

**CAMP SHENANDOAH SPRINGS 2017 CAMP DATES/FEEES**  
**(Registration/Health Form)**

**CAMPER INFORMATION**

**NAME** \_\_\_\_\_

Age \_\_\_ Birthday \_\_\_\_\_ Grade \_\_\_ M \_\_\_ F \_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

E. Mail \_\_\_\_\_

**EMERGENCY CONTACT:**

PARENT: \_\_\_\_\_ DOCTOR: \_\_\_\_\_

**INSURANCE MEDICAL INFO**

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

**Check any conditions we need to be aware of:**

Allergies \_\_\_ Asthma \_\_\_ Seizures \_\_\_ Bee Stings \_\_\_

Sleep walking \_\_\_ Bed Wetting \_\_\_ Diet Needs \_\_\_

Other: \_\_\_\_\_

Last Tetanus shot \_\_\_\_\_

Any Restrictions \_\_\_\_\_

Leaving medications with nurse? Yes \_\_\_ No \_\_\_

**RELEASE INFO:**

PERSON OR PARENT WITH PERMISSION TO PICK UP  
 CAMPER AT CHECK-OUT:

Name: \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

June 18-24 Staff Training \_\_\_\_\_  
 June 25-30 Adventure 12&up \$325  
                   7-11 yrs. Jr. Camp \$275  
 July 2-5 Family Vacation Week  
 (Call for room by 25 July) \_\_\_\_\_  
 July 10-14 Parent/Camper Week  
 • Choose 1 Day Camp (9-5)  
 => Donation Only \_\_\_\_\_  
 July 25-29 Open Date \_\_\_\_\_  
 July 28-31 Cent Football Camp \_\_\_\_\_  
 Aug 6-11 Lake of Woods \_\_\_\_\_  
 Aug 19 Back to School Rally \_\_\_\_\_

**OPTIONS:**

Day Camps \$150  
 Registration Fee \$75  
 (enclose with this form)  
 Horseback/Instruction per ride \$25  
 Jr. Counselor (Interview Req'd) \$150

**T-Shirt Sizes:**

Child: S M L  
 Adult: S M L XL 2XL

**1<sup>ST</sup> Yr. Camper? Y N**

**FEES:** \$ \_\_\_\_\_

**ENCLOSED:** \$ \_\_\_\_\_

**BALANCE DUE:** \$ \_\_\_\_\_

**\$10 discount if registration in by 30 Apr**

**REGISTRATIONS DUE !!!**

**MAIL & PAYABLE TO:**

Camp Shenandoah Springs  
 P.O. Box 770  
 Madison, Va. 22727

**Contact:** Doug Farmer, 540-923-4300 or e-mail:

[farmerdoug@hotmail.com](mailto:farmerdoug@hotmail.com)

**2017 CAMP THEME: "TRUTH — 4 U-TH" John 8:32**