

Let Jesus  
Ignite Your  
Life!

# Stand Your Ground 2009

S.Y.G.  
10:00 am - 8:00 pm

## Stand Your Ground 2009 Registration Form

- ⇒ **ALL PARTICIPANTS** must complete the **ENTIRE** Registration Form. One form per person, please!
- ⇒ The **EMERGENCY CONTACT** Information form **MUST** be filled out completely.
- ⇒ Cost for Stand Your Ground (S.Y.G.) is \$20.
- ⇒ **To AVOID** late fee the Registration Form with enclosed check must be **POSTMARKED NO later than October 3rd.**
- ⇒ The fee for ALL Registrations postmarked **AFTER** October 3rd or Registration at the Door is \$30.
- ⇒ Please make checks payable to Camp Manatawny and in the memo please put "Stand Your Ground".

**PLEASE MAIL this Registration Form and your check to: (no cash by mail, please)**

You can register online at:  
[www.manatawny.org](http://www.manatawny.org)

**Stand Your Ground**  
**c/o Camp Manatawny**  
**33 Camp Road**  
**Douglassville, PA 19518**

For 6th to 12th  
grade students

Doors open: Oct. 17th  
@ 9:30 am

Any questions: email Tim Davis @ [tdavissyg09@yahoo.com](mailto:tdavissyg09@yahoo.com) or call at 610-476-9057

Name: \_\_\_\_\_ Sex (circle one):  M   F

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Registering with a group:  Y   N  If yes, church name: \_\_\_\_\_

Chaperone Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Registration Fee: **(\$20)** \$ \_\_\_\_\_

Late Fee - After Oct 3rd **(\$10)** \_\_\_\_\_ (Postmark after Oct. 3rd late fee of \$10 is due / \$30 total)

T-Shirt (limited supplies \$8.00 each) \_\_\_\_\_

Size: \_\_\_\_\_ (S - M - L - XL - XXL)  
(Adult sizes)

Total: \$ \_\_\_\_\_

Total Enclosed: \$ \_\_\_\_\_

**(We are asking Chaperones to pay \$10 to help offset the two meals)**

If you are a Chaperone  
you can pre-order t-shirts as well (\$8.00).



This is a sample. T-shirt may vary

Name \_\_\_\_\_ Size: \_\_\_\_\_

# Emergency Contact Information

Emergency Contact Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

**Parent/Guardian's & Students signature are required:**

I, the undersigned, am a parent or legal guardian of \_\_\_\_\_ (the "Applicant"), and I hereby give my approval and consent for the Applicant to attend and participate in the Stand Your Ground youth rally on October 17, 2009. I hereby relieve Youth Advance of Delaware Valley Inc., its officers, directors, employees, volunteers and chaperones ("Stand Your Ground" staff) harmless from any and all claims and liability for sicknesses, injuries, accidents of any nature or cause whatsoever including, but not limited to, injuries caused by negligence of the Stand Your Ground staff. I hereby give my consent for the Stand Your Ground staff to authorize any and all emergency care necessary for the treatment of the Applicant while attending the Stand Your Ground Youth Rally.

Is your child currently taking any medications? Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, please list details below.)

Is your child allergic to any medications? Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, please list details below.)

Is your child allergic to any food? Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, please list details below.)

Does your child have any other allergies (ie bee sting) Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, please list details below.)

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date