

To Be Signed by Parent/Guardian

Parent/Guardian Name

Phone(s) where you may be reached January 1-3, 2010

Please list any current medications taken regularly

Any physical condition requiring special consideration

If an emergency should arise and the parent or guardian is unable to be reached and the camper must be taken to a hospital for treatment, your signature below would give permission for treatment.

Signature: _____

Date: _____

Should the need arise, camper may be given—

- For pain relief: Circle one:

Acetaminophen (Tylenol, etc.) yes no

Ibuprofen (Motrin, Advil, etc.) yes no

- For stomach distress:

Tums, Pepto-Bismol, etc. yes no

- For insect bites:

Benedryl yes no

Winter Camp Registration

Registration Postmarked by Dec. 10th

Registration Fee \$25

Balance upon Arrival \$55

Total \$80

After December 10th, add \$10

Total \$90

**Register early—tell your friends
about this great year-end event!**

Male

Female

Name

Address

Phone

Age

**Register by December 28th
by phone or postmark by
December 24th**

“I’m loving it!”

Mail Registration and Fee to:

Grace Bible Camp
111 Bible Camp Lane
Goshen, VA 24439

Phone: 540-997-9316

Fax: 540-997-0073

Email: gbc@rica.net

www.gracebiblecamp.com