

Marketplace Registration Form
Ruggles Camp
June 25, 26, and 27, 2019

Name _____ Age _____ Grade _____

Male or Female (circle one) T-shirt size _____ (Adult or Child)

Address _____

Phone #s: Home _____ Business or Cell _____ / Birthday _____

Person to notify in case of emergency if parent or guardian can't be reached _____

Relationship of this person _____ Phone _____

Church attending _____ Pastor _____

Does this child/youth have any medical condition that we should be aware of? If so list: _____

Check the following that applies to applicant: Asthma ___ Hives ___ Bee Sting ___
Poison Ivy _____ Foods (please list) _____
Medications _____ Allergies _____

Note: any child sent with medication to be taken must have a note from the parents or guardian stating the kind of medication, what it is for, and when it is to be taken.

Photo Use Permission: I grant Ruggles Camp & Retreat Center, and persons acting thru them, the right to use, reproduce, assign, and/or distribute photographs, films, videotapes, and sound recordings of myself or my minor child without compensation for use in promotion, advertising, educational publications, websites, and personal memorabilia

Who is the contact person from your church who will be on the grounds? _____

I _____ parent/guardian of _____ give my permission for treatment as deemed necessary, and for photo use as describe above.

(We MUST have a signed registration form!)

Registration form and \$15.00 fee* must be turned in to the church coordinator, pastor or MARKETPLACE registrar but must be postmarked to the registrar by June 10, 2019.
**(After June 10, fee is \$20.00)*

MARKETPLACE Registrar:

Ms Cynthia Wood
PO Box 103
Brooksville KY 41004