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# SPRING MISSION WORK CAMP

PA CHRISTIAN ENDEAVOR

YOUTH REGISTRATION/MEDICAL INFORMATION FORM  
(UNDER 18 YEARS OF AGE)

**May 4 - 6, 2007**

**Carnegie, PA**  
South of Pittsburgh

Please print information clearly in black or blue ink

**PARTICIPANT'S NAME** \_\_\_\_\_

Gender: **M** or **F** Birth Date \_\_\_\_\_ Age \_\_\_\_\_ E-Mail \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Height \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Weight \_\_\_\_\_

**CHURCH** \_\_\_\_\_ Pastor \_\_\_\_\_

Street Address \_\_\_\_\_ Youth Leader \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**GENERAL HEALTH INFORMATION:**

In case of a medical emergency, list any medications needed; physical limitations; allergies to food, drugs or bee stings, etc; current illnesses; concerns like asthma, heart problems, diabetes, seizures, etc; and any other helpful information. *Youth leaders are responsible for dispensing any over-the-counter medications to their teens.* \_\_\_\_\_

\_\_\_\_\_ Date of last tetanus shot \_\_\_\_\_

**HEALTH INSURANCE INFORMATION:**

**Your insurance card information is necessary. Please make certain a photocopy of the front and back of your insurance card is attached to the registration form.**

Physician \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Dentist \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**OTHER EMERGENCY CONTACT PERSON: (other than a parent/guardian)**

Name \_\_\_\_\_ Relation \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

**STUDENT PARTICIPANT AGREEMENT**

By signing below, you agree to participate in the entire Life Builders, a PA Christian Endeavor Mission Work Camp program, with enthusiasm. "I will conduct myself in a Christian manner and agree to follow the Teen Guidelines and all other rules as outlined for me."

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

**Due Dates for Payment and Registration Forms**

\$80 due April 5, 2007 ♦ Registrations after April 5, 2007 – add \$20