

Catskill Christian Assembly

Young Adult Retreat

June 10-12, 2016

Name: _____ DOB: _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Home phone: _____ Email: _____

Home church: _____

Fees: (please make checks payable to Catskill Christian Assembly)

Registration: \$80.00

Financial Info:

Retreat fee: \$ _____

Canteen cards \$ _____

Cards are \$5.00 each

Subtotal: \$ _____

Less deposit: \$ _____

You may send a deposit of \$25. Balance must be paid upon arrival at camp.

Balance: \$ _____

Please return registration and payment to:

Catskill Christian Assembly

PO Box 865

Naugatuck, CT 06770

Important Info:

The retreat begins on Friday, June 10 at 6:00pm.

The retreat ends on Sunday, June 12 at 11:00am.

Catskill Christian Assembly

Young Adult Registration

Name: _____

DOB: _____

In case of emergency, please call:

Name: _____

Phone: _____

Allergies (please include any medical, food, latex or nature allergies): _____

Please list any medical conditions: _____

Current medications: _____

Insurance company: _____ Phone #: _____

Policy Number: _____ Group Number: _____

Code of ethics:

- Campers failing to respond to the authority of all camp staff will be sent home.
- Campers who fail to abide with the camp schedule (exceptions: sickness, injury) will be dismissed.
- Campers caught stealing or pilfering through other's belongings will be dismissed.
- Unacceptable behavior will not be tolerated. Any act deemed not acceptable by CCA staff, camp dean, or camp faculty could result in dismissal.
- Any camper caught with alcoholic beverages, tobacco products, drugs or drug paraphernalia will be dismissed immediately.
- Campers who fail to treat other campers in a Christian manner may result in dismissal.

Camper's Signature _____

Date _____