

2008 CAMP EAGLE HILL ACTIVITY AND TRIP

PERMISSION FORM

Your child will have an opportunity at Camp Eagle Hill to participate in a number of different activities and trips throughout the course of this summer. All activities and trips are supervised by mature and caring staff members.

Please fill out this PARENT PERMISSION FORM which will grant us the permission to have your child participate in the following activities and trips. The list found below is neither an exhaustive list of our camp's activities nor a form of "signing up" for the activities listed. It is only meant as a means of soliciting your permission for participation in certain camp offered activities.

If you have any questions at any time about any activities offered, please feel free to call our main office so that we may answer any questions that you may have. Each camper must have this form on file before he/she begins camp. It is therefore important for you to return this form to us as soon as possible. We thank you for your cooperation.

I give my permission for my child, named below, to participate in the following activities offered by Camp Eagle Hill. Please check "yes" or "no" for each activity listed.

<input type="checkbox"/> yes	<input type="checkbox"/> no	Team Sports
<input type="checkbox"/> yes	<input type="checkbox"/> no	Baseball
<input type="checkbox"/> yes	<input type="checkbox"/> no	Woodworking
<input type="checkbox"/> yes	<input type="checkbox"/> no	Photography
<input type="checkbox"/> yes	<input type="checkbox"/> no	Go-Karts
<input type="checkbox"/> yes	<input type="checkbox"/> no	Climbing Tower
<input type="checkbox"/> yes	<input type="checkbox"/> no	Zip Line
<input type="checkbox"/> yes	<input type="checkbox"/> no	Archery
<input type="checkbox"/> yes	<input type="checkbox"/> no	Mountain Bikes
<input type="checkbox"/> yes	<input type="checkbox"/> no	Golf on our Driving Range
<input type="checkbox"/> yes	<input type="checkbox"/> no	Golf on a nearby course (7th-10th grade only)
<input type="checkbox"/> yes	<input type="checkbox"/> no	Gymnastics
<input type="checkbox"/> yes	<input type="checkbox"/> no	Hiking (on or off grounds)
<input type="checkbox"/> yes	<input type="checkbox"/> no	Overnight Camping on grounds
<input type="checkbox"/> yes	<input type="checkbox"/> no	Overnight Camping off grounds (9th grade only)
<input type="checkbox"/> yes	<input type="checkbox"/> no	Boating (rowboats, canoes, kayaks, pedal boats)
<input type="checkbox"/> yes	<input type="checkbox"/> no	Inflatable Iceberg on the Lake/Slide into the Lake
<input type="checkbox"/> yes	<input type="checkbox"/> no	Trips to local attractions (movies, bowling, ice cream, water parks, amusement parks, baseball games <i>as examples</i>)
<input type="checkbox"/> yes	<input type="checkbox"/> no	Overnight stays at hotels as part of a trip (7th-10th grade only)

Any activity not listed where you would like your child not to participate? _____

Name of Camper _____ Grade presently completing _____

Name of Parent _____ Printed
 Name of Parent _____ Signed
 Date _____