

APPLICATION TO ATTEND SPECIAL FRIENDS CAMP - 2020 *

TENNESSEE BAPTIST ADULT HOMES, INC.

Please Note New Mailing Address!!

SPECIAL FRIENDS CAMP
PO Box 682789
Franklin, TN 37068

Please circle camp(s) attending:
\$400.00 per week*

Carson
July 13-17

Linden
July 20-24

***IMPORTANT:** The fee for Special Friends Camp is set at \$400.00 for the week. It is important that you understand that the true cost of camp is much closer to \$750.00 for the week. We are able to make camp this affordable thanks to the generous allocation of funds provided by **the Golden Offering for Tennessee Missions** (GOTM). Please support the GOTM in your local church!!

Has this camper attended Special Friends Camp before? Yes _____ No _____ If yes, what was the last year attended? _____

Camper Name _____ Name camper goes by _____
(to go on nametag at camp)

Date of Birth _____ Age _____ Gender _____ t-shirt size _____ Church membership _____

Conservator/Responsible Party

Name and address of person to receive
correspondence regarding camp

Relationship to camper _____ Home Phone () _____

Cell Phone () _____ Work Phone () _____

Email address: _____

Please use this space to provide any information that will be helpful in caring for this camper (behaviors, habits, likes, dislikes, etc.). The more information we have, the better equipped we will be to care for this camper.
Use additional sheets if necessary.

Has this camper ever displayed violent behavior toward self or others? No _____ Yes _____
If yes, please provide information on separate sheet concerning specific behavior, frequency, and how behavior is managed

THIS SECTION MUST BE SIGNED OR REGISTRATION CANNOT BE COMPLETED!!

I UNDERSTAND THAT PHOTOS WILL BE TAKEN DURING CAMP WEEK FOR THE PURPOSE OF PROMOTING THE CAMPS AND THE GOLDEN OFFERING FOR TENNESSEE MISSIONS. I FURTHER UNDERSTAND THAT SOME OF THESE PHOTOS MAY INCLUDE THIS CAMPER AND THAT THESE PHOTOS MAY BE SELECTED FOR PROMOTION.

Responsible Party _____ Date _____

Please return this Application and accompanying Camper Health Form, along with **\$400.00** per week registration fee, to the above address.

***Note: The Camper Health Form must be submitted before registration can be completed**