

Camp WILD '12

REGISTRATION FORM (ONE PER CAMPER)

Print clearly in blue or black ink. Use N/A in areas which do not apply. Incomplete registrations cannot be processed.

Camper's Name _____

Parent/Guardian name _____

Address _____

City _____ State _____ Zip _____

Home phone _____

Cell phone _____

E-mail _____

Birthday ____/____/____ Age _____

Grade in school Fall 2012 _____

T-shirt (circle one) YM YL YXL AS AM AL

Boy Girl

Camp Wild Picture CD Cost \$10.00 Yes No

(Proceeds will go towards Camp Scholarship)

Child lives with: (*circle*) Mother Father Both Guardian

If Guardian, what is relationship to camper: _____

Send registration, signed release (see reverse) and deposit to:

EUM CHURCH

CAMP WILD

111 DEVOR ST

GREENVILLE, OH 45331

Make check or money order out to EUM Church.

SPACE IS LIMITED - REGISTER TODAY!

- July 15—18 \$200.00
Entering grades 2-3
- July 15—20 \$295.00
Entering grades 4-6

OFFICE USE
ONLY

Ck. # _____

Cash _____

A non-refundable deposit of \$50 (cash or check) is **due with registration** and will be applied toward camp fee. Payments may be made with total balance due (check, cash, credit card, fundraiser proceeds, online or a combination of such) by Saturday, April 24, 2012. For more information on how to make payments online, call Liz Gable at 548-3211 ext. 202.

Please mail me information on how to reduce my child's fees by:

- Fundraising
- Being a counselor
- Applying for partial scholarship with financial disclosure and application form per camper

If you have registration questions, call Liz Gable, Camp WILD Registration Clerk at 548-3211 ext. 202. Leave a message and she will return your call as soon as possible.

Full Payment by CREDIT CARD to United Methodist Camps

Cost of Event _____

VISA MasterCard

_____ - _____ - _____ - _____

Exp: ____/____

Print name as shown on card:

Signature as shown on card:

**RELEASE FORM ON BACK MUST BE FILLED OUT FOR
REGISTRATION TO BE COMPLETE**

UNITED METHODIST CAMPS RELEASE OF LIABILITY

Each United Methodist Camp and Retreat Center ("Camp") offers a variety of services and voluntary activities designed to enrich the camping experience. These services and voluntary activities may include, without limitation, the provision of food, lodging and transportation, as well as the sponsorship of challenging and educational activities often associated with camping and the outdoors, such as hiking, boating, swimming, campfires, fishing, ropes courses, horseback riding and the like. Both campers and staff members (including volunteers) may have the opportunity to participate in one or all of these activities.

While each Camp will endeavor to assure the safety of its campers and staff members, there are unavoidable risks of injury—and even death—associated with camping and its related services and activities. Consequently, a properly executed Release of Liability is required before anyone may attend a Camp as either a Camper or a staff member. Such a Release of Liability is set forth below. If you are a prospective camper or staff member under eighteen years of age, one of your parents or your legal guardian must print his or her name below and then sign and date the line designated "Parent or Guardian of Minor Camper or Staff Member". If you are a prospective camper or staff member eighteen years of age or older, you must print your name below and then sign and date the line designated "Adult Camper or Staff Member." You are encouraged to consult an attorney if you have any questions about the meaning of this document. In addition, you are encouraged to contact the Conference Camping office by phone at 1-800-437-0028 or e-mail to camps@wocumc.org if you have any questions about services or activities provided at any Camp.

By signing below, I, _____ (print neatly the appropriate name as described above, either parent of camper under 18, or camper or staff 18 and older) acknowledge and agree to the following:

1. I have read and understand the risks summarized above;
2. I understand that my participation in camp activities and receipt of camp services is voluntary;
3. In consideration of attending a United Methodist Camp(s) as a camper or staff member, I expressly assume the risks of such attendance. Further, for myself and on behalf of my executors, administrators and heirs, I release and hold the West Ohio Conference of the United Methodist Church and the United Methodist Camp(s) I attend, including the owners, trustees, officers, employees, agents and volunteers of these entities, harmless from any and all claims or suits arising in any way from my attendance at a United Methodist Camp(s) for injury to my person or property or my death caused by the negligence of these entities and/or individuals; or (as appropriate);
4. In consideration of my child's attendance at a United Methodist Camp(s) as a camper or staff member, I, for myself and on behalf of my minor child and our executors, administrators and heirs, release and hold the West Ohio Conference of the United Methodist Church and the United Methodist Camp(s) my child attends including the owners, trustees, officers, employees, agents and volunteers of these entities, harmless from any and all claims or suits arising in any way from my child's attendance at a United Methodist Camp(s) for injury to my child or his or her property or his or her death caused by the negligence of these entities and/or individuals.

Parent or Guardian of Minor
Camper/Staff Member (IF UNDER 18)

Date

Adult Camper/Staff Member
(18 OR OLDER)

Date

Printed Name of Camper or Staff Member