

INSURANCE AND EMERGENCY CONTACT INFORMATION

KC STAKE YW CAMP - JUNE 8-12, 2026

(ALL YW and ADULT LEADERS need to complete this form)

EMERGENCY CONTACT INFORMATION

Emergency Contact #1 (other than parents): _____

Relationship: _____ Phone: () _____

Emergency Contact #2 (other than parents): _____

Relationship: _____ Phone: () _____

INSURANCE INFORMATION

Physician Name: _____ Phone: () _____

Medical Policy: _____ Number: _____

Participant Name: _____ Ward: _____

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