

RELEASE

Student Name:	Birthdate:	
In signing this registration form, I grant perm	ission for my child to attend Encounter	· Conference at Jumonville
Christian Camp and Conference Center (Jumo Association (WPA WCA), Christian Counseling video, etc.) of my child and members of my f including social networking sites, etc.). I waiv	g Associates (CCA) and Jumonville Cam family in WCA, CCA and/or Camp public	p to use images (photo, city (print ads, internet
l also acknowledge that, by their very nature understand also, that although Jumonville Caproper supervision, instruction, training and and WPA WCA and CCA to guarantee absolutes voluntary and waive any claim that may are employees/volunteers as a result of participates of Jumonville Camp and WF	amp and WPA WCA and (CCA) have take equipment for each activity, it is impos te safety. I further understand that par ise against Jumonville Camp and WPA vation in the program, except for those t	en precautions to provide sible for Jumonville Camp ticipation in these activities WCA and/or CCA and/or that are a direct result of
l also acknowledge that leaders from my chu throughout the conference and are responsil attending Encounter Conference.	- · · · · · · · · · · · · · · · · · · ·	
My child will adhere to the rules established lumonville Camp.	by our youth group leaders, Encounter	Conference leaders, and
Name (Parent/Guardian)	Signature (Parent/Guardian)	 Date



