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# L I F E B U I L D E R S

PA CHRISTIAN ENDEAVOR MISSION WORK CAMP

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

### Circle the week you would like to attend:

- June 24-30
- July 1-7
- July 8-14
- July 15-21
- July 22-28

### Circle your T-shirt size:

- S   M   L   XL   XXL   XXXL

**Please print your information clearly in black or blue ink**

### **PARTICIPANT'S NAME:** \_\_\_\_\_

Gender: **M** or **F**   Age \_\_\_\_\_   Birth Date \_\_\_\_\_   E-Mail \_\_\_\_\_  
 Street Address \_\_\_\_\_   Height \_\_\_\_\_  
 City \_\_\_\_\_   State \_\_\_\_\_   Zip \_\_\_\_\_   Weight \_\_\_\_\_  
 Phone (\_\_\_\_\_) \_\_\_\_\_   Cell (\_\_\_\_\_) \_\_\_\_\_

### **CHURCH** \_\_\_\_\_

Pastor \_\_\_\_\_  
 Street Address \_\_\_\_\_   Youth Leader \_\_\_\_\_  
 City \_\_\_\_\_   State \_\_\_\_\_   Zip \_\_\_\_\_   Phone (\_\_\_\_\_) \_\_\_\_\_

### **GENERAL HEALTH INFORMATION:**

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. PACE is not responsible for the purchase of medicine or special foods. *Youth leaders are responsible for dispensing any 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 Student Participant \_\_\_\_\_ Date \_\_\_\_\_

**Register early to save and to secure your LIFE BUILDERS week!**

Early Bird Rate is **\$285** (\$100 deposit due by 2/12/07 \* final payment and all forms due by 4/16/07)  
 After 2/12/07, the Standard Rate of **\$310** is due with registration forms by 4/16/07.

Office use only: Rcvd: \_\_\_\_\_ RE: \_\_\_\_\_ Other notes: \_\_\_\_\_