

This form cannot be submitted on-line. It must be printed out and mailed in.

Complete the entire form for each camper and return to Golden Eagle Summer Sports Camp office. Please enclose the applicable \$75.00 or \$25.00 registration fee. This is a non-refundable deposit (**exemptions will be granted ONLY if medical documentation of illness or injury is provided**). MAKE CHECKS PAYABLE TO "CORNERSTONE UNIVERSITY." Put only one camper/camp per registration form. Feel free to make additional copies. For more information call 616-254.1671. **Send application and deposit to:**

**Cornerstone University
Attn: Summer Sports Camps
1001 E. Beltline Ave. NE
Grand Rapids, MI 49525**

Camp (circle one): BBB GBB BSC GSC Co-Ed SC VBC SB

Week: _____ (circle one): Day Overnight Commuter AM/PM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Age: _____ Height: _____ T-shirt size (adult): S M L XL XXL

T-shirt size (youth): S M L

School: _____ Grade (Fall 2010): _____

E-Mail Address (Required for Confirmation): _____

Parent(s) or Guardian(s): _____

Address (if different from above): _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Roommate Request: List the person you would like to room with (max. of 2 per room).

Cornerstone University reserves the right to dismiss any student whose conduct is detrimental to the overall good of the camp. In case of gross misconduct, no refund will be made. No deduction is allowed for late arrival or early departure except for emergencies.

I hereby authorize the directors of the Golden Eagle Sports Camps to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive and release the Golden Eagle Summer Sports Camp from any and all liability for injury or illness incurred while at camp.

Signature of Parent

Date

Cornerstone University does not discriminate on the basis of race, national origin, sex, age, or disability in any of its policies and programs.

Office Use Only: BBB GBB BSC GSC Co-Ed SC VBC SB

Amount Received: \$ _____