

PRINTABLE REGISTRATION



Summer Camp 2025

Junior and Teen Camp will take place during the same week. We will be running two separate aged geared programs and the dates for camp are August 11-16, 2025

Camp Information

Camp is located at Penn York Camp near Ulysses, PA. It is one mile east of Ulysses on Rt. 49. Traveling west, as you pass through Mills, there is a school on the right. Camp will be on the left shortly past the school.

Camp phone: (814) 848-9811
Camp fax: (814) 848-7471

Teen & Junior Campers

Arrive between 2 & 4 pm
Monday - August 11, 2025



JR. Program

August 11 - 16
Grade 2 - 6

Junior program is a week filled with fun that you do not want to miss! From crafts and games to missions and special event days, it is an exciting mix of activities and Bible based teaching.

What to Mail

- Registration form
- Signed release form
- \$25 check (made out to Corning Area Bible Club Camp).

*Once Registration is received, detailed information pertaining to your week of camp will be mailed.

Send Registration to:
David Mogren
17 Goss Road
Elmira, NY 14903

For information regarding partial scholarship, please email dmogren@gmail.com

Camp Cost

Registration Fee: \$25
(Non-refundable)

Camp Fee: \$275

TOTAL: \$300

*Pay in full before June 1 for a discounted rate of \$275!

Register Online



Space is limited!
Get your registration in now!

Submit your registration before July 12 and get a free t-shirt!

PRINTABLE REGISTRATION

Complete and mail in this page only.

The undersigned, intending to be bound hereby, realizing it is the camp's desire to give each camper a safe and beneficial stay, and realizing each camper is covered by a reputable insurance plan, releases Corning Area Bible Club Camp and all individuals associated therewith, for any and all liability for an injury or damage which may be sustained by the undersigned and/or child of or property of the same at or in transit to or from Corning Bible Club Camp activity or under the auspices of the Corning Bible Club Camp. In case of emergency; I hereby authorize Corning Area Bible Club Camp to release to a doctor or hospital they select any health information necessary to obtain care. I also give permission to the selected physician to hospitalize, secure proper treatment for, and to order injection or surgery for my child as named on this card.

Parent/Guardian Print Name: _____

Signature: _____ Date: _____

Emergency Contact - Name: _____

Emergency Contact - Phone Number: _____

I agree to allow BCM International/Corning Area Bible Club to use audio, video, and still pictures of my child for promotional purposes. By my initials, I consent to these statements and grant yes to such authorizations, () yes () no _____ Parental/Guardian Initials

Friends you would like in your cabin (please list only two). We will do our best to accommodate requests, but cannot guarantee room assignments. 1) _____ 2) _____

Program Attending: () Teen () Junior Shirt size: _____ (Please include Youth or Adult with size,

Home Phone: _____ Completed Grade: _____ example Adult M, or Youth LG)

Address: _____

City/State: _____ Zip Code: _____

Camper's Name _____ Sex: () Male () Female

Do you have any allergies? If yes, please list them here: _____