

**PRESBYTERY OF EAST TENNESSEE
CAMP/RETREAT REGISTRATION FORM**

Check Event(s) Attending: Retreat-Camp John Speer Junior Camp-Chilhowee
 Junior Camp-Camp John Speer Middle School Camp-Chilhowee
 Middle School Camp-Camp John Speer Senior High Camp-Chilhowee
 Senior High Camp-Camp John Speer

Camper's Full Name _____ **Birthdate** ____/____/____ **Grade Completed** _____

Home Church _____ **Gender** Male Female **Roommate Request** _____

Camper's Mailing Address

Camper's Email Address _____ **Camper's Cell, if available**
_____ (____) _____ - _____

Parent/Guardian Name _____ **Parent/Guardian Email Address**

Parent/Guardian Phone Number _____ **Who will be picking up Camper?**
(____) _____ - _____ _____

Emergency Contact (other than Parent/Guardian) _____ **Relation** _____ **Phone Number**
_____ (____) _____ - _____

Insurance Company _____ **Policy/Group** _____ **Subscriber**

Camper's Medical Issues if any _____ **Primary Doctor and Phone Number**

Camper's Medical/Food Allergies _____ **Camper Medications-Medical Form Required**

Does Camper have IEP/504 at school? Yes No If Yes, contact Kelly Shanton-Youth & Children's Director at 865-705-9885. Please leave name and number for return call.

Consent for Medical & Transportation, Liability, & Photo/Media Release

To be completed by Parent/Guardian

I, _____, hereby give my consent and permission to the
(Print Parent/Guardian Name)

Presbytery of East Tennessee and its agents, to:

- give or arrange for emergency/medical/surgical/dental care & treatment (including diagnostic? Necessary for camper's well-being. I will be responsible for all reasonable charges in connection with any care and treatment rendered;
- transport my child to and from the camp and any camp-related activities or for emergency or medical reasons;
- send camper home at my expense if the camper does not comply with camp/retreat guidelines;
- use the image of the camper for all types of promotional, information, a & other media materials, which may include websites and social media _____ (Parent/Guardian Initials)
- release the Cumberland Presbyterian Church, the Presbytery of East Tennessee, and its churches, directors/leaders from any legal liability concerning, but not limited to, any incident that results in injury, illness, or death.

Parent/Guardian Signature _____ Date _____

Camper's Covenant Agreement-To be completed by the Camper

I, _____ understand and agree to:
(Print Camper Name)

- Be responsible in my actions and respect all campers and leaders.
- Follow the guideline and instruction of the camp and leaders.
- Keep an open mind and heart to the teachings of God through Christ & the Holy Spirit.
- Participate fully in all activities.

Camper's Signature _____ Date _____

Mail completed form and payment to:

Beaver Creek Cumberland Presbyterian Church/ATTN-Kelly Shanton
7225 Old Clinton Pk
Knoxville, TN 39721

If part or all fees are being paid by a Cumberland Presbyterian Church, complete the Scholarship Agreement, and send with this form.