

# Camp Ta-Pa-Win-Go

2020 Registration Form - **SIDE 1**

**Important: Due to COVID-19, our summer schedule has been revised. We will be having DAY camps only, and space will be limited.**

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

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

**SIDE 2** ➔

**No registration fee required this year**

Please complete a separate form for each camper.

Please **PRINT NEATLY:**

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

Mailing Address \_\_\_\_\_

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

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

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

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

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

**Campers 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 Primary & Junior Day Camp Weeks before camper can be released.**

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

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

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

**Please Check Week Attending (\$110 per week):**

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

____ June 29-July 3	Primary Camp (Grades K-3) 9 am—4 pm
____ July 6-10	Junior Camp (Grades 3-6) 9 am—4 pm
____ July 13-17	Teen Camp (Grades 7-12) 9 am—4 pm
____ July 6-10	Wilderness Camp (Grades 7-12) 9 am—4 pm

**Free bus transportation available. Check enclosed bus schedule for pickup points**

## Health Information

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

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

Is there any information you feel we should know concerning your child's mental, emotional, or physical health including activity restrictions?  
\_\_\_\_\_

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

## Insurance Information

Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_ Phone ( \_\_\_\_ ) \_\_\_\_\_

**Release & Waivers: Please sign each 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 also give permission for my child to participate in any and all activities not listed below 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**

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

\*

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

**The following is available for the Teen week only - \$10 per day**

I give my camper permission to play paintball. I have read and agree to the "Paintball Terms and Conditions" posted on cbmcamp.com.

\*

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

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