

# Registration—Singles 2011

August 29-September 5, 2011

Name \_\_\_\_\_

Address \_\_\_\_\_

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

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

Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_ Gender M F

Age  under 21  21-25  26-35

36-45  46-55  56-65  65+

Days Attending (5 minimum)  All (Mon.-Mon.)

M  Tu  W  Th  F  Sa  Su

Roommate Preferences \_\_\_\_\_

Camp Fee (includes recreation, meals, lodging)

\$345/week or \$70/day \$ \_\_\_\_\_

Linen packet \$15 \$ \_\_\_\_\_

Airport pick-up \$40 \$ \_\_\_\_\_

Late registration (after 8/5) \$40 \$ \_\_\_\_\_

Total amount to charge \$ \_\_\_\_\_

Card No. \_\_\_\_\_ Exp. \_\_\_\_\_

Type of card  MasterCard  Visa

Signature \_\_\_\_\_

Deposit (Minimum \$35) \$ \_\_\_\_\_

Balance Due (Due by 8/5) \$ \_\_\_\_\_

Activity Disclosure and Release for Participation in Camp MiVoden's Program—  
Upper Columbia Conference of SDA

Camp MiVoden has done everything reasonable to assure that all aspects of our camp program (including the challenge course, zip line, rock climbing, and horsemanship) have been made as safe as possible. However, we wish to inform you that camp activities are not without risk. As in any camp activity, such as challenge course, zip line, rock climbing or horsemanship, inherent risks exist and may result in serious injury or death. You should only participate if you understand what the activity involves and are willing to assume the inherent risks. Please note, the challenge course, zip line, rock climbing and horsemanship are not required activities. If you have any questions, please call (509) 242-0506 or call (208)772-3484 during the summer.

Contract of Release and Assumption of Risk Agreement

By signing below I acknowledge I have read the above statement. I realize camp activities have inherent risks. I knowingly accept and assume these risks, and agree to release Camp MiVoden, its employees, and the Upper Columbia Conference of SDA, and its parent organizations from liability in case of accident or illness. I also agree that photographs and video footage of me may be used in camp promotional material. I agree to abide by all camp regulations and policies and to uphold its objectives.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Reservations and questions please call 509-242-0506.

For reservations, send full payment made payable to Camp MiVoden. After August 5, no refunds are available, and a late fee of \$40 will apply.

Send completed registration to:  
Camp MiVoden  
17415 E Hayden Lake Road  
Hayden Lake, ID 83835