

CAMPER - Camp Standlee 2009 Application

Questions Call: (816) 842-3698

Fee: \$125.00

Name _____ Age _____ Grade _____ Male Female

Address _____

City _____ State _____ Zip _____

Home Phone W/ Area Code (____)____ - _____ Emergency Phone W/ Area Code (____)____ - _____

Race: Caucasian Black Asian Hispanic Native American Other _____

Email Address:

Church Attending _____ Church Phone (____)____ - _____

Address _____

City _____ State _____ Zip _____

Pastors Name _____

Parent or Guardian's Name _____

Permission from you as parents or guardian must be granted before your child will be allowed to participate in swimming, boating or fishing.



Parent or Guardian's Signature

IT IS IMPORTANT THAT YOU HAVE YOUR OWN HOSPITALIZATION COMPANY!

This information must be filled out completely in order to process this application.

Name of Insurance Company _____

Policy or Group Number _____

I hereby give permission to a doctor and hospital with proper credentials to give emergency treatment to:
(Individuals or Child's Name) _____

We must have your signature, even if you do not have insurance. ➡



Parent or Guardian's Signature

Please indicate if you have any special medical condition and/or need for medication.

(i.e. Diabetes, Asthma, Epilepsy, Allergies, Etc.) Please label all medication clearly!

I hereby release the Evangelistic Center Church, and all supervising sponsors from all damages, injuries, claims, demands or causes of action, I or any of my family members, my heirs, executors, administrators of assigns may have arising out of the youth camp called Camp Standlee, additionally, I authorize the adults supervision sponsor to consent to any emergency medical treatment to be rendered to the person named above, should that be deemed necessary. I hereby release the Evangelistic Center Church, and all supervising sponsors assigns may have arising out of this youth camp called Camp Standlee.

We must have your signature in order for you to attend camp! ➡



Parent or Guardian's Signature

Special Requests for Counselor: _____

Special Request for Cabin Mates: _____

Special Request will be ATTEMPTED when assigning rooms BUT NOT GUARANTEED!

**ALL AREAS OF APPLICATION MUST BE COMPLETED, LEGIBLE AND SIGNED OR APPLICATION IS NOT VALID!
A \$25.00 deposit is required with your application.**