

## 2017 CAMP NEW DAWN Camper Registration

Check weeks for which you are registering:

\_\_\_ **All Kids Camp**, Grades 4-5, June 11-16 (\$275) Day camp \$140.00

\_\_\_ **Middle School Adventure**, Grades 6-8, June 18-23 (\$275)---no day camp

\_\_\_ **Cove Adventure**, Grades 9-12, June 25-30 (\$300)

\_\_\_ **Mini-Camp**, Grades 1-3 July 5-7 (\$160) (day camp \$75)

\_\_\_ **All Sports Camp**, Grades 1-12, July 9-14 (\$275/\$140)

\_\_\_ **Civil War Camp**, Grades 4-12 or family camp, July 16-21 Individual: \$275  
Family: \$200 per family member--no day camp

Check one: \_\_\_ **Day Camp** \_\_\_ **Overnight Camp**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ St/Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Age: \_\_\_ Birthday \_\_\_/\_\_\_/\_\_\_ Gender \_\_\_\_\_ Grade \_\_\_ Years attended Camp New Dawn \_\_\_\_\_

Other camps attended \_\_\_\_\_

How did you hear about our camp? \_\_\_\_\_

What are your goals for the week? \_\_\_\_\_

Amount of deposit (\$50 minimum) \_\_\_\_\_ Friends attending camp \_\_\_\_\_

I, the legal parent/guardian of the above named camper do hereby register him/her for camp. I am aware that if my child is accepted, I will need to fill out a medical form. I understand that should my child not adhere to the behavior code at camp, I will be notified and must provide transportation for the child to leave camp. I give permission for any photos taken of my child to be used in advertising and for records retained by Camp New Dawn, and Christian Camp & Conference Assoc.

\_\_\_\_\_  
Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Contact information, if different from camper's: Cell phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Persons authorized to pick up your child from camp if you are unable to do so: \_\_\_\_\_

For office use only: Recorded by \_\_\_\_\_

Return Registration and Non-refundable  
Deposit of \$50 to:  
Camp New Dawn  
226 S. Cedar Lane  
Chickamauga, GA 30707