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SUMMER KIDS CAMP 2009

Beersheba Assembly
Beersheba Springs, TN
June 1-June 4

"Your word is a lamp to my feet and a light to my path."(Psalm 119:105)
"He who has my commandments and keeps them, it is he who loves Me." (John 14:21)

(Deadline for application is **May 17, 2009 including camp fee of $100**)

Personal Information:

Name: _____

Address: _____

Date of Birth: / /19 _____

Grade Level: 3 4 5 6 7 8 **Age:** _____

Home Phone #: **Email Address:** _____

Emergency Contact

Contact Name: **Contact Numbers:** _____

Insurance Information

Insurance Company: **Policy Number:** _____

Doctor's Name: **Doctor's Number:** _____

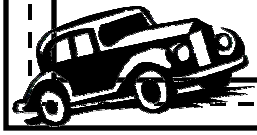
Hospital of Choice: **Medications:** _____

Other Info: _____

Roommate Preference:

1)_____ 2) _____ 3)_____

Please read and sign

I understand that my son or daughter will attend the Kids' Camp. I realize that the clergy and servants involved will exercise every precaution for my child's safety. I agree to assume full responsibility for any unforeseen accident, which might occur during participation. I further insure that my son or daughter has been instructed to comply with the clergy, servants, and camp regulations.

Parents' Name (please print): Parents' Signature: _____