

Sample registration form for congregational use.

Chaperones should be in possession of forms for each student during the entire event, including travel to and from Fortune Lake Lutheran Camp.

Participant's name _____

Male **Female**

Elementary student **Jr. High Student** **High School Student** **Chaperone**

Address (street, city, state) _____

Home Phone _____

Emergency Phone _____

Home Congregation (church & city) _____

(student's name) _____ has my permission to attend the retreat at Fortune Lake Lutheran Camp on (date) _____. I hereby authorize chaperones or adult leaders to give consent for emergency medical treatment and routine medical care for the above named child. I/we retain responsibility for any and all bodily injury, loss, or damage of personal items traveling to and from, and during the event.

Signature Parent/Guardian _____

Insurance Co. _____ **Policy No.** _____

Additional Medical Info. (allergies, medication, etc.) _____
