

Eaglecrest Winter Snow Camp 2010

Student Registration Form

Thursday, January 14th - Sunday, January 17th, 2010

Student Full Legal Name:	MEHS / SHS		
Student email:	first middle last	Date of Birth:	Male / Female
Student phone:	T-Shirt Size:	Present Grade:	Country of Citizenship:
Parent(s)/Guardian Name:			
parent email:			
Home phone:	Work Phone:		
Parent cell phone(s):	FAX :		
Mailing Address:			
City:	State:	Zip:	

Total Camp Cost: \$250

\$50 discount for full payment on October 25th Camp Sign-up day!

Full payment due January 10th

1. Camp Payment

- Cash Enclosed \$ _____
- Bank Card *use attached form*
- Check # Payable to Sitka Young Life

plus 1 of the following Insurance Options for 2 days of Medical Coverage: (to attend snow camp you MUST have insurance)

2. I have attached the Young Life Snow Skiing/Boarding Participant Enrollment Form and selected and paid for:

- \$0 *Option 1: I have my own health care coverage*
- \$10 *Option 2: Supplemental Accident Coverage*
- \$30 *Option 3: Accident Coverage*

3. I have carefully read and signed the Eaglecrest Agreement

- Eaglecrest waiver form enclosed

4. In order to participate in rock climbing with the group I have filled out the Rock Dump Waiver.

- Rock Dump Waiver form enclosed

We understand the inherent risks of the activities associated with Winter Young Life Snow Camp and will assume the risks associated therewith, whether known or unknown to us at this time. This includes all travel and activities the group participates in. There will be no illegal drug use on a Young Life Sponsored trip. Campers will be sent home immediately if found in violation of this law at the parents expense. We understand that Young Life will not be held responsible at any time for lost or stolen luggage, equipment or personal items. We have read all the enclosed documents, understand and agree to the above statements, have filled out all the requested information, and signed each form.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Send or bring registration forms and money to:

Sitka Young Life
PO Box 2046
Sitka AK 99835

Phn: 747-6024
FAX: 747-6299
office@sitka.younglife.org

Office located at:
1st Presb Church
Across the street from Baranoff Elem