

Please Print & Use Blue or Black Ink

Camper's Name \_\_\_\_\_  
Last First Middle Nickname

Mailing Address/Box # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ - \_\_\_\_\_

Home Ph. # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

Father/Guardian \_\_\_\_\_  Camper resides with  
Last First

Work Ph # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_ Cell Ph # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

Mother/Guardian \_\_\_\_\_  Camper resides with  
Last First

Work Ph # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_ Cell Ph # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

DOB: M \_\_\_\_\_ D \_\_\_\_\_ Y \_\_\_\_\_ Age \_\_\_\_\_ Grade in school (2011-2012 School Year): \_\_\_\_\_

Male  Female Have you been baptized (immersed)?  Yes  No Year Baptized: \_\_\_\_\_

Camper's Home Church \_\_\_\_\_

Sponsor Church (if not your home church) \_\_\_\_\_

Minister's Name \_\_\_\_\_ Church Phone # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Phone # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_ Emergency Cell Ph # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

Physician's Name \_\_\_\_\_ Phone # \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Health Problems: List any and all health problems. Please use the back of this form if additional space is required.

Camper may be given the following medications (or their generic equivalent) as needed:

Check All That Apply:  Tylenol only  Advil only  Both  Neither

Medications:

List all current Prescription and Non-Prescription drugs and their dosages for camper. Please use the back of this form if additional space is required.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Check All That Apply:

Epilepsy/Seizure Disorder

Sleepwalk

Asthma

Diabetes

Tetanus: Date \_\_\_\_\_ / \_\_\_\_\_

Allergies: Specify \_\_\_\_\_

Session Information: Put a (✓) next to the desired session.  
 If registering for more than one session, please complete a separate form for each.

GRADES K & 1st, SCHOOL YEAR 2011-2012 (Register for one day only)	TUITION	DISCOUNT TUITION
<input type="checkbox"/> Day Camp I - Wednesday, July 11		
<input type="checkbox"/> Day Camp II - Thursday, July 12	➔ \$50.00	If registered on or before May 18th, \$40.00
<input type="checkbox"/> Day Camp III - Friday, July 13		
GRADES 2nd & 3rd, SCHOOL YEAR 2011-2012	TUITION	DISCOUNT TUITION
<input type="checkbox"/> Ice Breaker (DORMS) - June 6-8		
<input type="checkbox"/> Ice Breaker Wilderness (TENTS) - June 6-8	➔ \$120.00	If registered on or before May 18th, \$100.00
GRADES 3rd - 5th, SCHOOL YEAR 2011-2012	TUITION	DISCOUNT TUITION
<input type="checkbox"/> Junior I (DORMS) - June 17-22		
<input type="checkbox"/> Junior Wilderness (TENTS) - June 17-22		
<input type="checkbox"/> Junior Girls (DORMS) - July 1-6	➔ \$230.00	If registered on or before May 18th, \$200.00
<input type="checkbox"/> Junior II (DORMS) - July 29-August 3		
GRADES 5th & 6th, SCHOOL YEAR 2011-2012	TUITION	DISCOUNT TUITION
<input type="checkbox"/> Intermediate (DORMS) - July 15-20	➔ \$230.00	If registered on or before May 18th, \$200.00
GRADES 6th - 8th, SCHOOL YEAR 2011-2012	TUITION	DISCOUNT TUITION
<input type="checkbox"/> Junior High I (DORMS) - June 10-15		
<input type="checkbox"/> Junior High II (DORMS) - June 24-29	➔ \$230.00	If registered on or before May 18th, \$200.00
<input type="checkbox"/> Junior High Wilderness (TENTS) - June 24-29		
GRADES 8th - 12th, SCHOOL YEAR 2011-2012	TUITION	DISCOUNT TUITION
<input type="checkbox"/> High School Wilderness (TENTS) - June 10-15		
<input type="checkbox"/> High School (DORMS) - July 22-27	➔ \$230.00	If registered on or before May 18th, \$200.00

Please read, sign and date.

I certify that my child is in sound physical condition and is permitted to engage in all camp activities except the following:

This application is made with my approval and I hereby release Hilltop Christian Camp from any responsibility other than normal supervision and care. I give my permission to Hilltop to transport my child off-site for a scheduled camp activity, or for purposes of traveling to/from a medical treatment facility. In case of an accident, I will not hold Hilltop, its management, faculty, staff or directors liable unless guilty of negligence. In an emergency, I give my permission to the physician selected by the camp management to hospitalize & secure treatment including injection, anesthesia or surgery if needed for the above camper. I understand that every effort will be made to contact me in an emergency before medical treatment is administered.

Media Policy: I understand that throughout the course of a camp session my child may be photographed. I also understand that the ministry of Hilltop Christian Camp uses these photographs for the express purpose of camp promotion. Your signature indicates that you have been informed of our policy.

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

Date \_\_\_\_\_

Please Do Not Write Here

\$\$ Received With Form

Tuition \$ \_\_\_\_\_ Mission \$ \_\_\_\_\_

Total Received \$ \_\_\_\_\_ Due \$ \_\_\_\_\_

\$\$ Received At Check-in

Tuition \$ \_\_\_\_\_ Mission \$ \_\_\_\_\_

Total \$ \_\_\_\_\_ Amount Due \$ \_\_\_\_\_

Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Date Reg. Received \_\_\_\_\_

Registration # \_\_\_\_\_

DO NOT WRITE IN THIS BOX

Hilltop Christian Camp performs criminal history background checks on all adult paid staff and summer camp volunteers.

\$\$ Amounts Enclosed With Form

PreReg/Tuition - - - - \$ \_\_\_\_\_

Mission - - - - - \$ \_\_\_\_\_

Total Sent \$ \_\_\_\_\_

X - Method of Payment

Check # \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

M.O. # \_\_\_\_\_

NOTE: Credit card option available ONLY when registering online, or when paying any balance due at check in.

T-Shirt Size:

(please place an "X" in appropriate box)

Youth Sizes:

2-4 (XS)  6-8 (S)  10-12 (M)  14-16 (L)

Adult Sizes:

S  M  L

XL  2X  3X  4X

Dorm & Roommate Selection

Dorm Choice: (Note: Neither dorm is air conditioned!)

Campbell Complex (First come basis)

Dorm On The Hill

Roommate Request:

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

(Roommate must register at same time and for the same dorm – List only ONE name. If numerous names are listed only one will be considered.)