



# Camper Registration Form

\*\*\*I agree to abide by ALL camp rules & dress code. I understand violation to comply may result in dismissal from camp.

# Medical Form

*In case of accident or other emergency, I hereby grant my permission to have the camp staff authorize medical attention by a physician or admit my camper to the hospital as necessary. I do not hold Cleveland Baptist Church, Camp CoBeAc or any other staff responsible for any accident or injury that should occur (the camp staff will notify you immediately of any such occurrence).*

## Coronavirus Self-Check

**Parent/Guardian's Signature:**

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_____	<i>Printed</i>	<i>Dated</i>	<i>Signed</i>
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