

# Joy El Retreat Registration Form

**Retreat you are registering for:** \_\_\_\_\_

**Dates of Retreat:** \_\_\_\_\_

<b>Child's Information</b>			
Name:		Individual or Church Group?	
Address:		Sex:	
City:	State:	Zip:	Home Phone:
Child E-mail:	School Grade:	Date of Birth:	
<b>Parent/Guardian Information</b>			
Name(s):			
Is address same as above? <input type="checkbox"/> YES <input type="checkbox"/> NO (If NO, please list address on the back of the page)			
Home Phone:	Work Phone:	Cell Phone:	
Parent E-mail:			
_____ <i>*Please check here if you are registering for a parent-child event and you are NOT the child's parent or guardian.</i>			
Cabinmate request – please list only ONE:			
Please indicate how you heard about this event: _____			
I have never been to Joy El and I was invited by: _____			
<b>Child's Health Information</b>			
Primary emergency contact:		Phone:	
Secondary emergency contact:		Phone:	
Health problems/concerns/restrictions:			
Allergies (food, medication, etc):			

\_\_\_\_\_ Please check here if you would like to use any available Released Time Discount. Only discounts earned through last school year are applicable to this connection event.

\_\_\_\_\_ Please check here if you are using any promotional code. List the promo code here: \_\_\_\_\_

**Parent Consent Statement**

- ◆ In signing this statement, I certify that this camper is in good health and may participate in ordinary camping activities. Joy El will in no way be responsible for medical treatment or liability resulting from physical conditions existing prior to the camper coming to this event. I hereby authorize release of medical information necessary for insurance purposes to Joy El. In the event of an emergency and I CANNOT be located, I give permission for the hospital doctor to treat my child or operate.
- ◆ I give Joy El permission to use pictures that include the camper listed above in print or internet for publicity purposes.
- ◆ I understand that providing my email address gives Joy El permission to send me news and event information.
- ◆ As a parent/guardian of \_\_\_\_\_ (camper name), I hereby fully waive, release and discharge Joy El Camps & Retreats, its agents, employees, successors and assigns, from any and all rights, claims, and actions, arising now and/or in the future, out of my child's participation in camping activities conducted by and/or under the auspices of Joy El Camps & Retreats. I further agree to indemnify and hold harmless Joy El Camps & Retreats from any claims arising out of any injury or harm my child may cause to another individual during the course of his participation in camping activities. This includes all activities described on brochures and the web page, including but not limited to the Giant Swing, Flying Squirrel, or Zip Line.
- ◆ I understand that all registration deposits are non-refundable.

\_\_\_\_\_  
Signature of parent or guardian must appear in ink

\_\_\_\_\_  
Today's Date

**Payment:**                      **Amount:** \$ \_\_\_\_\_                      **Circle One:** Cash/Card Reader/Check # \_\_\_\_\_

Name on Card:	Type:	Date:
Credit Card #:	Expiration Date:	CID: