

# 2012 Winter Retreat Registration

## Young Adult Retreat – February 17-19

Name \_\_\_\_\_

Male /  Female      Age \_\_\_\_\_ Grade \_\_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_

e-mail address \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Phone (      ) \_\_\_\_\_ Emergency #(      ) \_\_\_\_\_

Church Name \_\_\_\_\_ Pastor \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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### AS A CAMPER I PROMISE TO:

1. Respect camp property and staff, be on time for activities, and stay within the main grounds area.
2. Refrain from using profanity and I will not bring radios, CD players, electronic games, tobacco, alcohol/ drugs, or food.
3. Engage in wholesome social relationships. Relationships with the opposite sex will be kept in a group context.
4. Keep in mind that the type of clothes worn at camp is a testimony to others and should not distract. I promise to dress modestly and appropriately for camp activities. (Tank tops and short or tight shorts will not be permitted.)

Camper's Signature \_\_\_\_\_ Date \_\_\_\_\_

The camper above has my consent to attend Bethel Camp and to participate in all activities. In the event that I cannot be reached in case of an emergency I give my permission to the physician selected by the camp nurse to take necessary medical action should the camper need immediate medical attention.

Parent/Guardian (needed if camper is under 18) \_\_\_\_\_ Date \_\_\_\_\_

**Bethel Camp ----- 2773 Bethel Church Rd. ----- Clayhole, KY 41317**  
can e-mail a scanned copy of it to – [grow@bethelcamp.org](mailto:grow@bethelcamp.org)  
Call us at (606) 666-4911 if you have any questions.