

Church & Group Contact Sheet

Attach this sheet to your Background Check Compliance Form & Camper/Buddy List and bring with you to Registration on the first day of camp. (Medications & Medical Release forms will be turned in separately.)

, , ,			
Church or Group Name:			
Church or Group Address:			
		State:	
On Grounds Contact Person:		Cell Phone: ()	
Onsite Registration	Check List:		
1) Online Registration Complete	!		
2) Background Check Compliand	e Sheet		
3) Church Contact Sheet			
4) Complete list of Campers & B	uddies who are checking	g in with you.	
5) Medical Authorization & Rele	ase Forms for each Camp	per	
They must be signed. These registered.	will be turned in to the c	amp nurse at the Nurse's Station	after you have
6) Medications for each Camper			
-		or other container as stated when at the Nurse's Station after you	•
7) Total Remaining Payment (ca	sh or check only)/ <i>Check</i> s	s made payable to BGCO	
Attach with a paper clip, a li	st of names of the camp	ers & buddies for whom the chec	k is written.
-	per & Buddy attending v	nd are complete, and that I have to with my group have read & under the my group abides by them.	

Date

Signature of Church or Group Representative