

CAMP CONSTITUTION ATTENDEE PROFILE

Singing Hills Christian Camp
Plainfield, NH ~ July 18-July 23, 2021
 (Prepare One Form per Attendee)

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Birth Date: Month/Day/Year fA A 18 8 !MMMML; YbXYf.....A5 @.....: 9A5 @		
Street Address		
City	State	Zip
Phone ()		<ca Y K cf_ AcV]Y ·
Phone ()		<ca Y K cf_ AcV]Y ·
Email or Fax No.		

DUFYbHJ`DfcZ]Y		
Name of Parent/Guardian	Attending	Self (see above profile)
Phone ()	<ca Y	K cf_ AcV]Y ·
Phone ()	<ca Y	K cf_ AcV]Y ·
Name of Parent/Guardian	Attending	Self (see above profile)
Phone ()	<ca Y	K cf_ AcV]Y
Phone ()	<ca Y	K cf_ AcV]Y

A YX]WU`9a Yf[YbWmDfcZ]Y
9A9F; 9B7M7 CBH5 7 H (Other than Parent / Guardian)
D< CB9fbL for Emergency Contact
DfYgW]VYX`A YX]WU]cb (taken regularly by Camper):
Reason for Medication
Specific Allergies
Type of Reaction
Activities to be Restricted & Reason
Does Camper have Asthma or Hay Fever?

6 cUFX]b[`DfYZfYbWg`	
Staffer: I am interested in Cabin Duty MYg	Bc in a cabin with
I would like to be in a cabin with	
<input type="checkbox"/> I am rooming with my Parent/Guardian/Family	

-bhfYgfg/ `5 V]]H]Yg`fY \ YW `5 ``H Uh5 dd`nL`	
<input type="checkbox"/> Art; <input type="checkbox"/> Chess; <input type="checkbox"/> Children's Activities; <input type="checkbox"/> Editing/Proofing; <input type="checkbox"/> Hiking; <input type="checkbox"/> Historical Trivia; <input type="checkbox"/> Juggling; <input type="checkbox"/> Lifeguard <input type="checkbox"/> Song Leader; <input type="checkbox"/> Voice / instrument () <input type="checkbox"/> Nature & Field Activity; <input type="checkbox"/> Newspaper; <input type="checkbox"/> Sports; <input type="checkbox"/> Ping-pong; <input type="checkbox"/> Skits; <input type="checkbox"/> Swimming; <input type="checkbox"/> Tug-o' War; <input type="checkbox"/> Volleyball	
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A A	

CAMP CONSTITUTION WORKSHEET

Singing Hills Christian Camp

Plainfield, NH ~ July 18-July 23, 2021

Calculate your Costs:	Qty	x Unit	= SubTotal
Adults (Non-Staff)		\$300	
Campers (ages 12 and older)		\$300	
Staff		\$250	
Jr. Campers (ages 4-11)		\$200	
Pre-Campers under age 4 [Must Board With Parent(s)]		FREE	FREE
Total Attendees:		Total	

Mail *Completed, Signed*, Registration Forms w/ *Payment / Deposit* to:

Camp Constitution
c/o Mr. Charles Everett
5945 Quail Hollow Road, Unit D
Charlotte, NC 28210-5028

Make checks payable to *Camp Constitution*

CREDIT CARD INFORMATION	Minimum Deposit = \$100
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Federal Express	<input type="checkbox"/> Check Enclosed
Card Number _____ - _____ - _____ - _____	
Expiration Date ____ / ____ V-Code _____	
Name (Please Print) <small>AS It Appears On The Credit Card</small>	
Statement Address <small>AS It Appears On The Credit Card</small>	
Signature _____	Date _____
★★★★★ Financial Assistance <u>May Be Available</u>: Contact US For More Information ★★★★★	

Checklist:

- Cost Calculation Worksheet
- Payment Information and/or Check (Include Minimum Deposit of \$100)
- 1 Attendee Profile per Attendee
- Release Forms Will Be Sent If Required by the Facility (Provide Additional Notes as Needed)

Keep a Copy of the "What You Should Know" 2 page document.
It includes A Packing List and Other Important Information.