

# 2021 Summer Camp Registration

Dear Registrar, Please register my child for the camping program(s) checked below in the registration box. I hereby grant permission for my child to participate in all camp activities, out of camp trips, to receive emergency treatment, and to be included in any photographs and/or video productions used to promote Haycock Camping Ministries and any Haycock-related mailings.

\_\_\_\_/\_\_\_\_/\_\_\_\_ x \_\_\_\_\_  
Date Signature of Parent or Guardian

A \$100.00 non-refundable, non-transferable deposit per program MUST accompany all registrations. Deposits are applied to your camp tuition. Campers paid in full by May 1, may deduct \$25.00 from the weekly fee (excludes those receiving financial assistance). **Completed health form and physical are required to attend summer camp. The health form can be found under "camper forms" tab at [www.haycock.org](http://www.haycock.org).**

Financial assistance may be available upon request and review by the camp office. All campers are welcome regardless of race, color, religion or national origin. Medical payments are required at the time services are rendered (excluding hospital care). Haycock Camping Ministries is NOT responsible for medical costs incurred by your child while at camp.

Contact the camp office at 610-346-7155, or [info@haycock.org](mailto:info@haycock.org) for more information.

We strive to plan a menu that will be enjoyed by our campers and will provide nutritious choices at each meal. Please understand that although we include several options during mealtimes, it is not always possible for Haycock to cater to the needs of individual campers with significant dietary restrictions. We ask that you provide pre-made frozen meals as an alternative for any dietary restrictions. Haycock's Dining Hall and Kitchen is NOT a nut-free facility.

Camper Child \_\_\_\_\_

Guardian/Parent Name \_\_\_\_\_

Street \_\_\_\_\_

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

E-mail \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Male  Female

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone for \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

I'm a first year camper! \_\_\_\_\_

I was referred by \_\_\_\_\_

Cabin Mate Request \_\_\_\_\_  
(must be same age or grade and in same program)

## BOYS OVERNIGHT CAMPS

**Boys Mini Camps** (Boys 7-10) (\$175)

July 11-13  July 28-30

**Boys Mini Camps** (Boys 9-12) (\$175)

July 14-16  July 25-27

**Stockade** (Boys 8-10) (\$375)

July 11-16  August 1-6  
 July 18-23  August 8-13  
 July 25-30

**Trailblazers** (Boys 10-12) (\$375)

July 11-16  August 1-6  
 July 18-23  August 8-13  
 July 25-30

**Battalion** (Boys 12-14) (\$375)

July 11-16  August 1-6  
 July 18-23  August 8-13  
 July 25-30

**Leadership Growth Program** (\$700)

(Boys 15-16) (June 27 - August 6)

**The Haycock Experience** (Boys 13-16) (\$425)

July 11-16  July 25-30

**Marksmen** (Boys 13-16) July 18-23 (\$425)

**Wings and Wheels** (Boys 13-17) July 18-23 (\$450)

**High Adventure** (Boys 13-16) July 25-30 (\$425)

**Go Kart Week** (Boys 13-16) August 1-6 (\$425)

**Paintball Adventure** (Boys 13-16) August 1-6 (\$475)

## GIRLS CAMPS

**Girls Mini Camps** (Girls 7-12) (\$175)

July 4-6  July 7-9

**Girls Week** (Girls 8-14) (July 4-9) (\$375)

**Girls Challenge Week** (Girls 13-16) (July 4-9) (\$375)

## DAY CAMPS

**Haycock Day Camp** (\$225/week)

(Boys and Girls ages 5-12)

June 21-25  July 19-23

June 28-July 2  July 26-30

July 5-9  August 2-6

July 12-16  August 9-12

**Haycock BASE Camp**

(Boys and Girls ages 7-12) (**July 5-9**)

Full Week With Transportation (\$275)

Full Week Without Transportation (\$250)

Boys Overnight Options  W  Th (\$25/night)

**Note:** Please complete a separate registration form for each camper. Checks should be made payable and sent to:

Haycock Camping Ministries  
3100 School Rd. Kintnersville, PA 18930

**Card Payment: VISA / Mastercard / Discover**

(Deposits non-refundable/non-transferable)

Card# \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_/\_\_\_\_ \$ \_\_\_\_\_

Exp. Date

Amt. Charged

\_\_\_\_\_  
Please Print Name of Card Holder

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Billing Address: (if different from mailing address)