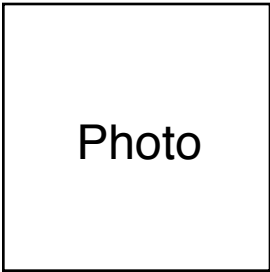


For office use only
 Age _____ Grade _____
 Rm _____
 Size _____
 Cost _____ Deposit _____
 Date Rec'd _____
 Gender: Girl _____ Boy _____

THE GOSPEL CAMPS
2011 Camp Application

Girls Camp July 9 - 16
Boys Camp July 23 - 30



This form can be filled out online or on computer.

Camper's Name _____ Preferred Name _____
 Camper's Address _____ Phone _____ Gender: Girl Boy
 City _____ State _____ Zip _____
 Mother's Name _____ Phone: Home _____ Cell _____ Wk _____
 Father's Name _____ Phone: Home _____ Cell _____ Wk _____
 E-Mail: Mother _____ Father _____
 Emergency Phone Name(s) _____ Number(s) _____
 Camper's Age at Camp Time _____ Date of Birth _____ Grade Completed by June _____

Height _____ **Weight** _____ **Date of last tetanus shot** _____

T-shirt Size (Check one) YS (sz. 6-8) YM (sz. 10-12) YL (sz. 14-16) AS AM AL AXL AXXL

Camper Wishes to Room With _____ From(city) _____

*Please Note: Each camper is permitted to choose **one** roommate of the **same age or school grade**. Please see that campers give each other's name so there is no confusion at registration.*

Camper's Doctor _____ Office Phone _____

Please explain if camper has any recurring illness, allergies, or emotional problems _____

Explain if camper has had a problem with bed wetting in the last year _____

Is camper on continuing medication? Please explain: _____

Does camper have medical insurance? Yes No If yes, please attach a copy of their medical card.

A representative of the camp has my permission to seek medical assistance for my child.

Parent or Legal Guardian

In order to ensure a pleasant, profitable camping experience for your child, please write us a note on the back of this form about anything which you feel we should know about your child.

NOTE: Campers will not be considered registered if there are any blanks on the form, if no recent picture accompanies the form, or if the \$145.00 deposit has not been received.

REGISTRATION DEADLINE JUNE 27, 2010

Forms and deposits may be mailed to 814 Sandy Lane, Ruston, LA 71270 .

Forms may also be emailed to Camps@thegospelinc.com or faxed to 318-251-1499. Payment must be made by Paypal to use these options (see our camp page at www.thegospelinc.com). Deposits must be received BEFORE camper is considered registered.