

# Rodeofest 2011

## Registration Form

Please print clearly and complete one form per person. You may duplicate this form as necessary. If sponsors wish to eat lunch on campus there will be a \$5 charge.

**\*Please enclose the \$20 registration fee with this form**

Check here if you are a sponsor

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Gender:  Male  Female Date of Birth \_\_\_\_\_

Grade:  3<sup>rd</sup>  4<sup>th</sup>  5<sup>th</sup>  6<sup>th</sup>

Parent/Guardian Names \_\_\_\_\_

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

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

Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Parent's Cell/Work Phone \_\_\_\_\_

Name of Church I am coming with \_\_\_\_\_

Church's Mailing Address \_\_\_\_\_

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

Church Phone Number \_\_\_\_\_

Pastor's Name \_\_\_\_\_

**In case of medical emergency (must be signed by parent/guardian):** *I understand every effort will be made to contact parents or guardians of registrants. In the event that I cannot be reached, I hereby give permission to the physicians selected by Northland to hospitalize, secure proper treatments, and order injection, anesthesia, or surgery for my child as named.*

Parent/Guardian's Signature \_\_\_\_\_

Date \_\_\_\_\_

**NORTHLAND**  
**CAMP & CONFERENCE CENTER**

W10085 Pike Plains Road • Dunbar, WI 54119

715.324.5678

[www.northlandcamp.org](http://www.northlandcamp.org)