

**COCOLALLA LAKE BIBLE CAMP'S
Weekend Retreat/Camp
Registration Form:**

Circle your camp choice below:

Youth (13-19yrs old)

Women's (13 yrs & up)

Men's Retreat (13yrs & up)

Winter Camp

Quilt Retreat:

Youth Retreat:

Spring **or** Fall

Scrapbook Retreat:

Family Camp

Backpacking Camp:

Spring **or** Fall

Spring

Stamp Camp

Summer

Women's Retreat

Intermediate Summer

Youth Leadership Conference

Pre-register by sending in **\$15** to secure your place. This is a non-refundable fee (that is applied to the cost of the camp.) Checks payable to **CLBC** (Cocolalla Lake Bible Camp.)

Send your check and registration form to:

Cocolalla Lake Bible Camp

P.O. Box 106

Cocolalla, ID 83813

Camper Information:

Name _____ Age (minors only) _____

Address _____

Phone _____

Email _____

Church Affiliation _____

Emergency Contact & Phone Number _____

Medications (minors only) _____

Food Allergies _____

Recent Physical (minors only) _____ Tetanus shot (minors only) _____

Insurance & Policy # (minors only) _____

IN CASE OF EMERGENCY

I understand that after every effort is made to conact me and I can't be reached, I hereby give permission to hospitalize, secure proper treatment, or to order injection, anesthesia or surgery for my child as named herein.

Parent/Guardian Signature & Date _____

Full pricing & registration availabe online at www.clbcamp.org or call the camp office: **208-263-3912**.