

# Camp Ta-Pa-Win-Go

## 2024 Registration Form

**Important: Fill out BOTH SIDES of this form and return to:**

Camp Ta-Pa-Win-Go  
111 CBM Camp Road  
Watauga, TN 37694

**Please bring/send final payment with your camper at check-in or pay online at [www.cbmcamp.com/summer-2024-payment-information](http://www.cbmcamp.com/summer-2024-payment-information)  
A \$50 non-refundable deposit required for all campers, unless your camper earned a free week of camp.**

Please complete a separate form for each camper.

**Please PRINT NEATLY:**

Camper Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_ Grade completed by camp \_\_\_\_\_

Boy/Girl \_\_\_\_\_ Birthday \_\_\_\_\_ Age at time of camp \_\_\_\_\_

Parent \_\_\_\_\_ Phone ( ) \_\_\_\_\_

or  
Guardian(s) \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**Camper(s) will ONLY be released to the Parent/Guardian(s) listed above or the authorized person(s) listed below. A photo ID MUST be shown for Day Camp and Junior Weeks before camper can be released.**

**Other adult authorized to pick up your camper:**

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**Please Check Week(s) Attending:**

**Primary Day Camps are \$130; All Junior, Jr. High, and Teen Camps are \$260.**

**\*DAY ONLY OPTION:** \_\_\_ By initialing this box, I am stating that my child/teen will only come during the day and not spend the night. This is an option for Junior, Jr High, and Teen Weeks.

**If paying for anything extra, please include a note of explanation.**

- \_\_\_ June 3-7 Junior 1 (Grades 3-5) \*
- \_\_\_ June 10-14 Teen Week (Grades 9-12) \*
- \_\_\_ June 17-21 Junior 2 (Grades 3-5) \*
- \_\_\_ June 24-28 Junior 3 (Grades 3-5) \*
- \_\_\_ July 1-5 Day Camp (Grades K-2)
- \_\_\_ July 8-12 Jr High Girls Only (Grades 6-8) \*
- \_\_\_ July 15-19 Jr High Boys/Girls (Grades 6-8) \*

*Camper(s) are permitted to attend more than 1 week but discounts can only be used 1 time per summer.*

**Buddy/Roommate Preference - 2 only (for overnight they must also choose you)**

1. Name \_\_\_\_\_ 2. Name \_\_\_\_\_

## Health Information

Food Allergies: \_\_\_\_\_

Drug Allergies: \_\_\_\_\_

Does your child have any activity restrictions or is there any other information you feel we should know concerning your child's mental, emotional, or physical health, such as diabetes, autism, etc.?  
\_\_\_\_\_

Special Medications - Attach List to "Health Form" printed from cbmcamp.com.

I give my child permission to take over-the-counter medication from the camp nurse.

\*

\_\_\_\_\_  
**Parent/Guardian signature**

**Release & Waivers: Please sign each applicable section you approve below.**

I hereby give permission for my child to attend Camp Ta-Pa-Win-Go. I understand that the camp carries medical insurance on all campers, but neither the camp insurance nor CBM is in any way responsible for medical treatment or liability resulting from any physical conditions existing before my child attends camp. In the event of an emergency, if you are not able to reach me, a doctor or hospital has permission to treat my child. I give permission for my child to participate in any and all activities during their week, even if they take place off camp property. I also understand that registering my child gives CBM permission to use my child's image if it appears in any camp video or photo.

\*

\_\_\_\_\_  
**Parent/Guardian signature**

**--The following are available Jr High and Teen Weeks only (Grades 6-12)--  
(Payment will be due at Registration)**

**Paintball** I give my teenager permission to play paintball. I have read and agree to the "Paintball Terms and Conditions" posted on [www.cbmcamp.com/teen-camps](http://www.cbmcamp.com/teen-camps)

\*

\_\_\_\_\_  
**Parent/Guardian signature** (Paintball-add \$15 for this activity)

**Rafting** I have read and agree to the "Waiver and Release of Liability" for Whitewater Rafting posted on [www.cbmcamp.com/teen-camps](http://www.cbmcamp.com/teen-camps)

\*

\_\_\_\_\_  
**Parent/Guardian signature** (Rafting-add \$45 for this activity)

**Caving** I have read and agree to the "Waiver and Release of Liability" for Caving posted on [www.cbmcamp.com/teen-camps](http://www.cbmcamp.com/teen-camps)

\*

\_\_\_\_\_  
**Parent/Guardian signature** (Caving-add \$45 for this activity)

E-mail for confirmation \_\_\_\_\_

**This will be used to confirm registration.** Please print legibly!

## Office Use Only

_____ Date received	_____ Balance Due
_____ Amount Paid _____	_____ Registered
_____ Mailbox Club _____	_____ Confirmation _____
_____ Other _____	_____ Later Payment