

**PUSH THE ROCK
SPORTS CAMPS...
A LIFE CHANGING
EXPERIENCE.**

P.O. Box 95, Emmaus, PA 18049
610.967.6861 / pushtherock.org



SUMMER SPORTS CAMPS 2018



Push The Rock sports camps...
a life changing experience.



BETHANY BFC

Bethany Bible Fellowship Church
75 West Broad Street
Hatfield, PA 19440

AVOID A SUMMER ON THE SIDELINES AND GET IN THE GAME...REGISTER TODAY!

Online Registration can be found at www.pushtherock.org by clicking on the **Summer Camps** tab under Programs and then clicking on **BuxMont Camps**. Or you can Register at the church office.

Financial Assistance Available

July 23-27, 8:30 am-2:00 pm
Boys Basketball, Ages 8-13

Cost: \$155

For questions regarding registration please call us at **484-553-4446** or visit www.pushtherock.org.



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BETHANY BFC

July 23-27
8:30 am-2:00 pm

Boys Basketball
Ages 8-13 - \$155

\$10 discount for each additional family member that attends camp.
Register online by April 2nd and receive a \$10 early bird discount.

CAMP DETAILS

Location: Bethany Bible Fellowship Church, 75 West Broad Street,
Hatfield, PA 19440

Basketball campers must bring their own lunch and drink each day.
For more information about your specific camp please contact **Pastor
Joel Klase** at 484-553-4446 or email him at joel.klase@gmail.com

REGISTRATION INFORMATION

Register now using one of the following TWO methods:

1. Complete the **registration form** and mail it with your \$50 non-re-
fundable deposit per camper to:

Bethany Bible Fellowship Church

Attn: Push The Rock

75 West Broad St. Hatfield, PA 19440

2. Register online at www.bethanybfc.org or at www.pushtherock.org

SCHOLARSHIPS

There are a limited number of scholarships available. Please contact
Joel Klase at 484-553-4446 or email him at joel.klase@gmail.com for
further information and an application.



REGISTRATION FORM

Boys Basketball, Ages 8-13 - \$155

Camper's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Age: _____ M/F: _____

Birth Date: _____ Grade Completed: _____

Name of School: _____

Church: _____

Parent / Legal Guardian: _____

Work Phone: _____ Cell: _____

Parent Email: _____

Emerg. Contact: _____

Phone: _____

Medical Conditions or Allergies: _____

(Please attach a second sheet with further information if necessary)

T-Shirt Size:

Youth: S M L - Adult: S M L XL XXL

New Camper

How did you hear about Push The Rock? _____

Payment

Check or money order enclosed for \$ _____

Authorization signature: _____

I have completely read and approve this application and agree to the
terms stated herein. I also give my permission for the applicant to
participate in all activities as they pertain to his/her program. I authorize
Push The Rock to hereby use any pictures or video for promotional use.

Signature of parent / guardian completing this form

For questions regarding registration please call Joel Klase at 484-553-4446

Proven Athletic Instruction - Commitment to Character - A Distinctly Christian Environment