



New Heights Youth Camp Registration | Youth

For all campers 12 -18, not coming as counselors, coming individually or with a group.
kmbc@kmbc.edu | 606 -332-0139

Camper Information

Which week will you be Attending? ☐ Week One ☐ Week Two ☐ Week Three

Full Name (First, Middle, Last): _____

Date of Birth: _____

Graduation Date: _____

Gender: ☐ Male ☐ Female

Phone: _____

T-Shirt Size: _____

Email: _____

Address: _____

Street /City/State/Zipcode

Group or Group Leader (if applicable): _____

Roomate request: _____

Preregister for Activities: ☐ Kayaking ☐ Ziplining ☐ Pellet Guns (Under 16) ☐ Shooting (16+)

Medical Info

Medical Conditions & Allergies: _____

Will your child require any medication to be administered during camp? ☐ Yes ☐ No

All camper's prescription and over-the-counter medications must be turned into the nurse at registration in their original packaging with labels intact. Loose pills in baggies or pill organizers will not be accepted.

Medications, Dosages & Additional Instructions | Use extra paper if needed

I, the undersigned parent/legal guardian authorize the following over-the-counter, non-prescription medication to be administered to my child.

☐ I do NOT authorize any non-prescription medication to be given to my camper.

☐ Acetaminophen (Tylenol) ☐ Diphenhydramine (Benadryl) ☐ Ibuprofen (Motrion, Advil)

☐ Antacids (Tums) ☐ Cough Drops ☐ Hydrocortisone Cream (Anti-Itch)

Insurance Company & Policy Number: _____

Anything else we should know? _____

Parent/Guardian Information

Parent/Guardian Names (First/Last): _____
Phone #1 : _____ Phone #2: _____
Email: _____

Emergency Contact (If different from Parent/Guardian)

Name (First/Last): _____
Phone #1 : _____ Phone #2: _____
Email: _____
Relationship to Camper: _____

Acknowledgement and Release Statement

I, the undersigned parent/guardian, hereby consent to my camper participating in the New Heights Youth Camp (NHYC), an event sponsored by Kentucky Mountain Bible College (KMBC). I consent to allow my child to be photographed or recorded during the event for public relations by KMBC and its employees. I acknowledge that New Heights Youth Camp is UNPLUGGED and that camper cellphones, smart watches, or other electronics must be turned into NHYC camp leadership at registration. Campers may have monitored access to personal devices throughout the week. I certify that my child is able to participate in the camp activities as listed in the brochure and otherwise. I understand that NHYC is an active camp and may not be suitable for individuals with physical limitations and or emotional/behavioral special needs. I understand that if my child falls into this category that they must be accompanied by a parent or chaperone. If my child has medical conditions which may be relevant to a physician in the event of an emergency, I have listed them. In the event of an emergency, I may be reached at the telephone numbers listed above. If I cannot be contacted, I hereby authorize Kentucky Mountain Bible College, its agents or employees to obtain such medical treatment as may be necessary in their judgment to ensure health, safety and well-being of my child. I understand and hereby agree to assume all risks which may be encountered on said activity, including activities preliminary and subsequent there to. I hereby agree to hold Kentucky Mountain Bible College, their agents and employees harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child, property, even injury resulting in death, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities. I expressly agree that this release, waiver and indemnity agreement is intended to be broad and inclusive as permitted by law of the State of Kentucky and that if any portion thereof is held invalid; it is agreed the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and a mere recital. I will disclose and update any changes that may occur to this release before the date of the event. I further state that I have carefully read the foregoing release and know the contents thereof and I sign this release as my own free act. This is a legally binding agreement which I have read and understood.

I, the undersigned parent/legal guardian, have read the above statement and agree.

Parent/Guardian Signature: _____ Date: _____
Printed Name: _____