



# 2022 RLCA SUMMER CAMP

## REGISTER BY 5/25 FOR A FREE T-SHIRT



Please check the session your child will be attending. Select based on 2021-2022 school grade.

**\* A late fee will be added to your camper's account if all paperwork is not completed three weeks prior to session.**

	Dates	Description	Camp Fee Includes Deposit	Deposit	Late Fee*
	June 10-11	K/1 <sup>st</sup> Grader & Parent Camp	\$65	\$20	\$25
	June 12-14	2 <sup>nd</sup> & 3 <sup>rd</sup> Grade Camp	\$140	\$20	\$25
	June 15-17	First Chance Camp w/ Parent, 2 <sup>nd</sup> -4 <sup>th</sup> Grades	\$180	\$20	\$25
	June 19-24	Young Women's Camp, 4 <sup>th</sup> -8 <sup>th</sup> Grades	\$270	\$50	\$25
	June 19-24	Senior High Kayak Trip	\$300	\$50	\$25
	June 26-July 1	7 <sup>th</sup> -9 <sup>th</sup> Grade Camp	\$270	\$50	\$25
	July 3-8	High School Camp 1	\$300	\$50	\$25
	July 10-15	5 <sup>th</sup> -7 <sup>th</sup> Grade Camp	\$270	\$50	\$25
	July 10-15	3 <sup>rd</sup> & 4 <sup>th</sup> Grade Wilderness	\$270	\$50	\$25
	July 10-15	High School Backpack Trip	\$325	\$50	\$25
	July 17-22	High School Camp 2	\$300	\$50	\$25
	July 17-22	Junior & Senior High River Trip	\$300	\$50	\$25
	July 24-29	Dance Camp, 8 <sup>th</sup> -12 <sup>th</sup> Grades	\$300	\$50	\$25
	July 24-29	Disc Golf Camp, 8 <sup>th</sup> -12 <sup>th</sup> Grades	\$300	\$50	\$25
	July 24-29	Running Camp, 8 <sup>th</sup> -12 <sup>th</sup> Grades	\$300	\$50	\$25
	July 31-Aug. 5	Young Men's Camp, 4 <sup>th</sup> -8 <sup>th</sup> Grades	\$270	\$50	\$25
	July 31-Aug. 5	Young Women's Wilderness, 5 <sup>th</sup> -8 <sup>th</sup> Grades	\$270	\$50	\$25
	August 7-12	3 <sup>rd</sup> & 4 <sup>th</sup> Grade Camp	\$270	\$50	\$25
	August 7-12	5 <sup>th</sup> & 6 <sup>th</sup> Grade Wilderness	\$270	\$50	\$25
	August 18-20	Handi Camp 1	\$185	\$20	\$25
	August 25-27	Handi Camp 2	\$185	\$20	\$25



## RLCA CAMPER REGISTRATION FORM

Campers who register by May 25<sup>th</sup> will receive a FREE Camp T-shirt

**PLEASE PRINT ALL INFORMATION CLEARLY**

**Complete All Sections and Return to the Camp Office with Deposit.**

**Additional forms must be completed three weeks prior to camp.**

RLCA, PO Box 340, Vestaburg, MI 48891    [www.rlca.org](http://www.rlca.org)    989-268-5377    [info@rlca.org](mailto:info@rlca.org)

Camper's Full Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_  
Session(s) \_\_\_\_\_  
Street Address \_\_\_\_\_ PO Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Grade 2021-2022 School Year \_\_\_\_\_ Home Phone \_\_\_\_\_  
Camper's Email \_\_\_\_\_ Camper's Cell Phone \_\_\_\_\_  
Church Camper Attends \_\_\_\_\_ City \_\_\_\_\_  
Does your camper have any allergies or dietary restrictions?    ☐ Yes (Describe Below)    ☐ No

You may request a friend of the same gender as your camper to be in their pod. We will do our best to honor this request so long as the friend requests your camper as well. List one friend below or email the name to [info@rlca.org](mailto:info@rlca.org).

For applicable camps: Is your camper okay with sleeping in a top bunk?    ☐ Yes    ☐ No

**If registering by May 25<sup>th</sup>, select a shirt size:**    YS    YM    YL    YXL    AS    AM    AL    AXL    A2X    A3X

### Parent/Guardian #1 Information:

Name \_\_\_\_\_  
Relationship to Camper \_\_\_\_\_ Email \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Other Phone \_\_\_\_\_  
Same Address as Camper's?    ☐ Yes    ☐ No (If no, please complete below.)  
Address \_\_\_\_\_

### Parent/Guardian #2 Information:

Name \_\_\_\_\_  
Relationship to Camper \_\_\_\_\_ Email \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Other Phone \_\_\_\_\_  
Same Address as Camper's?    ☐ Yes    ☐ No (If no, please complete below.)  
Address \_\_\_\_\_

### Emergency Contacts:

Name	Relationship to Camper	Phone Number

**I, THE PARENT OR GUARDIAN** of the camper named on this registration . . .

1. Give permission for the Health Officer of RLCA to secure routine non-surgical medical care for my child while attending camp, including transportation to and from a doctor's office or hospital.
2. Give permission to the physician selected by the camp management to hospitalize, secure proper treatment for, order injections, anesthesia or surgery for my child. I understand that every effort will be made to contact me before any emergency procedures are taken.
3. Give permission for my child to participate in all activities during this camp session, including off-site trips, except as indicated on the health form.
4. Acknowledge that the insurance carried by RLCA is a secondary coverage, covering medical needs beyond what my personal insurance will cover up to a maximum of \$2000.
5. Release Rock Lake Christian Assembly from any responsibility other than normal supervision and care. In case of an accident, I will not hold RLCA, or its faculty, staff, management or trustees liable unless guilty of gross negligence.
6. Give permission to use any video or photos of my child while attending or participating in a camp program to promote RLCA and its ministry.
7. Understand that the deposit amount for the selected camp session(s) is non-refundable.
8. Understand that, in allowing my student to attend RLCA, my camper will participate in a variety of activities, such as but not limited to Team Building, Low Ropes, Ninja Warrior Course, Shooting Ranges, etc. and I release RLCA from any liability associated with my student's involvement of these activities.

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_



***Determining Your Camper's Fee***

Fee for Camp Session, which includes Deposit	\$ _____
Amount to Be Paid by Church Scholarship	- \$ _____
Tuition to Be Paid by Camper	= \$ _____
Money Sent with Registration	- \$ _____
Subtotal	= \$ _____
If Less Than Three Weeks before Session, Add Late Fee	+ \$ _____
<b>TOTAL DUE BEFORE CHECK IN</b>	= \$ _____

***Mission Money for LatinoAmerican World Mission may be included with payment.*** \$ \_\_\_\_\_

If a Church Scholarship is applied, your Church Representative **MUST** sign below.

For RLCA Office Use Only: Check # \_\_\_\_\_ Date \_\_\_\_\_ Received By \_\_\_\_\_