



Doug Karl, Camp Director
First Church of the Nazarene
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Application

Today's Date _____

Name _____ Age _____ Birthday ____/____/____

Street or P.O. Box _____ City _____

State _____ Zip Code _____ Phone () _____

Parent's Names _____ Phone () _____

Height _____ Weight _____ What is your level of surfing? Beginner Intermediate

Camper Email address _____ T-Shirt size _____

Parent email address _____

Current Grade in School _____ Name of School _____

Do you attend church? _____ If so, what is the name of your church? _____

Why do you want to attend Surf Camp? _____

Parental Permission/Release of Liability

My son, _____, has permission to attend WAVE Surf Camp in Nags Head, NC, June 14 - 21, 2009. I have read all printed materials pertaining to the camp and understand what is required and expected. I accept for myself and on behalf of my son full responsibility for any and all injuries or damages of any kind which may result from surfing, and it is my intention to hold harmless First Church of the Nazarene, Joliet, Illinois, it's church board, pastoral or camp staff for any injuries sustained while surfing or being transported to Nags Head, NC.

Father's Signature _____ Mother's Signature _____

Please mail completed application along with a non-refundable \$100 deposit to the address above.
First year campers please send a school type photo of yourself with this application.