

CAMP TOHIGLO 2008 • REGISTRATION FORM

OFFICE USE ONLY:

Date Reg. Fee Rec'd. _____ F.B.C. Church _____ Cabin

Reg. Amount Rec'd. _____ Date Total Fee Rec'd. _____ Registration No.

Name of camper _____ Boy Girl
(LAST NAME) (FIRST NAME)

Address _____ Email _____

City _____ State _____ Zip _____

Home phone number () _____ Parent's work number () _____

Church _____ Pastor's name _____

Is your church a member of Fellowship of Bible Churches? Yes No

Camper's age _____ Date of Birth _____ I have completed the _____ grade this year. This is my _____ year as a camper.

Fellowship of Bible Churches — **Camp Tohiglo**

HEALTH CERTIFICATE — 2008

THIS HEALTH CERTIFICATE **MUST** ACCOMPANY ANY REGISTRATION FORM. PLEASE COMPLETE BOTH SIDES.

Medical record of _____
(LAST NAME) (FIRST NAME) CABIN — NURSE USE

Address _____

City _____ State _____ Zip _____

Home phone number () _____ Emergency number () _____

Family doctor's name _____ Doctor's phone () _____ (IF PARENTS CANNOT BE REACHED)

Does or has camper had: (Answer Yes or No)

- | | | | | |
|----------------------|---------------------|----------------------|---------------------|-----------------|
| _____ Heart Trouble? | _____ Skin Trouble? | _____ Sinus Trouble? | _____ Ear Trouble? | _____ Epilepsy? |
| _____ Hernia? | _____ Hay Fever? | _____ Lung Trouble? | _____ Asthma? | _____ Diabetes? |
| _____ Allergies? | _____ Tonsillitis? | _____ Bed Wetting? | _____ Appendicitis? | _____ Other? |

Has camper had a recent tetanus shot? _____ Date of recent booster _____

Is there any information you feel that we should know concerning the camper? _____

OVER

Fellowship of Bible Churches — **Camp Tohiglo 2008**
 Mailing Address: 10670 Ft. Loudon Road, Mercersburg, PA 17236

Camp Telephone — (717) 328-2784
www.camptohiglo.org

Advance registration fee of \$15.00 (non-refundable) **must** accompany this registration.
 This fee is part of the total cost. Balance due upon arrival or send in advance.

Make check payable to: Fellowship of Bible Churches
Cost: Weeks 1-3: \$100.00 to supporting churches
 \$120.00 non-supporting churches
 Teen Week: \$110.00 to supporting churches
 \$130.00 to non-supporting churches

Send the Registration and Health Form to:
 Camp Tohiglo - Registrar
 10670 Ft. Loudon Road
 Mercersburg, PA 17236

Campers are to arrive between 2:00 and 4:00 p.m.
 on Sunday and depart 4:00 p.m. Friday
 (Teen Week Departs 7:00 p.m. Friday)

THINGS TO BRING:

Bible, pencil and pad, sleeping bag, pillow, warm pajamas, informal clothes for daytime, one piece bathing suit (no bikinis), comfortable shoes for hiking, sweater and jacket, dungarees, bathrobe (girls), toothpaste, toothbrush, towels, soap, and washcloth. A camera or ball glove is optional. All items should be marked with camper's name

SWIMMING ATTIRE:

1. Girls: A modest one piece swimsuit, no bikinis.
2. Boys: Boxer trunks only.

OVER

REGISTRATION FORM (continued)

Primary Week **July 6 - 11**

Junior Week **July 13 - 18**

Pre-Teen Week **July 20 - 25**

Teen Week **July 27 - August 1**

Week of camp I will be attending: (Check one)

Primary (Ages 7 & 8)

Junior (Ages 9 & 10)

Pre-Teen (Ages 11 & 12)

Teen (Ages 13 & up)

Suggested cabin mate (NOT FOR TEEN WEEK) _____

Parents, indicate amount camper will pay _____ and/or church will pay _____

Permission granted to publish my child's picture in publications Yes No

NEW! Name(s) of person(s) authorized to pick up my child _____
(We require written permission from parent/guardian for anyone not listed here.)

I have read and agree with registration information, including all guidelines. _____
* (SIGNATURE OF PARENT OR GUARDIAN)

HEALTH CERTIFICATE (continued)

Has camper been under medical care within the past three months? If so, for what? _____

Is the camper allergic to any drug/medicine? If so, what? _____

Is there any food that disagrees with camper? _____

All medications must be given to the CAMP NURSE on the date of arrival!

I hereby authorize the release of medical information necessary for insurance purposes to Camp Tohiglo. The Fellowship of Bible Churches will in no way be responsible for medical treatment or liability resulting from physical conditions existing prior to the child coming to camp.

If I cannot be located in the event of an emergency and there is a need for the hospital doctor to treat and/or operate:

Yes, you have my permission.

No, you do not have my permission.

* (SIGNATURE OF PARENT OR GUARDIAN)

*** IF BOTH SECTIONS NOT SIGNED, THIS APPLICATION WILL BE RETURNED FOR SIGNATURE.**

PLEASE KEEP THE BOTTOM PORTION OF THIS FORM FOR FUTURE REFERENCE.

THINGS NOT TO BRING:

Camp Tohiglo maintains high standards of Christian separation in its dress regulations and boy-girl relationships. Modest feminine attire will be acceptable such as: jeans, slacks, culottes, or shorts not more than five inches above the knees. Campers who violate these rules will not be allowed to participate in the related activities. Also do not bring radio, TV, cigarettes, liquor, drugs, or any electronic devices, including **cell phones and MP3 players.**

DEANS FOR 2008:

Primary — Rev. Fred Horner (410) 871-2157
hornerf@erols.com

Junior — Rev. Dwight Morgan (717) 597-8127
sdwight@juno.com

Pre-Teen — Rev. Dale Carver (301) 797-2812
dcarver.hbc@verizon.net

Teen — Rev. Bruce Dick (301) 797-7248
MAson1967@aol.com

FOR THE PARENTS:

1. Camp begins with the evening meal at 5:00 p.m. Sunday and ends on Friday at 4:00 p.m. (Teen Week 7:00 p.m.) Registration begins at 2:00 p.m. Sunday.
2. Campers will be expected to stay the entire period of camp except for sickness or an emergency at home.
3. All luggage and clothing must be marked with the camper's name.
4. Lost items will not be mailed unless requested. Charge is \$5.00 for postage and handling. All items will be disposed of after three months.
5. Please send the registration form at least two weeks in advance of the camper's week.
6. Parental visits should be only in case of emergency.

Please note! All forms **must** be received at least two weeks before the camper's week of camp!