

POINT

TRAILBLAZERS Retreat 2009

4TH, 5TH, & 6TH GRADERS
OCTOBER 17TH-18TH 2PM- 2PM

TO REGISTER:

1. Fill in registration form below
2. Return it to camp with a full payment of:

**\$47 before October 1st OR \$57 after October 1st
(Includes \$10 non-refundable deposit)**

-BUT WAIT! DON'T FORGET ABOUT THE BRING-A-FRIEND DISCOUNT!

**Bring a friend who has never been to Covenant Point,
send in your forms together, and you both save \$15!**

That's \$32 before October 1st OR \$42 after October 1st!

3. Make checks payable to
Covenant Point

4. Mail to:
**Covenant Point Bible Camp
358 W. Hagerman Lake Road
Iron River, MI 49935**

MAKE SURE TO BRING:

sleeping bag, pillow, warm clothes, toiletries,
swimsuit and towel, bible,
and a friend!

YOU WON'T BE NEEDING:
CD players or iPods, cell phones,
video games, knives, etc.

TEAR HERE AND SEND IN BOTTOM

LAST NAME: _____ FIRST NAME: _____
STREET ADDRESS: _____ CITY/STATE: _____
ZIP CODE: _____ PHONE NUMBER: _____ EMERGENCY CONTACT NUMBER: _____
CIRCLE: CAMPER / COUNSELOR MALE / FEMALE GRADE IN SCHOOL: _____
IF ATTENDING WITH YOUR CHURCH- CHURCH NAME: _____ GROUP LEADER: _____
CAMPER EMAIL ADDRESS: _____
IS THIS YOUR FIRST TIME ATTENDING COVENANT POINT? YES / NO
I GIVE CONSENT FOR _____ TO ATTEND THE RETREAT AT
COVENANT POINT BIBLE CAMP IN IRON RIVER, MI FROM OCTOBER 17TH-18TH, 2009.
IN CASE OF MEDICAL EMERGENCY, I GIVE MY PERMISSION FOR ANY TREATMENT THAT IS NEEDED.
I AGREE TO TAKE RESPONSIBILITY FOR THE COST OF ALL MEDICAL TREATMENT.
I GIVE PERMISSION FOR MY CHILD'S PHOTOGRAPH TO BE USED IN FUTURE PROMOTIONAL MATERIALS.
SIGNATURE: _____ DATE: _____
PRINTED NAME: _____
INSURANCE COMPANY: _____ POLICY NUMBER: _____