



Summer 2022 Registration

Mail Registration to: Luther Point Bible Camp, 11525 Luther Point Rd. Grantsburg, WI 54840

Camper Information

Camper Name: _____

Birthdate: ____ / ____ / ____ Grade Entering in Fall 2022: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Congregation & City: _____

Special Requests/Needs: _____

Confirmation Method: _____ Email: _____ USPS: _____

Parent/Guardian Information

Father's Name: _____

Mother's Name: _____

Email: _____

Email: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

Check Desired Camp:

- | | | |
|---|--|---|
| <input type="checkbox"/> Day at Camp | <input type="checkbox"/> 4th - 6th Grade Fish Camp | <input type="checkbox"/> Intermediate Horse Camp |
| <input type="checkbox"/> 1st-2nd Grade Overnight | <input type="checkbox"/> Jr. and Sr. High Night Life | <input type="checkbox"/> Arts and Music Camp |
| <input type="checkbox"/> 3rd - 4th Grade Camp | <input type="checkbox"/> Jr. High Confirmation Camp | <input type="checkbox"/> Family Camp |
| <input type="checkbox"/> 4th - 6th Grade Full Week Camp | <input type="checkbox"/> Jr. and Sr. High Fish Camp | <input type="checkbox"/> Grandparent & Grandchild |
| <input type="checkbox"/> 4th - 6th Grade Half-Week | <input type="checkbox"/> Beginning Horse Camp | <input type="checkbox"/> Family Arts Camp |

Camp Date

1st Choice: _____

Cabin Mates

1st Choice: _____ 2nd Choice: _____

Payment

- Check Money Order Credit Card

Card Number: _____ Exp: _____ CVV: _____

I understand and certify that my child's participation in Luther Point Bible Camp (LPBC) and its activities is completely voluntary and I have familiarized myself with LPBC's programs and activities. I recognize that certain hazards and dangers are inherent in LPBC events and programs and I acknowledge that although LPBC has taken safety measures to minimize the risk of injury, LPBC cannot guarantee that the participants, equipment, premises and/or activities will be free of hazards, accidents, and/or injuries. I further recognize and have instructed my child of the importance of knowing and abiding by LPBC's rules, regulations and procedures for the safety of participants. I waive any claim against LPBC and/or its personnel for any lost articles; for and injury to my child; and/or any injury to myself. LPBC assumes secondary coverage. I hereby give permission for my child to be given emergency medical care; to be transported for offsite outings; and for photographs/video including my child and/or myself to be used in the promotion of LPBC and/or the ELCA.

Parent/Guardian Signature: _____ Date: _____