Name:	Camp Attending:	
First time at Camp Bentley (fill out scholarship form) Who referred you:		
Cabin Mate Request Transportation to/from camp		
If you are coming late/leaving early please explain plans and who is allowed to pick-up camper:		
Parent's Name:	Phone:	Cell:
Address:	lress: City:	
State: Zip: Home Church:		
Age: Birthdate:	Grand Entering:	Gender:
Nearest Friend or Relative:	Phone:	Cell:
Doctor's Name:	Phone:	
Insurance Company:	Policy or	Group #:
Allergies:		
Food Allergies or dietary restrictions		
Medications:		
Medication Allergies:		
Additional Information:		
Payment check cashs	scholarship	
Please send in registrations 10 days prior to the start of camp.		

## CAMP BENTLEY REGISTRATION AND HEALTH FORM



## **Camp Bentley Youth Camp Permission Form 2025**

First and last name of youth camper: \_

## Your youth camper will not be able to participate in Camp Bentley activities unless the following agreements are signed by their parent/guardian:

**Agreement 1:** In case of an emergency, I understand that every effort will be made to contact me. If I cannot be reached, I hereby give Camp Bentley of Drake, ND, permission to act in my behalf in seeking emergency treatment for my child in the event that such treatment is deemed necessary by the Camp Director and/or the Camp Bentley Manager. I give my permission to those administering emergency treatment to do so using those measures deemed necessary. I absolve Camp Bentley from liability in acting on my behalf in this regard so long as Camp Bentley is not grossly negligent. I give permission for off-site activities. I understand my insurance has primary responsibility and Camp Bentley's insurance is secondary in paying any claims.

Parent/Guardian Signature and Date, Agreement 1

**Agreement 2:** I hereby grant Camp Bentley permission to use my/my youth's likeness in a photograph in any and all of Camp Bentley's promotions and publications, without payment or any other consideration. I hereby certify that I am the parent/guardian of the camper named above, and do hereby give my consent on behalf of this person.

Parent/Guardian Signature and Date, Agreement 2

**Agreement 3:** My child will leave his/her cell phone and other electronic devices at home. Phones brought to camp will be locked up until the end of camp. The camp phone or camp staff phones are available for emergencies.

Parent/Guardian Signature and Date, Agreement 3

Payment \_\_\_\_\_ check \_\_\_\_\_ cash \_\_\_\_\_scholarship

Please send in registrations 10 days prior to the start of camp.