\_\_

Balance Due (30 days before start of camp) = \_\_\_\_\_

If applicable:

Scholarship Amount \_\_\_\_\_

Provided by: \_\_\_\_\_

*\* A minimum of a \$50 deposit is required with each camper registration. This deposit is non-refundable in the event of cancellation.*

<b>Camp Fees</b>		
<i>Register by April 15, 2009 to receive the discounted fee.</i>		
Camp	Discounted Fee	Standard Fee
Senior Camp	\$275	\$325
Mini Camp	\$150	\$175
Junior Camp	\$275	\$325
Intermediate Camp	\$275	\$325
Hallelujah Hike	\$275	\$325
Creative Arts	\$275	\$325
Family Camp:		
Adults	\$275	\$325
Ages 10-17	\$200	\$225
Under 10	\$125	\$125
Under 2	No fee	No Fee

I, the parent/guardian of \_\_\_\_\_, give permission for his/her full participation in events associated with the Peterkin Camp and Conference Center, including but not limited to trail hiking, the river float trip, and campfire activities.

I give permission for my child to travel by church van or private vehicle while at Peterkin Camp and Conference Center.

I give my permission for photographs or video footage of my child to be used by The Diocese of West Virginia and Peterkin Camp and Conference Center for promotional purposes (brochures, on diocesan websites, promotional videos, etc).

I give my permission for my child's contact information to be included on a roster and his/her participation in a group photo that will be distributed to other participants.

I agree to hold the Diocese of West Virginia, Peterkin Camp and Conference Center, and any associated agencies and persons harmless and waive any claims for payment for accident, injury, disability or damages to the person or property of the aforementioned child arising out of or connected with his/her participation in any activity related to his/her participation in the aforementioned activity.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date