



Camp Christian Legacy Day

Senior Day: Saturday August 8, 2026

Dean: Chuck Knox

\$30

Please make checks payable to Camp Christian and mail to PO BOX 230, Mill Run, PA 15464

If you would like to pay by credit card, please register online.

Please complete a separate form for each registrant

Please Print:

First Name _____ Last Name _____ ☐ Male ☐ Female

Contact Number _____ ☐ Cell ☐ Home Email _____

Mailing Address _____ City, St & Zip _____

Church Name _____ Church City _____

Please list any allergies of which we should be aware (food, medical):

First time attending an event at Camp Christian? ☐ Yes ☐ No

-We will be having a time of remembrance and celebration in memory of Conrad Auel during the morning session of Legacy Day this year.

Emergency Contact of someone not at camp with you.

Name _____ Relation _____

Number _____ ☐ Cell ☐ Home Alt Number _____ ☐ Cell ☐ Home

I give my permission to Camp Christian for medical treatment to be administered in such case as deemed necessary by a trained medical professional. I accept and assume all risks associated with recreation activities, and I hereby release Camp Christian of all liability from injuries that might occur. I understand that I am responsible for providing my own insurance for any injuries that occur while at Camp Christian. I recognize that this event is for spiritual enrichment and I agree to attend all sessions. I release all photos, videos, and audio recordings to Camp Christian for promotional purposes.

Signature _____

Date _____