

CAMPER APPLICATION (2014 ver.)

Florida District United Pentecostal Church

Please circle which camp you are applying for:

Junior Camp (ages 9 & 10)
June 9th-13th
Due Date: May 19th

Crusader's Camp (ages 11 & 12)
June 16th-20th
Due Date: May 26th



Please PRINT or TYPE:

Church Name: _____ Church City: _____

Pastor's Name: _____ Church Phone #: (____) ____ - _____

Camper's Name: _____ Phone #: _____

Camper's Address: _____

Birthday Date: ____/____/____ Age (at start of camp): ____ Gender: ___ Male ___ Female

Emergency Contact

Parent's/Legal Guardian's Name: _____

Home Phone: (____) ____ - _____ Cell Phone: (____) ____ - _____

MEDICAL HISTORY: Please list any medical attention or medication needed during camp below.

Camp T-Shirt Order Form - \$10

Size (circle one): S M L XL XXL NONE

*Payment must accompany registration. (T-shirts are optional)

UPCI PASTOR'S CONSENT

I consent and approve of this young person attending Florida District UPCI Camp.

Pastor's Signature: _____ Date: _____

PARENTAL CONSENT

I hereby give my child permission to attend Florida District UPCI camp and state that he/she is to obey the camp rules, administration, and staff. In case of emergency, I authorize camp officials to provide and/or obtain medical treatment.

Parent's/Guardian's Signature: _____ Date: _____

CAMPER'S PLEDGE

I pledge to comply with all rules, regulations, and schedules of Florida District UPCI camp. I will obey and cooperate with the camp administration and staff.

Camper's Signature: _____ Date: _____

Pre-Registration Fee (Postmarked by the due date above) - \$100

Late Registration Fee (Postmarked after the due date above) - \$125

Submit forms and payment to:
Florida District United Pentecostal Church
Attention: Camps
5011 NW Gainesville Rd
Ocala, FL 34475