

**Cornerstone Trinity Baptist Church**  
**“PURSUING GOD'S HEART”**

**Adult Conference: Friday, May 3rd(7pm) to Sunday, May 5th (3pm)**

<b>Name</b>		<b>Note:</b> 1 form needs to be submitted for each person, including children		
<b>Address</b>		<b>AK or Guest of</b>		<b>Child's Age</b>
<b>City</b>		<b>Cross Street</b>		
<b>Zip Code</b>		<b>Home Phone #</b>		
<b>Email</b>		<b>Cellular Phone #</b>		
<b>Provide 1 or 2 names that you would like to get to know better.</b>				
<b>Indicate if you are an early (before 11pm) or late sleeper.</b>				
		<b>Early</b>	<b>Late</b>	

**Registration Cost by April 14th (Childcare is not provided.)**

- **Adults & Children 9 and up: \$185**
- **Children 3-8: \$90.00**
- **Children 2 and under: Free**

**"Forms must be accompanied with payment unless paid by paypal."**

**Please make checks payable to: Cornerstone Trinity Baptist Church (No cash accepted)**

*Or by Paypal @ [events@cornerstonetrinity.org](mailto:events@cornerstonetrinity.org): A convenience fee of \$6.00 will be charged.*

**In Case of an Emergency, Please Notify:**

<b>Name</b>		<b>Relation to Camper</b>	
<b>Work Phone #</b>		<b>Cell Phone</b>	

**Medical Coverage**

<input type="radio"/> <b>No Medical Coverage</b>	<b>Medical Insurance Company</b> _____	<b>Member ID#</b> _____
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**IF YOU TAKE ANY MEDICATION OR HAVE ANY ALLERGIES, PLEASE DESCRIBE BELOW:**

**AGREEMENT / RELEASE: (Please initial each one to show your agreement.)**

\_\_\_\_\_ I agree that any medical treatment may be given to me in an emergency.

\_\_\_\_\_ I hereby release **Cornerstone Trinity Baptist Church (“CTBC”)**, its officers, directors, employees, members, volunteers, and agents of and from any and all actions, suits, proceedings, claims, demands, assessments, judgments, damages, deficiencies, liens, penalties, fines, costs and expenses, including reasonable attorneys' fees, resulting from, based upon, or arising out of any activity, accident or injury occurring at the Camp or en route to the Camp or en route from the Camp.

\_\_\_\_\_ I agree that CTBC and Koinonia Conference Grounds may use or display any picture, video or photography taken of me at Camp for any purpose, including future promotions.

\_\_\_\_\_ I agree to adhere to the Rules of Conduct and Regulations of the Camp (“Rules”). If, at the Camp Director’s sole discretion, it is deemed that I have violated the Rules and I am sent home from Camp, I understand and agree that no refund of any amount will be given to me.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date _____	Check # _____ Check Amt _____ Paypal _____ Scholarship _____
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# Driver Information Sheet

**Name:** \_\_\_\_\_

In order to ensure that everyone arrives safely to camp and back home, we need to know the following information. If you do not know your ride situation at this time or if the information you provide on this sheet changes, please contact Steve Matsumoto at [stevemats@gmail.com](mailto:stevemats@gmail.com) before April 14<sup>th</sup>.

➤ **How do you plan to get to camp?**

- Get a ride from \_\_\_\_\_
- Drive myself. I will be leaving at approximately \_\_\_\_\_ and coming from \_\_\_\_\_.

I will also be driving the following people:

\_\_\_\_\_

\_\_\_\_\_

If you are not currently driving anyone and are able to have passengers, please indicate how many \_\_\_\_\_ and what time you will be leaving on Friday \_\_\_\_\_ and from where \_\_\_\_\_.

- I need a ride

➤ **How do you plan to get home from camp?**

- Get a ride from \_\_\_\_\_
  - Drive myself. I will also be driving the following people
- \_\_\_\_\_
- \_\_\_\_\_

If you are not currently driving anyone and are able to have passengers, please indicate how many \_\_\_\_\_ and what district you would like to drive to \_\_\_\_\_.

- I need a ride

\*Please indicate if you have any special circumstances (e.g., leaving camp early)

\_\_\_\_\_

\_\_\_\_\_