

Whispering Winds Bible Camp - Summer Camp Registration Form

1. Camper Info

1st Time Camper? Yes, this is my first year at WWBC! No, this is my ____ year coming to WWBC!

Male Female

Camper Last Name _____ First Name _____

Camper Birthdate (mm/dd/yyyy) ____/____/____ Age (at time of camp attendance) ____ * Register by May 15th to get the cost of camp

Mailing Address _____ City/State/Zip Code _____

Emergency Contact/Name/Relationship _____ Parent/Guardian Email _____

Guardian's Full Name _____ Guardian's Relationship to Camper _____

Church (if any) _____ **Pick Up Person (First and Last Name)** - can be changed with written notification

2. Health Info

Is the camper current on: Immunizations? Yes No Tetanus? Yes - Date: _____ No

Insurance Provider _____ Policy Holder _____ Policy # _____

Does camper: Sleepwalk? Bedwet? Faint? Have: Epilepsy? Diabetes? Asthma?

Please list any physical, mental, or psychological conditions requiring medication, treatment or special requirements

Current Medications Taken (names, dosage, etc.)

Please list the camper's allergies (bee stings, nuts, medications, etc.) and their reactions and treatments (attach extra page if needed)

3. Camp Selection

Date	X	Camp Week	Cost
June 20-25		Junior Resident 1	\$249
June 20-25		Teen Wilderness 1	\$299
June 27-July 2		Teen Resident 1	\$249
June 27-July 2		Junior Wilderness 1	\$299
July 11-16		Junior Resident 2	\$249
July 11-16		Teen Wilderness 2	\$299
July 18-23		Teen Resident 2	\$249
July 18-23		Junior Wilderness 2	\$299
July 25-30		Junior Resident 3	\$249
July 25-30		Teen Wilderness 3	\$299

Add it Up!		
Wilderness T-shirt; no longer included in camp fee		
Camp Fee	----->	
Scholarships		
Full Ride Scholarship	-\$249	
\$149 Scholarship	-\$149	
\$100 Scholarship	-\$100	
Discount		
Early Bird (May 15th)	-\$15	
Extra		
T-Shirt	+\$15	
Total =		

If purchasing a T-Shirt for \$15 circle your size

Youth: Sm Md Lg
 Adult: Sm Md Lg XL

Payment

Check by Mail
 Please mail payment to:
 Bible Impact Ministries
 PO Box 9
 St. James, MO 65559

Credit Card Online
 Credit card payments can be made online via PayPal through bibleimpact.org

At Registration

4. Parent/Guardian Agreement

I GIVE PERMISSION for Whispering Winds Bible Camp (WWBC) to secure medical treatment for the camper in case of illness or accident. I GIVE PERMISSION for my child to participate in all Summer Camp activities, both on and off camp property, either by walking or riding in camp vehicles, including (without limitation): hiking, backpacking, canoeing, kayaking, caving, water tubing, low ropes course, zip line, climbing wall and swimming. I ACKNOWLEDGE AND ACCEPT the risks involved in camping activities. I ACCEPT personal financial responsibility for any bodily injury sustained while my child is at WWBC. Furthermore, I PROMISE to hold harmless WWBC and its representatives for any injury related to Summer Camp. I GIVE PERMISSION for my child to attend Summer Camp and receive the Bible-based instruction provided. I GIVE PERMISSION to use pictures including the camper in organizational publicity.

Signature: _____
 (Must have a parent's signature if under 18)

Date: _____
 (mm/dd/yyyy)