

OFFICE USE ONLY:
DATE RECEIVED:

CHECK #: _____

Camp Connection Registration Form

Enclose a \$65 registration fee, which includes 2 adults and 1 child. Enclose \$5 for each additional child and \$15 for each additional adult. Limit 7 per cabin.

FAMILY NAME: _____ TOTAL ATTENDING: _____

ADDRESS: _____

Street

City

State

Zip code

Home Phone #: _____ Work or Cell Phone #: _____

Email Address: _____

(Please Indicate Year Standing)

___ New Campers, ___ 2nd Year Attending, ___ 3rd year Attending, ___ 4th Year Attending

Visually Impaired Child's name: _____ Age: _____

Adult 1: _____ Relation to Child: _____

Adult 2: _____ Relation to _____

Child: _____

Siblings: Name, Age & Relation to Child:

1. _____

2. _____

3. _____

4. _____

Preschool Child's Disability/Visual Impairment:

In case of an emergency, please list an emergency contact name & number:

(Name)

(Relation)

(Phone)

How did you learn about the Camp Connection Program? _____

Registration Fee for 1 Child & 2 Adults: = \$65.00

Additional Children (\$5 per child): = _____

Additional Adults (\$15 per adult): = _____

Total Amount Enclosed: = _____

In addition to the registration fee there is a camp fee that helps to cover the costs of the food and lodging for the program. Have you contacted Blindness & Visual Services for sponsorship of your \$150.00 camp fee?

___ No or ___ Yes. If Yes, Please give the BVS location, contact person, and phone number. _____

BEACON LODGE CAMP WILL NOT BE RESPONSIBLE FOR THE PERSONAL PROPERTY OF PARTICIPANTS OF CAMP CONNECTION, EXCEPT THOSE ARTICLES WHICH ARE CHECKED IN WITH THE CAMP COORDINATOR FOR SAFE KEEPING. IF INFORMATION IS WITHHELD ON REGISTRATION OR INFORMATION CHECKLIST FORMS THAT IS RELATIVE TO THE PRESCHOOL CHILD'S PRESENT BEHAVIOR OR MEDICAL SITUATION AND IT IS DEEMED THAT INFORMATION WAS WITHHELD, THE PA LIONS BEACON LODGE CAMP RESERVES THE RIGHT TO DISCONTINUE SERVICE.

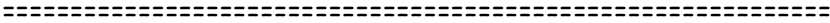
WAIVER OF RESPONSIBILITIES:

I fully understand that after reasonable precautions are taken, there are certain hazards connected with camping, and I release the pa lions beacon lodge camp and its directors, agents, and employees from liability connected with camp activities.

I further agree to release to Beacon Lodge Camp all rights and privileges to photographs or videotapes taken of me and my children to be used for camp publicity that is in the proper interest of the camp.

I have read or have caused this to be read to me, and do hereby acknowledge that i understand each and every part.

DATE: _____ SIGNATURE: _____
(PARENT OR LEGAL GUARDIAN)



CAMP CONNECTION DIETARY FORM

PRESCHOOL CHILD'S NAME: _____ AGE: _____

PARENT'S NAME(S): _____

DIETARY RESTRICTIONS/FOOD ALLERGIES: PLEASE LIST

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

DOES FOOD NEED PUREED? ___ YES, ___ NO

PLEASE LIST FOODS YOUR CHILD ENJOYS: _____

PLEASE INCLUDE ANY ADDITIONAL INFORMATION THAT MAY BE HELPFUL:

*IF A SIBLING OR PARENT HAS ANY RESTRICTIONS PLEASE INCLUDE THEM HERE:

NAME: _____ AGE: _____ RELATION: _____

DIETARY RESTRICTIONS/FOOD ALLERGIES: PLEASE LIST

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

DOES FOOD NEED PUREED? ___ YES, ___ NO

PLEASE LIST FOODS YOUR CHILD/CHILDREN ENJOY: _____

PLEASE NOTE: HELPFUL HINTS

1. If your child enjoys a particular videotape, musical CD/cassette, or favorite stuffed animal or toy, please bring those items along. Be sure to label all items brought to camp, including clothing.
2. Bed linens are provided. You will need to bring your own supply of bath towels and wash cloths.
3. Please bring beach towels for pool time.
4. Please include a dietary sheet for children with special diets and/or allergies. We will try and accommodate all requests. You will need to bring your own supply of baby foods, bottles, and any specialty foods (i.e. soy milk, thick-it, etc.)
5. Cabins are furnished with 3 bunk beds & 1 single bed. Bunk beds have side rails available. If your child needs a crib or pack-n-play you will need to bring one to camp.
6. Each cabin has its own private bathroom. Bathrooms do not have bath tubs, only showers. If you have a baby you may want to bring a kiddy tub for bathing.
7. Camp Connection begins June 12th. Registration begins at 3:00pm. Dinner starts at 5:30pm. If you can't be here for dinner, please let us know. Dinner won't begin until all families have arrived.
8. We eat all meals family style. The dinner bell will ring & all families should come to the dining hall. A short prayer before the meal begins. And then the staff will serve your tables. We do not eat until all families are present.
9. Be sure to bring an alarm clock!
10. All staff are CPR/first aid certified. A nurse will be on call all times in case of an emergency.
11. Parents/guardians are responsible for dispensing medication to their children.
12. The dining hall will remain open in the evening in the event you need to store any items in the refrigerator.