

# 2023 BOILING SPRINGS CHRISTIAN SERVICE CAMP CAMPER REGISTRATION

**Office Use Only**

OCR \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Grade entering Fall of 2023 \_\_\_\_\_

Church Name \_\_\_\_\_

Have you been immersed for the forgiveness of your sins? (Acts 2:38) YES  NO

Have you attended BSCSC before? YES  NO  Are you interested in attending Bible College? YES  NO

"I agree to follow the rules of camp as stated in the Camper's Code of Conduct."

\_\_\_\_\_  
(Signature of camper)

Please check the camp that you will be attending. (Based on the grade you will enter in the Fall of 2023)

Before May 10    After May 10

- |  |       |       |
|--|-------|-------|
| <input type="checkbox"/> Grades 1-2; June 3 <sup>rd</sup> .....                          | \$45  | \$50  |
| <input type="checkbox"/> Grades 10-12; June 4 <sup>th</sup> - June 9 <sup>th</sup> ..... | \$200 | \$225 |
| <input type="checkbox"/> Grades 3-4; June 11 <sup>th</sup> - June 13 <sup>th</sup> ..... | \$125 | \$150 |
| <input type="checkbox"/> Grades 5-6; June 13 <sup>th</sup> - June 16 <sup>th</sup> ..... | \$150 | \$175 |
| <input type="checkbox"/> Grades 7-9; June 18 <sup>th</sup> - June 23 <sup>rd</sup> ..... | \$200 | \$225 |

**Circle T-Shirt Size**

<b>YOUTH</b>	Small	Medium	Large
<b>ADULT</b>	Sm.	Med.	Lg.    XL    2XL    3XL

There is a \$5 charge for 2X and 3X payable when ordered.  
Shirts ordered **after May 10** will not be filled.

**NEW!!** I would like to add \$\_\_\_\_\_ with my registration fee to go towards the missions offering for **Rapha House**

**REGISTRATION DEADLINE: MAY 10<sup>th</sup>, 2023**

To pre-register, return this registration form and consent to your church sponsor or pastor.

## PARENTS OR GUARDIANS:

"I hereby give my permission for my camper to go swimming with the other campers." \_\_\_\_\_  
(Signature of parent of guardian)

"I hereby give my permission for BSCSC to record my likeness and/or voice to be used in printed and online promotions or advertising." \_\_\_\_\_  
(Signature of parent of guardian)

## CONSENT TO TREAT MINOR

I (we), the undersigned parent(s) or legal guardian of (print name) \_\_\_\_\_, a minor, hereby authorize and consent to any first aid, medication, medical treatment or surgery for said minor, deemed necessary or advisable by any emergency unit, hospital, doctor, nurse, dentist, or other medical practitioner located in any state, country, or elsewhere. If possible, before treatment, I request a reasonable effort to contact me at the phone number(s) listed below. This consent shall be valid so long as said child is a minor and can be revoked only in writing and delivered personally or by certified mail to Boiling Springs Christian Service Camp, P.O. Box 884, Woodward, OK 73802. Any copy or facsimile of this consent shall be valid as an original.

Parent(s) or Legal Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Address of parent(s) or guardian(s) \_\_\_\_\_

Camper's Date of Birth \_\_\_\_\_ Date of last Tetanus Diphtheria Booster \_\_\_\_\_

Allergies to drugs, bugs, or foods \_\_\_\_\_

Any special medications or pertinent information \_\_\_\_\_

Telephone where parents may be reached in the event of an emergency \_\_\_\_\_

Name \_\_\_\_\_ Cell \_\_\_\_\_ Business \_\_\_\_\_

Name \_\_\_\_\_ Cell \_\_\_\_\_ Business \_\_\_\_\_

Family Physician \_\_\_\_\_ Telephone \_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_