

Marketplace Registration Form
Ruggles Camp
June 18, 19, and 20, 2024

Camper's Name _____ Age _____ Grade (in the fall) _____

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

Parent / Guardian's Name _____

Address _____

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

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

If contact information is different, please add it to the back of this form _____

Relationship of this person _____ Phone _____

Church attending _____ Pastor _____

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

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.

I _____ parent/guardian of _____ give my permission for treatment as deemed necessary, and for photo use as described 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 May 31, 2024.
****(After May 31, fee is \$20.00)***

MARKETPLACE Registrar: Ms Cynthia Wood; PO Box 103; Brooksville KY 41004