## **Shuttle Registration & Release Form**



Camper's Name:		
Danant / Crandian.		
Home Phone: (	)	Parent's Work Phone: ( )
Birth Date:		Parent's Work Phone: ()
	ing alone?	<u> </u>
(if "no" nar	me person(s) accom	panying camper):
Has camper flown	on a commercial air	line in the past?
How many bags wi	ill camper be checki	ng?
Will camper have a	a carry-on bag?	
Would you like our	r office staff to hold	camper's return flight ticket during camp?
Would you like our	r office staff to hold	camper's return flight traveling money during camp?
		nount and have it in a marked envelope) Amount:
(y ) = P		
<b>Arrival Information</b>	on (flight to camp)	:
Airline Name:		Flight #: Departure Time: Departure Time:
Departure City:		Departure Time:
Connecting City (if	f any):	Departure Time:
Arrival Time at Yes	eager Airport:	Date:
Special Instructions	s:	
Airline Name: Departure Time:	nation (flight back l	
Center, Inc, or an a	ndult in charge of sa aristian Camp, maki	nereby authorize the Wilderness Christian Camp & Retreat id task, to transport my child to and/or from Yeager Airport to ng any and all necessary and/or related stops or detours in
ENCOUNTERED SUBSEQUENT THE Center, Inc. and its causes of actions, conjury resulting in conjury resulting re	ON SAID ACTIVI' HERETO. I do here agents, volunteers, claims, expenses, an	GREE TO ASSUME ALL OF THE RISKS WHICH MAY BE FIES, INCLUDING ACTIVITIES PRELIMINARY AND eby agree to hold The Wilderness Christian Camp & Retreat and employees, harmless from any and all liability, actions, d damages on account of injury to my child or property, even have or which may arise in the future in connection with the sociated activities.
Parent or Guardian	Signature:	Date: