

# **Mission Possible: Registration Form**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

E-mail (optional): \_\_\_\_\_

Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Male \_\_\_ Female \_\_\_

Please fill out the emergency contact section below:

Parent/Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

Day Phone#(\_\_\_\_) \_\_\_\_\_

Night Phone#(\_\_\_\_) \_\_\_\_\_

Cell Phone# (\_\_\_\_) \_\_\_\_\_

Email (optional) \_\_\_\_\_

Youth Pastor (or other Spiritual Mentor)

Name &

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

**\* Please return your completed registration form and Signed release forms,**

Snail Mail:

Ywam Northwoods

Attn: Mission Possible

W14580 County Highway D

Weyerheauer, WI 54895

Email: [Troysnyderus@gmail.com](mailto:Troysnyderus@gmail.com)

**YWAM Northwoods W14580 County Hwy D \* Weyerhaeuser, WI 54895 \* (715) 353-2280**

**Email: [troysnyderus@gmail.com](mailto:troysnyderus@gmail.com)**

## YWAM Northwoods Release Signatures Form:

Applicant Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name of Parent/Guardian: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_

### **LIABILITY RELEASE:**

I/We hereby release YOUTH WITH A MISSION (YWAM), its agents, employees, and volunteer assistants from any liability whatsoever arising out of an injury, damage, or loss which may be sustained by said person during the course of involvement with Youth With A Mission.

\_\_\_\_\_  
**Applicant's Signature**

*(even if under 18 years of age)*

\_\_\_\_\_  
**Guardian Signature**

*(only if applicant is under 18 years of age)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Relationship to Applicant*

### **FIELD TRIP RELEASE:**

I hereby give my consent for the above named camper to accompany his/her group on field trips and excursions during the course of YWAM event(s)/camp(s). Transportation may include walking, private automobiles driven by camp staff or chartered buses. I agree to release, hold harmless and indemnify YWAM Northwoods, its agents, employees, and volunteer assistants from any and all liability, loss, damages, claims or actions for bodily injury and/or property damage which now have or will have in the future, arising out of, or in any way have been associated with any field trip or off campus excursion.

\_\_\_\_\_  
**Applicant's Signature**

*(even if under 18 years of age)*

\_\_\_\_\_  
**Parent/Guardian Signature**

*(only if applicant is under 18 years of age)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Relationship to Applicant*

**YWAM Northwoods W14580 County Hwy D \* Weyerhaeuser, WI 54895 \* (715) 353-2280**  
**Email: troysnyderus@gmail.com**

**MEDIA RELEASE:**

I hereby give my consent for the above named camper to be photographed as a participant during the course of

YWAM event(s)/camp(s) and for his/her photograph(s) to be included in materials used for marketing the program.

\_\_\_\_\_

**Applicant's Signature**

*(even if under 18 years of age)*

\_\_\_\_\_

*Date*

\_\_\_\_\_

**Parent/Guardian Signature**

*(only if applicant is under 18 years of age)*

\_\_\_\_\_

*Relationship to Applicant*

**MEDICAL TREATMENT RELEASE:**

In case of medical emergency or other necessary medical attention, I hereby give permission to the physician selected by YWAM Northwoods to hospitalize, secure proper treatment for, and to order injection, anesthesia, x-rays or surgery for my child as named above.

\_\_\_\_\_

**Applicant's Signature**

*(even if under 18 years of age)*

\_\_\_\_\_

*Date*

\_\_\_\_\_

**Parent/Guardian Signature**

*(only if applicant is under 18 years of age)*

\_\_\_\_\_

*Relationship to Applicant*