

# CHALLENGE COURSE

Join us at Camp Emmaus for a morning of adventure on our challenge course! You can climb our rock wall, fly down our zip line, take a leap of faith from our power pole and much more! No experience necessary! Come try an experience you will not get everyday!

**WHO?** Anyone Grades 5 and up!  
**DATE?** Saturday, May 1, 2010  
**TIME?** 1-5pm  
**WHERE?** Camp Emmaus  
**COST?** \$10/participant; Observers Free!

Registration deadline -  
**APRIL 22ND**  
Check out our website at -  
[www.pathwaysbiblecamps.com](http://www.pathwaysbiblecamps.com)



# EXTRAVAGANZA!!

## 2010 CHALLENGE COURSE EXTRAVAGANZA REGISTRATION FORM!

*(Please Print)*

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

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

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

Parent or Guardian Name(s): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Name at Work Phone: \_\_\_\_\_

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

\_\_\_\_\_ I understand that the deposit is non-refundable and non-transferable.

Gender: \_\_\_ Male \_\_\_ Female Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Current Grade : \_\_\_\_\_

Church Name & City: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

By signing this form, I give my child permission to attend camp and authorize the camp staff to seek necessary medical treatment in case of emergency or illness.

For Office Use Only: PM \_\_\_\_\_ DR \_\_\_\_\_ DEP \_\_\_\_\_ CHECK # \_\_\_\_\_

Indicate any special physical, dietary or emotional needs here:

Send completed registration, with non-refundable and non-transferable deposit to: Pathways, PO BOX 1187, Bemidji, MN 56619.