

**2009 SUMMER FESTIVAL JUNIOR HIGH REGISTRATION**  
**UNIVERSITY OF WISCONSIN STOUT**      **JULY 20-JULY 25**

Name \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_

Address \_\_\_\_\_

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

Sex: M   F                      Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Grade Just Completed in 2008-2009 School Year \_\_\_\_\_

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

**I am attending with this Church/Group: Family Fest**

**\*\* IN CASE OF EMERGENCY\*\*** I understand that every effort will be made to contact me. If I cannot be reached, I hereby give Youth Forum and/or Family Fest Ministries the permission to act in my behalf in seeking emergency treatment for my child in the event that such treatment is deemed necessary by Youth Forum and/or Family Fest Ministries. I give my permission to those administering emergency treatment to do so, using those measures deemed necessary. I absolve Youth Forum and/or Family Fest Ministries from liability in acting on my behalf in this regard so long as Youth Forum and/or Family Fest Ministries is not grossly negligent.

**\*\*PROMOTIONAL MATERIAL RELEASE\*\*** I give Youth Forum MN permission to use photography and video taken at the Summer Festival to be used in promotional material.

**Signature of Parent or Guardian** \_\_\_\_\_

**Parent's e-mail** \_\_\_\_\_

**Daytime Phone Number** \_\_\_\_\_

**In case parents are unreachable, please contact:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Additional comments regarding medical history, allergies, penicillin or drug reactions that may be needed in treatment: \_\_\_\_\_

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**Parent or Guardian's Health Insurance Company**

**Name & Address:** \_\_\_\_\_

**Policy Number:** \_\_\_\_\_

Camper Cost: \$365.00. Camper cost includes Summer Festival fee, T-shirt, and transportation. It does not include costs for counselors. If you would like to donate to the counselor fund, it would be greatly appreciated. We are hoping to bring 1 counselor for every 8 kids.

Mail registration and \$50 deposit to: Family Fest Ministries, 140 W 98<sup>th</sup> St. STE 206, Bloomington, MN 55420