



NYR 2019 is July 21 - July 25

Individual Camper Registration Form

Three Ways to Register: You may copy this form as often as needed.

1 MAIL
 NYR Registrations
 PO Box 269
 Oronogo, MO 64855
 (Do Not Mail After July 9th)

2 ONLINE *
 nyr.org

3 AT CHECK-IN AT NYR*

*Registration form must be signed and turned in at Check-In.

Camper Information *(Print Clearly)*

Name: _____
 Date of Birth: _____
 Address: _____
 City: _____ ST: _____ ZIP: _____
 Phone: (_____) _____
 Email: _____

Age: <i>Check One</i>	Late (after 6/20)	Regular (5/23 - 6/20)	Early Bird (4/1 - 5/23)
<input type="radio"/> 0 - 3 years	\$0	\$0	\$0
<input type="radio"/> 4 - 10 years	\$35	\$35	\$25
<input type="radio"/> 5th - 6th Grade	\$100	\$90	\$80
<input type="radio"/> 7th - 8th Grade	\$100	\$90	\$80
<input type="radio"/> 9th - 11th Grade	\$100	\$90	\$80
<input type="radio"/> HS Senior	\$100	\$90	\$80
<input type="radio"/> 19 - 24 years	\$100	\$90	\$80
<input type="radio"/> 25 or older	\$100	\$90	\$80

Please send one check for all registrations and make checks payable to NYR, Inc. (see above address)

Permission is hereby given to the NYR sponsor for the minor child named above to receive emergency medical treatment, including surgery, at the most readily available licensed facility with the advice of competent medical authority. While camp directors and staff may be expected to exercise reasonable care, I hereby agree not to hold them liable for any injuries or accidents incurred during camp. I hereby grant permission for the above named minor camper to participate in the activities on the grounds of the camp.

X
 Camper signature required if over 18 _____ Date _____

X
 Parent/Guardian signature required if under 18 _____ Date _____

Medical Information *(Print Clearly)*

Medical Insurance Company: _____
 Policy Number: _____
 Known Allergies & Reactions: _____

 Medications Currently Taking: _____

Emergency Contact Information

Name: _____
 Number: _____

Church Information *(Print Clearly)*

Church Name: _____
 Youth Minister: _____
 *NYR Sponsor: _____
 City: _____ ST: _____

*Each camper must have a sponsor to locate on the NYR grounds in case of an emergency.

IN ORDER TO RECEIVE THE EARLY BIRD & REGULAR REGISTRATION RATES, PAYMENT MUST BE POSTMARKED OR SCHEDULED BY THE CORRESPONDING DEADLINES.