



Martin Luther
Evangelical
Lutheran
Church

2379 Lakeshore Blvd. West, Toronto ON M8V 1B7
More information: www.martinluther.ca

REGISTRATION FOR CAMP LUTHERLYN
AUGUST 15-21 2015

Complete and mail with payment to : Martin Luther Lutheran Church

Rates: Adults and Kids 10+: \$390 (early reg. until Feb 28: \$360)

Family Rates: Kids under 10: \$100, Kids 10+: \$150

For more information contact:

Anna Lisa Wienecke, Ph. 905-939-7494, campdirector@martinluther.ca

Pastor Christian Ceconi, Cell 416-567-2487, pastor@martinluther.ca

Martin Luther Church Office, 416-251-8293, churchoffice@martinluther.ca

Family Name: _____

Street Number Street Apt. # City Postal Code Home Telephone Number

Contact Person (Parent/Guardian/Other) Cell Number Email Address

Additional Medical Coverage Company

(1) Name & Camper Rate (Adult/Child)

(2) Name & Camper Rate (Adult/Child)

Age and Date of Birth

Age and Date of Birth

OHIP Number

OHIP Number

Dietary Needs, Medical Conditions and Medications:

Dietary Needs, Medical Conditions and Medications:

Can swim: Yes _____ No: _____

Can swim: Yes _____ No: _____



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(3) Name & Camper Rate (Adult/Child)

(4) Name & Camper Rate (Adult/Child)

Age and Date of Birth

Age and Date of Birth

OHIP Number

OHIP Number

Dietary Needs, Medical Conditions and Medications:

Dietary Needs, Medical Conditions and Medications:

Can swim: Yes _____ No: _____

Can swim: Yes _____ No: _____

**As parents/guardians of _____
we consent to the participation of the above mentioned child in all of the camp activities, including:**

- Canoeing
- Campfire
- Worship
- Low Ropes Courses and Slacklining
- Lots of games
- Talks about Bible and faith
- Crafts
- Teenage challenge (stay overnight on a lonely island)

Should it be necessary for our child to receive medical attention, we authorize the camp staff members in charge to act as they deem necessary. Any cost so incurred will be our responsibility. Should we become aware of a change in our child's medical condition, we will notify the Camp immediately. Furthermore, in case of an accident or incident, we absolve Martin Luther Church, Camp Lutherlyn, the Camp Director and the Counselors of all responsibility.

Place, Date

Signature of Parent(s)

FOR OFFICE USE ONLY

Prepared by/ Bearbeitet von: _____

Date: _____