

## Good Shepherd Bible Camp 2023 CAMPER Registration

Sunday, July 9 (register 2 PM-6 PM) to Saturday, July 15 (pickup 11 AM)

CAMPER PERSONAL INFORMATION				
Camper's Name			FEMALE	MALE
Address		Da	ite of Birth	
City	State _	Zip		
Home Phone	Scl	hool Grade in Se	ptember 2023 _	
"Bunking Buddy"				
(Please note that NO Cab				
What size "T" Shirt do you wear? (Ad	ult Size	es) Select One:		
Camper's WELS/ELS Home congregation:				
City Sta	ıte	Pastor's Sig	nature	
PARENT/LEGAL GUARDIAN INFORMATION				
Parent/Legal Guardian		Re	elationship	
Address				
City S				
Home Phone	Work Phone			
E Mail		Cell Phone		
I the undersigned parent/legal guardian do hereby authorize the above named camper to attend Good Shepherd Bible Camp (GSBC) during the dates listed above. In addition I authorize GSBC to use any pictures that may be taken of my child during the week to be used in future GSBC marketing materials and websites.				
Parent/Legal Guardian Signature				
Senior Campers – 9 <sup>th</sup> and 10 <sup>th</sup> Grader	.~			
Please select your Senior activity:	S			
<u>"A" Group</u> Overnight Hiker			<u>3" Group</u> full Overnight Hi	ke
Parent/Legal Guardian Signature_				

Make your check payable to Good Shepherd Bible Camp or simply "GSBC".

Please return, a) this form, b) a photo copy of your insurance card, and c) your Camp Fee by June 30th to:

Pastor E. Hansen, 5939 Magnolia Ave – Riverside, CA 92506

Staff Use Only	P	I	(		Staff Use Only
Description		Fees	Paid	Check #1- Split?	Check #2- Split?
2023 Camp Fees	s - Each Camper	\$330		Check. #	Check. #
Seniors ONLY Hike Grou	p A or B activity	\$20		Dep. #	Dep. #
Late Registration Fee -	- after June 30 <sup>th</sup>	\$30		Check \$	Check \$
Treasurer Notes:		Total>			

Camper Medical Information for (name)							
Name of Health Insurance Policy Holder (provided through Parent/Legal Guardian)							
Health Insurance Company							
		State Zip					
Group or Policy Number							
Please attach a copy of both f	ront and	back of your health insurance card!					
Family Doctor	Doctor's Office Phone Number						
Date of last Tetanus Vaccination							
List Current Medications: (Prescription or over-the-counter drugs)	Check-in Verified?	Any food, insect bites or other allergic reactions:					
1)	_ √						
2)	_ √						
3)	_ √						
4)	_ √						
5)	_ √						
ALL medicines will be checked with the camp nurse at registration/check-in time on Sunday.  You MUST bring the actual prescription for the medicines. The nurses must see the doctor's orders.							
Tou incor oring the actual prescription je	ine me	atentes. The harses must see the doctor's orders.					
Big Bear or Redlands Community Hospital, as examination, anesthetic, medical or surgical diany physician and surgeon licensed under the any hospital, whether such diagnosis or treatm. I understand that this authorization is ghospital care being required, but is given to pregive specific consent to any and all such diagnethe requirements of this authorization may, in authorization is given pursuant to the provision. I hereby authorize any hospital which I the provisions of section 25.8 of the civil code my above-named agent upon completion of treof the health and safety code of California.  This authorization shall remain in effective code of the	I the und agent for agent for agent is rent is rent iven in accordenant to sis, treat the exercines of sections provide authorized from Solivered to agent to sis, and the exercines of the exercines of the exercines provide at a provide at	dersigned parent/guardian do hereby authorize either or the undersigned to consent to any x-ray or treatment, and general or special supervision of its of the medical practice act on the medical staff on indered at the physician office or at said hospital. It dvance of any specific diagnoses, treatment, or hority or power on the part of our aforesaid agent to attend or hospital care which a physician, meeting itse of his/her judgment, deem advisable. This it is it is in 25.8 of the civil code of California. It is ded treatment to the above named minor pursuant to brain, to surrender physical custody of such minor to This authorization is given pursuant to section 1283 unday, July 9, 2023 to midnight Saturday, July 15, is said agent. You may release the above minor to the					