

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

<b>Check Event(s) Attending</b>	<b>Retreats at Camp John Speer</b>	<b>Camp Chilhowee Camps</b>	<b>Camp John Speer Camps</b>
	<input type="checkbox"/> Spring Middle School Retreat <input type="checkbox"/> Fall High School Retreat	<input type="checkbox"/> Junior <input type="checkbox"/> Middle School <input type="checkbox"/> High School	<input type="checkbox"/> Junior <input type="checkbox"/> Middle School <input type="checkbox"/> High School

**Make check payable to Presb. of East TN & mail with all forms to: PETN, P. O. Box 1767, Greeneville, TN 37744**

Camper's Full Name	<i>For Camp John Speer Summer Camps only:</i>
<input style="width: 100%;" type="text"/>	Will camper be dropped off /picked up at Greeneville CPC? No Yes If Yes, Both Drop off only Pick up only

Birthdate <input style="width: 100%;" type="text"/>	Requested Roommate(s)? <input style="width: 100%;" type="text"/>	Home Church, if any <input style="width: 100%;" type="text"/>
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Grade Completed <input style="width: 100%;" type="text"/>	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Does camper have a Cell Phone? <input type="checkbox"/> Yes <input type="checkbox"/> No	Camper's Cell # <input style="width: 100%;" type="text"/>	Camper's Email ( <i>not parent's</i> ) <input style="width: 100%;" type="text"/>
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Camper's Mailing Address

Parent/Guardian Name <input style="width: 100%;" type="text"/>	Parent/Guardian Email <input style="width: 100%;" type="text"/>
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Parent/Guardian Phone #'s <input style="width: 100%;" type="text"/>	Who will pick up camper? <input style="width: 100%;" type="text"/>	Does camper have IEP/504 at school? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Additional Emergency Contact <i>Other than Parent/Guardian</i> <input style="width: 100%;" type="text"/>	Relation <input style="width: 100%;" type="text"/>	Emergency Phone # (s) ( <i>not parent's</i> ) <input style="width: 100%;" type="text"/>
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**A readable copy of both sides of Camper's Medical Insurance Card(s) must be attached to form or card/copy sent with Camper.**

Camper's Primary Doctor <input style="width: 100%;" type="text"/>	Doctor's Phone Number <input style="width: 100%;" type="text"/>	Camper's Medical Issues <input style="width: 100%;" type="text"/>
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Is camper covered by medical insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Insurance Company <input style="width: 100%;" type="text"/>	Policy/Group # <input style="width: 100%;" type="text"/>	Subscriber # <input style="width: 100%;" type="text"/>
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Has camper brought medication(s)? <input type="checkbox"/> No <input type="checkbox"/> Yes <b>If Yes, Medical Form must be completed &amp; attached.</b>	Camper's Medical / Food Allergies <input style="width: 100%;" type="text"/>
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May we give camper OTC (over the counter) medication? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any exclusions / add'l info for OTC meds? <input style="width: 100%;" type="text"/>	Does camper have any condition that requires special care? Ex. vegetarian, sleepwalker, bed-wetter, night terrors, afraid of dark, etc. <input style="width: 100%;" type="text"/>
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**Consent for Medical & Transportation, Liability & Photo/Media Release – To Be Completed by Camper's Parent/ Legal Guardian**

I,  hereby give my consent and permission to the Presbytery of East Tennessee and its agents, to:

Print Parent/Guardian Name

- 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 for any camp-related activities or for emergency or medical reasons;
- send camper home at my expense if camper does not comply with camp/retreat guidelines;
- use the image of camper for all types of promotional, informational, & other media related materials, which may include websites and social media;
- release the Cumberland Presbyterian Church, Presbytery of East Tennessee & its churches, director/leaders from any legal liability concerning, but not limited to, any incident that results in injury, illness, or death.

Parent/Guardian Signature: <input style="width: 95%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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**Camper's Covenant Agreement - To Be Completed by Camper**

I,  understand and agree to:

Print Camper Name

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

Camper's Signature: <input style="width: 95%;" type="text"/>	Date: <input style="width: 80%;" type="text"/>
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