P.E.A.C.E Ministries

Summer Camp 2010 Registration Form

Carson-Simpson Farm Christian Center
3405 Davisville Rd, Hatboro, PA 19040
215-659-0232 fax 215-659-5129 e-mail CSFarm@aol.com

Date rec. _____
Date ent. _____

CAMPER INFORMATION: please PRINT and use a separate form for each camper.

Camper's last name _____ First name _____ Likes to be called _____

Street Address _____ City _____

State _____ Zip _____ Home telephone ( ) _____ Email _____

Birthday _____/_____/_____ Male ____ Female___

Church Name and Town _____

School name _____School District_____ Grade completed by June 2009 _____

Name of Father/Guardian (circle) _____ Home tel. ( ) _____ Work tel. ( )_____ ext. ____

Name of Mother/Guardian (circle) _____ Home tel. ( ) _____ Work tel. ( ) _____ ext.____

EVENT NUMBER	GROUP NAME	DATES

- I give my permission for _____ to attend the above listed 2010 summer camp event with the Eastern PA Conference-UMC/Carson-Simpson Farm. I understand that part of the camping experience involves activities, arrangements and interactions that may be new to my child, and that they come with certain risks and uncertainties beyond what my child may be used to dealing with at home. I am aware of these risks, and I am assuming them on behalf of my child. I realize that no environment is risk free, and so I have instructed my child on the importance of abiding by the camp's rules, and my child and I both agree that he or she is familiar with these rules and will obey them.
- Upon signing, permission has been granted to Carson-Simpson Farm to use photos and video images of the camper for publicity purposes. This could include, but is not limited to brochures, flyers, newspaper, and use on the camp website. If you do not agree to this, you must make your request known in writing at the time of registration.

Signature of Parent or Guardian _____ Date _____
(Grandparents or other relatives may not sign unless they are the legal guardian of the camper.)