

2021 OFCR SUMMER BIBLE CAMP REGISTRATION FORM

Online registration available at www.ofcr.org!!!

Pre-registered campers save \$10.00 & receive a free t-shirt!

PLEASE FILL OUT THIS FORM COMPLETELY AND LEGIBLY. THANK YOU!

Note: If you have any questions, a special need, or concerns, please contact the office at 208-390-9840.

Camper's name _____ Age _____ Grade next fall _____
Circle one: Male \ Female Birthdate _____
Bunkmate request _____ (We cannot guarantee this request.)
Mailing address _____ City _____ State _____ Zip _____
Name of parents/guardians _____
Home phone _____ Cell phone _____ Work phone _____
Home church _____ Church location (city) _____

I will comply with the camp rules and cooperate with the camp staff. I realize that failure to do so may result in my going home early from camp. Camper's signature _____

FINANCIAL ASSISTANCE

If you need financial assistance in order for your child to be able to attend this camp, please call the office at 208-390-9840.

REFUND POLICY

OF CR will offer a full refund until *one week* prior to your child's camp or one-half refund thereafter.

CHECK ALL THAT APPLIES: Make checks payable to OF CR.

Sr. High Camp:	July 5 th -9 th , 2021	Going into Grades 10th, 11th, 12th, Graduated Seniors
Pre-register <i>by</i> June 5 th	\$190.00 _____	Posted <i>after</i> June 5 th \$200.00 _____
Jr. High Camp:	July 12 th -16 th , 2021	Going into Grades 8th, 9th
Pre-register <i>by</i> June 12 th	\$180.00 _____	Posted <i>after</i> June 12 th \$190.00 _____
Middle School Camp:	July 19 th -23 rd , 2021	Going into Grades 6th, 7th
Pre-register <i>by</i> June 19 th	\$180.00 _____	Posted <i>after</i> June 19 th \$190.00 _____
Jr. Camp:	July 26 th -30 th , 2021	Going into Grades 4th, 5th
Pre-register <i>by</i> June 26 th	\$180.00 _____	Posted <i>after</i> June 26 th \$190.00 _____

Bus Transportation (Add \$25 for round trip transportation) + _____

Subtotal = \$ _____

Second family member (discount \$5.00) - _____

For each additional family member (discount \$10.00) - _____

If taking family member discount, simply subtract discount from cost for check total.

Total cost for this camper \$ _____

If you would like to donate to the 'Scholarship Fund' for campers needing financial assistance, please specify the amount here. \$ _____

****Both sides of this form MUST be completed for your child to attend camp.****

Medical/Personal Information

If your child *has unique health or behavioral problems, limitations, allergies, etc.*, please list and explain:

This child is covered by _____ insurance company.

Policy # _____ Date of last Tetanus shot _____

Name and phone number of youth's doctor _____

If your child has ever been arrested or been the subject of disciplinary action by any law enforcement agency, please list and explain. _____

It is necessary for us to require that the directions on the prescription must match the request of how the parents want the drug given. If you have been given different instructions by the doctor prior to camp, and it is not reflected on the present prescription bottle, you must have the doctor send a written change for said medication. The following list of drugs are those that we have on hand at camp.

Please circle the drugs that you DO NOT want your child to receive:

Tylenol	Hydrogen Peroxide	Benzocaine
Ibuprofen	Alcohol Swabs	Tussin
Jr. Strength Tylenol/Ibuprofen	Saline Solution	Nasal Decongestant
Extra Strength Tylenol	Bactine	Sucrets
Benadryl, Zyrtec	Betadine	Cough Drops
Chlortrimeton	Calamine Lotion	Anbesol
Tums	Triple Antibiotic Ointment	Skeeter Stik (for mosquito bites)
Imodium A-D	Epsom Salt	Sunscreen, Aloe
Pepto Bismol	Hydrocortisone	Latex

Parent/Camper Agreement: I understand that there are certain risks inherent in camping and sports related activities, and I agree to assume those risks on behalf of myself and my child. **I hereby authorize** the camp staff, in their complete discretion, to take whatever steps they feel are reasonable to protect the health, safety, and welfare of my child; including, but not limited to, administering, or arranging for first aid, or emergency health care on behalf of myself and my child. I hereby waive and release any civil liability claims that may arise on account of my child's attendance at this camp, or any activities associated therewith, and I agree to release and hold harmless said camp, its owners, its staff, and its agents from any such claims; whether or not said claims arise on account of their own negligence. **I understand and consent** that camp photographs/videos in which my child may appear may be used in camp publicity, publications, or promotions. **I take responsibility** for my child's behavior and acknowledge that my child will comply with the camp rules (www.ofcr.org). **I understand** if they fail to comply, it is my responsibility to arrange their transportation home. **I will not send** my child to camp if they are ill or have symptoms of illness. (See ofcr.org for our current COVID policy.)

Parent/Guardian Signature: _____

(Camper signs if 18 or older)

SEND THIS FORM, ALONG WITH YOUR CHECK, TO:

Old Faithful Christian Ranch, 145 6th Street, Idaho Falls, ID 83401

Bus transportation to camp from Idaho Falls and Driggs is only \$25 round trip.

The Idaho Falls bus will leave from Calvary Baptist Church

(on First Street) promptly at 10:30 am on Mondays.

The Driggs bus will leave from Teton Valley Bible Church at 11 am on Mondays. The buses will be returning to IF and Driggs around 3:00-3:30 pm on Fridays.