

Eastern North Carolina Church of God Boy's Camp—O—Rama

The Quest for the Heart of a Lion's Heart

And you will seek Me and find Me, when you search for Me with all your heart.

Jeremiah 29:13

October 7-8, 2016

Check-in is at 4:00 PM

Church of God

Conference Center

Kenly, NC

919-284-3039

www.encyog.org

Bonfire Worship Service
with: Evangelist Danny Byrd

Camping
Cooking Contest
Free Fishing

Gym Jam
Team Competitions
Archery

Registration Fee:

\$20.00 By September 22

\$25.00 after September 22

\$30.00 Walk-on

(Registration fee is per person)



EASTERN NORTH CAROLINA CHURCH OF GOD Camporama 2016 - The Quest for the Lion's Heart



OFFICIAL REGISTRATION FORM

Church Name: _____

Group Leader: _____

Group Leader's Email Address: _____

Group Leader's Telephone Number: _____

Total Number Attending (adults included): _____ X

\$20 by September 22
\$25 by October 6
\$30 Walk-on Fee

 = _____

Fee Included: \$ _____ Payment (circle one): Check Money Order Visa MC Discover

Fee is based per person. We accept Check, Money Order (made payable to Church of God), Visa, MasterCard, or Discover. To use a credit card please fill out the information on the back of this form.

The local church should have a completed background check for each adult working with minors. Please circle yes or no in the form below indicating if a background check has been completed.

Name	Age	Grade (Boys)	Background Check Completed (Adults)
1.			Yes / No
2.			Yes / No
3.			Yes / No
4.			Yes / No
5.			Yes / No
6.			Yes / No
7.			Yes / No
8.			Yes / No
9.			Yes / No
10.			Yes / No
11.			Yes / No
12.			Yes / No
13.			Yes / No
14.			Yes / No
15.			Yes / No
16.			Yes / No

Please list the names, ages, and grades of all attending:

(Duplicate form if more space is needed)

Please mail this form and payment to:

Youth Department - Post Office Box 100, Kenly, North Carolina 27542

Duplicate as needed to insure each participant has a completed Medical Information Form. These must be completed and turned in for registration to be completed.

MEDICAL INFORMATION: Camper Full Name:

Date of last Tetanus Shot / /	Please list any Allergies or Medical Problems
Any reaction to medication? Yes _____ No _____	If yes, list:
Parent's Insurance Company	Policy#
Pre-authorization required? Yes _____ No _____	If yes, what limits?
Doctor's Name	Phone: () -

I hereby give my child permission to attend and participate in the Eastern North Carolina Church of God Boys Camporama 2016, to be held on October 7-8, 2016, at the Church of God Conference Center in Kenly, NC. I hereby, waive, release, and discharge any and all claims, demands, and causes of action against Camp Officials, the Church of God in the state of Eastern North Carolina, and the International Offices, Cleveland, Tennessee, their agents, employees, and participants arising from any damages, property loss, or injury my child may sustain at the Eastern North Carolina Church of God Boys Camporama. I further consent to allow Camp Officials to seek and obtain emergency medical treatment for my child should my child need medical treatment. Also, I understand that any camp insurance is secondary to my own insurance.

Parent/Guardian Signature Required

Date of Signature



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