575 Burton Road, Greenwich, NY 12834
ph 518 692-9550 fax 518 692-8777
www.CtKcenter.org

Beaver Cross CYM Events Registration Form

Contact Information

Name_____ Nickname _____

Email _____ Date of Birth ___/____/_____ Gender_____ Grade _____

Is the Participant? Adult or Youth T-Shirt Size: Adult S M L XL XXL (shirts are not given at every event)

Parent s) Guardian Name _____ Home Phone (_____)_____

Address_____
street city state zip

Email_____ Home Church_____

Would you like to receive our CtK Weekly Program Updates via e-mail? Yes No

Would you like to receive the Beaver Cross Newsletter ? Yes No

Medical Information

Alternate Emergency Contact: _____ Relationship: _____

Phone: (_____)_____ Other: (_____)_____ Do you have family medical insurance? □ Yes □ No

Take Medicine on a routine basis □ Yes □ No

Please List Medication and reason: _____

Known Allergies □ Yes □ No

Please List: _____

You can administer the following to my child for pain relief as needed: ___ Tylenol ___ Ibuprofen

The person herein has permission to engage in all scheduled activities except as noted by me. In the event that I cannot be reached in an emergency, I hereby give permission to the medical personnel selected by Beaver Cross and CtK staff to hospitalize, secure proper treatment for, and to order injections and/or surgery for my above named child. This application has my approval. Photographs in which my child appears may be used for promotional purposes.

Signature Parent or Guardian: _____ Date:_____

Registration Information

Circle Choices

	Fall Confirmation Retreat September 25-27, 2009 Grades 6-12 & Adult Leaders Fee$89	**Middle School Retreat** Nov. 6-8, 2009 Grades 6-8 Fee $89	**Cathedral Lock-In** Date TBA Grades 6-12 Fee $20
Jr. SonShine Feb 12-14, 2010 Grades 6-8 Fee $89	**Sr. SonShine** Feb 19-21 Grades 9-12 Fee $89	**High School Retreat** April 30-May 2, 2010 Grades 9-12 Fee $89	**Sp. Confirmation Retreat** May 14-16, 2010 Grades 6-12 & Adult Leaders Fee $89

Payment

If paying by check: Check # _____	If paying by credit card: Visa or MC Card # _____ Exp Date: _____ CV Code _____ Signature _____