

PLANTED

Nebowa Christian Camp 2022

Registration Form

Online registration is available at www.nebowa.com with secure payment options using your credit card.

Please complete **BOTH SIDES** of this form and send it with full registration fee to:

Nebowa Christian Camp, P.O. Box 222, Onawa, Iowa 51040.

Camper's Name _____

Address _____

City/State/Zip _____

Age _____ Grade this fall _____ Sex (Circle One): Male / Female

Phone _____ T-Shirt size (Circle One): **YS YM YL AS AM AL XL XXL**

Parent's Email _____

Attend Church at _____ Minister's Name _____

Are you an immersed believer? _____ Yes _____ No

Please check the camp you will attend:

CAMP

- _____ Junior Camp 1 (5-6 Grades)
- _____ First Chance (1-2 Grades; *MUST HAVE ADULT WITH THEM!*)
- _____ High School (9-12 Grades)
- _____ Jr. High 1 (7-9 Grades)
- _____ Discovery 1 (3-4 Grades)
- _____ Discovery 2 (3-4 Grades)
- _____ Jr. High 2 (7-9 Grades)
- _____ Junior 2 (5-6 Grades)
- _____ Sports Camp JV (5-8 Grade)
- _____ Sports Camp Varsity (9-12 Grade)
- _____

DATE

June 5-9
June 10-11
June 19-24
June 12-17
June 26-28
July 7-9
July 17-22
July 10-14
July 24-28
July 24-28

FEE

\$120/140*
\$70/80**
\$130/150*
\$130/150*
\$80/90*
\$80/90*
\$130/150*
\$120/140*
\$130/150*
\$130/150*

SCHOLARSHIPS AVAILABLE! Please contact Camp Manager, Mark Leonard at 712.644.7772 for more information.

RETREATS

- | | | |
|-------------------------------|-------------|-----------------------------|
| _____ Women's Retreat | August 4-7 | \$80/90* |
| _____ Young Adult Camp | July 15-17 | \$50/60* |
| _____ Family Camp | July 29-20 | \$25/ Person or \$80/Family |
| _____ Crafty Camp (for Women) | Sept. 9-11 | \$70/80* |
| _____ Man Camp | Sept. 15-17 | N/A*** |

OPTIONAL Mission Contribution

Mission Amount _____

Total Enclosed _____

Please note: If pre-registering, please mail in pre-registration by **May 31 for all camps.*

If mailed after, pay the higher fee. All canteen (snack time) costs are included in the registration price.

***First Chance Camp does not require a paid registration for each parent. All costs are included in the campers registration.*

****A free-will offering will be taken during Man Camp to help offset costs for the weekend.*

Church Official Signature _____

(only needed if church is paying part or all of registration)

In case of emergency, contact:

Parent/Guardian Names **(PLEASE PRINT)** _____

Cell Phone _____ Work Phone _____

Alternate Contact/Phone _____

Health Information

Campers Date of Birth _____

Date of last tetanus injection _____

Are you now taking any medications? (Circle One) Y / N

If so, what? _____

Are you allergic to any medications? (Circle One) Y / N

If so, what? _____

Are you allergic to any foods? (Circle One) Y / N

If so, what? _____

Please list any other allergies: _____

Any other medical problems? _____

Name of Current Insurance Provider _____

Family Physician _____

Physician Phone Number _____

By signing this form, you agree to the following:

If you (Nebowa Christian Camp) are unable to contact our family physician or it is not feasible because of distance, I give permission for camp personnel to call another physician of their choice in case of accident or serious illness.

I understand that the camp insurance is a co-insurance.
Over-the-counter medication may be given by the camp health officer if needed.

Photos and video of campers are likely to be taken during camp and used for promotional purposes unless the camp is notified by parents/guardians of their desire for their student not to appear on any media.

Parent's Signature _____ Date _____