

Wilderness Christian Assembly

2026 Registration Form

Grade you were in for 2025-2026 school year

<u>Date</u>	<u>Camp</u>	<u>Grade</u>	<u>Cost</u> (<u>After June 1st</u>)	<u>Deans</u>
June 21-26	Middle School	6 th -8 th	\$200 (\$220)	Ted & Heidi Peasley
July 12-17	High School	9 th -12 th	\$200 (\$220)	Ephraim Costilow
July 19-21	First Chance	1 st -3 rd	\$115 (\$135)	Dawn Hilton
July 26-31	Intermediate	3 rd -5 th	\$200 (\$220)	Danny & Joanna Holland

Registration from 3-5 pm Sundays. Checkout 7 pm. May register up till the day of camp or to Preregister and save \$20 send:
Registration, \$20.00 non-refundable deposit, and church discount voucher(if applicable) **must be in the camp office by June 1st**
Tuition is due the day camp begins. Any registration received after June 1st will be charged (second cost amount).

1CAMPER INFORMATION (Please Print) Camp date _____ Camp session _____

Name _____ Phone (_____) _____
Last First M.I.

Mailing Address _____ City _____ St _____ Zip _____

M ___ F ___ Birthdate ___ / ___ / ___ Grade coming out of ___ Age ___ Immersed Believer? Yes No
Parents and home minister will be contacted before an immersion.

Supporting Church you are registering through _____ other _____

Sponsored by Supporting Church: *Antrim (Mancelona) Benzie (Frankfort) DeTour Kalkaska Community (Lake City) Rapid City Spencer (Kalkaska)*
First Church (Sault Saint Marie)

I want to bunk with (a) _____ (b) _____

E-mail address _____

Emergency contact person _____ Phone #'s _____

I agree to abide by the camp rules and do my best to make and keep Wilderness Christian Assembly a Christian camp. **Camper Signature:**

Designated Pick up person(s)(other than myself) to whom camper may be released (a) _____

(b) _____ (c) _____ (d) _____

Be sure to name a designated pick up person(s) whom you would allow to transport your child or we may not release your camper to anyone but you!

Authorized Signature _____ Date _____

I certify that all information is filled out and correct to the best of my knowledge

Health information

Are immunizations up to date? Yes No Date of last tetanus shot _____

Special Needs (*circle any applicable*): bed-wetting, fainting, sleep walking, allergies, other _____

List any (infectious disease) **behavioral/emotional problems**

My child has permission to enter into all the camp's programs as planned for the week. ☐ Yes ☐ No

If No please explain:

MEDICATIONS CURRENTLY BEING TAKEN BY CAMPER

CHECK YOUR

CHILD'S

SUSCEPTIBILITIES

NAME	FREQUENCY	DOSAGE			
_____	_____	_____	___poison ivy	___penicillin	___bee sting
_____	_____	_____	___hives	___hay fever	___asthma
_____	_____	_____	___ear infection	___tonsillitis	___other

The health officer may give my child as needed: ☐ Tylenol ☐ Motrin ☐ Excedrin ☐ Any pain reliever

I will not send my child to camp ill. I understand that I will be directly responsible for medical charges due to illness or accident.

I hereby give permission to Wilderness Christian Assembly, which is licensed by the State of Michigan, to provide routine, non-surgical medical care, and to secure emergency medical and surgical treatment, for _____ while attending camp. I hereby release the Assembly from any responsibility other than normal supervision and care. In case of accident, I will not hold WCA or its faculty, staff, or management liable unless guilty of gross disregard for the safety and welfare of the camper.

Insurance Co. _____ Policy # _____

Wilderness Christian Assembly has permission to use my child's picture in promotional material for the camp only, unless this box ☐ is marked by the parent.

Please mail this form with ☐ \$20 deposit, ☐ church discount voucher by June 1st,

if after June 1st - the camp cost will be the price in parenthesis () to

Wilderness Christian Assembly, 4408 Kniss Rd. SE, Kalkaska, MI, 49646.

For Office use only

Cost of Camp _____

Camper Owes _____ Church Owes _____ Scholarship _____

Registration Day Information

Check-out Signature _____ Ph# _____ Date _____

May be signed out only by designated person on registration card unless the parent or guardian provides a signed note or verified phone call documented and attached.