

Registration Form

To avoid delays, please print clearly in blue or black ink. All information must be completed, use N/A in those areas which do not apply. Incomplete registrations cannot be processed. Use this form for one camper only. If needed, make copies, including back.

Name _____
Address _____
City _____ State _____
Zip _____
Birth date _____ Age _____
Boy ____ Girl ____
Current Grade in School _____
Parent / Guardian _____
Home Phone (____) _____
Work Phone (____) _____
Parent E-mail _____
Camper E-mail _____
Church Name _____
Church Address _____

Buddies: _____

You may request up to two (2) buddies (friends or siblings) to room with. Buddies must request each other.

Event Information

Please circle:

Elementary (grades 3-5) #**T30** December 27-29

Middle School (grades 6-8) #**T40** December 30-Jan 1

High School (grades 9-12) #**T50** December 27-29

Payment Information

FULL PAYMENT MUST ACCOMPANY REGISTRATION

Cost of Event: _____ **\$105** _____

Check or Money Order enclosed: _____
Payable to "United Methodist Camps"

Credit Card Amount: _____

Visa _____ Mastercard _____ Discover _____

Expiration Date _____ / _____

Print name as shown on card:

Signature as shown on card:

Send registration, FULL PAYMENT, and signed release form, to:

United Methodist Camps
32 Wesley Blvd
Worthington OH 43085
Or

fax with Credit Card information to:
614.781.2642 (Attn: United Methodist Camps)
(do not mail a duplicate form)

**THE RELEASE FORM ON THE BACK MUST
BE COMPLETED 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 the 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 Date
Camper or Staff Member
**(IF CAMPER OR STAFF MEMBER IS
UNDER AGE 18)**

Adult Camper or Staff Member Date
**(IF CAMPER OR STAFF MEMBER IS
AGE 18 OR OLDER)**

Printed Name of Camper or Staff Member: _____