

Application Form for (please tick)...

2025



Bible Camp (Age 10-17) - Sunday 3rd August to Friday 8th August

Bible Teaching Camp (Age 14+) - Saturday 9th August to Friday 15th August

Camper's Information

Forename(s): _____ Surname: _____

Date of Birth (DD/MM/YYYY): ___ / ___ / _____ Sex: Male / Female

Address: _____

_____ Postcode _____

Special dietary requirements: _____

Medical, health, or lifestyle matters we should be aware of: _____

Church attended (if applicable): _____

If this is the Camper's first time at YPBC, how did you hear about us? _____

Has the named Camper been involved in any civil or criminal proceedings? Yes / No

If yes, please give us more information or contact us. _____

Parent/Carer Information

If you are a camper aged 18+ attending Bible Teaching Camp, this section can be used to fill in your personal information.

Forename(s): _____ Surname: _____

Email address: _____

Phone number: _____

Pay deposit via: BACS Cheque Other _____

I give permission for the above named camper to attend YPBC 2025.

I give permission for YPBC to store this data and I know I have the right to access it and withdraw it at any time. *Please ask if you would like to see a copy of our Privacy Policy.*

I understand the payment balance will need to be paid by 11th July 2025.

Signed: _____ Date: _____

Please return this completed form to

Mr & Mrs Meek, 43 Ely Road, Little Downham, Ely, Cambridgeshire, CB6 2SN