2018 Camper Information for Camp Peace
June 18-22, 2018 9:00 a.m. - noon
Presbyterian Church of Washington

Camper's name:_____
Last First
Gender: __ Male ___ Female Grade Completing:_____ (June 2018)
Camper's Birth Date: _____/____/_____ Age in June:_____
Home Phone: (_____)_____
Street:_____
City:_____State:_____Zip:_____

Parent/Guardian Information
Mother's/Guardian's Name:_____
Daytime Phone:(_____)_____ ___Home ____Work ____Cell phone
Alternate Phone: (_____)_____ ___Home ____Work ____Cell phone
Email Address;_____ ___No Email
Father's/Guardian's Name:_____
Daytime Phone:(_____)_____ ___Home ____Work ____Cell phone
Alternate Phone: (_____)_____ ___Home ____Work ____Cell phone
Email Address;_____ ___No Email

Emergency Contact (person other than listed above, in case we can't reach you)
Name:_____
Relationship to camper:_____
Daytime Phone:(_____)_____ ___Home ____Work ____Cell phone
Alternate Phone: (_____)_____ ___Home ____Work ____Cell phone

General Information
___Camper has a dietary restriction:_____
___ Allergies? _____
___ Permission to give Tylenol, Ibuprofen, Benadryl Signature:_____

Has camper attended Camp Peace before? ____Yes ____No

Camper attends a church? ___Yes ___No Name of Church:_____
City:_____ Pastor's Name:_____

Signature of Parent or Guardian:_____ Date:_____