

**2010 FMC Registration (Sept.1-3)
Trout Creek Bible Camp, Corbett, Oregon**

(Mail to: R.C.C. 1201 John Quincy Adams St.Oregon City, OR.97045)

Registration (complete a registration for **each** camper, staff or father attending Future Men's Camp 2010) = **must be turned in by August 16th 2010**

1. Name: _____

2. Camper's Age on Dec 31, 2009: _____ (11-19 years old)

3. Address: _____

ZIP _____

3. Phone: _____ Cell: _____

Alternative Emergency Contact: _____ Phone _____

4. Medical Insurance Carrier: _____

5. Medical Information, allergies, medications, etc.

6. Fees: Check the fee that applies.

_____ \$109 Future Men's Camp Registration

_____ \$109 Visiting father

_____ \$109 Camp Staff --

_____ \$55 Future Men's financial assistance. (I wish to apply to RCC for assistance. If granted, registration will be reduced to \$55/camper.)

7. Parent/Guardian Permission. I give permission for my son, _____, to attend RCC's Future Men's Retreat. In case of medical emergency, I understand that every effort will be made to contact me. However, if I cannot be reached, I hereby give permission to the physician or dentist selected by retreat staff to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child named above.

(Secondary Insurance will be provided by R.C.C for this Camp!)

I voluntarily waive any claim against all liability, claims, damages, attorney fees and/or expenses arising out of or in connection with any activities of RCC's Future Men's Retreat.

Enclosed is the applicable registration fee.

Parent or Guardian's Signature: _____