

St. Joseph Baptist Association - Children's Camp 2010

CAMPER REGISTRATION FORM

CHILDREN'S CAMP IS FOR THOSE WHO HAVE COMPLETED 4TH - 6TH GRADES

CHILDREN'S CAMP - June 28 - July 2, 2010

SIBA Office
Use Only
Date Rec'd: _____
Paid: _____

COST: \$95**

******(Cost is \$105 if the form is turned in after the registration deadline. This reflects a \$10 late fee.)

(Checks are to be made out to your church. The church submits one check and all forms to the Association.)

Please complete both sides of this form in black or blue INK and please PRINT - Thank You.

NAME (print) _____ [] MALE [] FEMALE

AGE _____ SCHOOL GRADE COMPLETED _____ BIRTHDATE _____

ADDRESS _____ PHONE _____

CITY/STATE/ZIP _____

T-SHIRT SIZE (Check one) Adult Small Adult Medium Adult Large Adult X-Large

ARE YOU A CHRISTIAN? [] YES [] NO ARE YOU A CHURCH MEMBER? [] YES [] NO

CHURCH YOU ATTEND: _____ CITY: _____

CHURCH YOU ARE COMING TO CAMP WITH: _____ CITY: _____

IF POSSIBLE I WOULD LIKE TO BUNK WITH: (Please list church if different than yours)

1. _____

2. _____

(We cannot guarantee that you will be grouped with this person - every effort will be made to place you with one of your requests.)

I/we understand that Children's Camp begins on MONDAY, June 28 at 10:00 A.M. (Lunch served) and ends FRIDAY, July 2 at 10:00 A.M. (No lunch served). Campers are registered with the understanding that they will be at camp the entire time.

*PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

***This form must be completed on both sides - this application will NOT be accepted without health insurance information and release signature.**

Completed Forms are to be turned into your church.

The deadline for your church to submit forms to the Mission Center is June 1.

(A late fee will be assessed on all applications received after this date)

Children's Camp fills up quickly, it is very important that this application be completed accurately.

After we have reached a capacity number all applications will be placed on a waiting list in the order in which they are received.

Notice of Privacy Policy and Practices for Camper Medical Information

Purpose of this Notice

Saint Joseph Baptist Association respects the privacy of personal information and understands the importance of keeping this information confidential and secure. This Notice describes how we protect the confidentiality of the personal information we receive.

How We Protect Personal Information

We treat personal information securely and confidentially. We limit access to personal information to only those persons who need to know that information to provide services to our campers. We are required to place a copy of each camper's medical information on file with Grand Oaks Baptist Assembly.

Disclosure of Personal Information

We may disclose this information to non-affiliated entities or individuals as permitted by law. Non-affiliates with whom we may disclose information as permitted by law include our attorneys, our insurance carrier, healthcare providers, third party administrators and law enforcement. Both the Saint Joseph Baptist Association and Grand Oaks Baptist Assembly are required, as a matter of law, to hold this information in storage for an indefinite period of time.

Further Information

If you have any questions about this notice, please contact the Saint Joseph Baptist Association at 4608 Mitchell Avenue Saint Joseph, MO 64507.

I have read the Privacy Policy of the Saint Joseph Baptist Association.

***Parent or Guardian Signature** _____ **Date** _____



Appearance Clause

I understand Saint Joseph Baptist Association from time to time produces promotional material about its events. I understand that my child may be included in video or photographs taken at the children's events. I hereby grant Saint Joseph Baptist Association the right to photograph and/or video tape my child and further utilize participant's name, face likeness, voice and appearance as part of the event and in advertising and promoting the event, without reservation or limitation. In granting this license, I understand that Saint Joseph Baptist Association is under no obligation to exercise any of its rights, license and privileges herein granted by participant.

Furthermore the Saint Joseph Baptist Association is not responsible for pictures taken by individuals that attend Saint Joseph Baptist Association sponsored events.

I have read the Appearance Clause and sign in agreement.

***Parent or Guardian Signature** _____ **Date** _____

Completed Forms are to be turned into your church.
The deadline for your church to submit forms to the Mission Center is June 1.
Forms are considered incomplete if missing signatures or requested information.
A late fee will be assessed on all applications received after this date.

2010 Camper Medical Information Form – Please Print

NAME _____ BIRTHDATE _____
PARENT/GUARDIAN _____ HOME PHONE _____
ADDRESS _____ WORK PHONE _____
CITY/ST/ZIP _____ OTHER PHONE _____
CONTACT PERSON OTHER THAN ABOVE _____
ADDRESS _____ HOME PHONE _____
CITY/ST/ZIP _____ WORK PHONE _____

CHECK AND COMMENT ON ALL THAT APPLY:

ALLERGIES:

Penicillin Bee/Insect Sting Sulfa/other drugs Poison Ivy Aspirin/Tylenol
 Tetanus Shot Hay Fever Other (list) _____

HAS HISTORY OF/UNDER MEDICAL CARE FOR:

Heart Trouble Tonsillitis Skin Disorders Asthma Epilepsy
 Appendicitis Bronchitis Diabetes Hernia Nervous Disorder
 Athletes Foot Stomach Ulcer Other _____

SUBJECT TO:

Homesickness Cramps Convulsions Sleepwalking Sore Throat
 Headaches Bedwetting Nosebleeds Earaches Hyperactivity
 Fainting Toothaches Exhaustion Swimmer Ear Cold/Pneumonia
 Stomach/Digestive Disorders Other (list) _____

CHECK OR LIST ANY ACTIVITIES CAMPER SHOULD NOT PARTICIPATE IN:

Swimming Strenuous Games Archery B.B. Guns
 Should Not Use Upper Bunk Bed Other: _____

DATE OF LAST TETANUS SHOT _____

MEDICATIONS REQUIRED WHILE AWAY FROM HOME:

Name of Medication: _____ For: _____

Instructions: _____

Any medications that should not be given? (ASPIRIN, COUGH DROPS, ETC.) _____

ONLY DOCTOR PRESCRIBED MEDICATIONS IN THE ORIGINAL CONTAINER SHOULD BE SENT TO CAMP.
ALL MEDICATIONS SHOULD BE CHECKED IN WITH THE CAMP NURSE with the exception of meds that have to be kept on one's person such as for heart pain or asthma.

FAMILY PHYSICIAN _____ **PHONE:** _____

INSURANCE INFORMATION:

Is the participant covered by family medical/hospital insurance? YES NO

If so, please indicate carrier or plan name: _____ Name of Insured: _____

Group # _____ Insurance ID Number: _____

Mailing Address: _____

MEDICAL RELEASE

I (We) have provided complete and accurate information about this camper and understand that, in the event medical treatment is required, every effort will be made to contact me (us) or the other person named above. However, if I (we) cannot be reached I (we) give permission to the staff or sponsors to secure the medical services deemed necessary to provide for this campers' well being. I (We) also understand that the insurance provided by Grand Oaks Baptist Assembly, Inc. is a limited supplemental policy covering injury or accidents occurring during the event at Grand Oaks. Even then it will be used only to supplement the family insurance.

*Signed _____ Relation _____ Date ____/____/____

*Signed _____ Relation _____ Date ____/____/____

St. Joseph Baptist Association CHILDREN'S CAMP

Equipment and Clothing List

CLOTHING AND DRESS CODE:

- Bring adequate changes of clothing for one week, sport shoes, shorts for recreation, jacket, raincoat or umbrella.
- Remember that this is a Christian Camp! Clothing will be modest and appropriate for a Christian atmosphere.
- Clothing with inappropriate slogans or advertisements (such as alcohol, tobacco, vulgar language, etc.) cannot be worn at camp. The camper will be asked to change clothing if he/she wears such an item.
- Short shorts, short skirts, tank tops, or spaghetti strap blouses/dresses are inappropriate attire for camp.
- Shirts or blouses must properly cover the body no bare skin showing between the shirt or blouse and pants, shorts or skirts.
- Shirts and shoes are to be worn at ALL times. (The only exception is IN the pool.)
- Swim wear must properly cover the body. Swimsuits should be modest. String suits, bikinis, two piece swim suits, French cut swimsuits, and men's "bikini" suits are not allowed. The decision regarding appropriate swim wear and the interpretation of this policy are left up to the Camp Director.

WHAT TO BRING:

- ☺ Towels and washcloths, (extra for swimming)
- ☺ Pillow
- ☺ Sleeping Bag or Blanket and two sheets
- ☺ Bible, notebook, pen or pencil
- ☺ Toilet articles (soap, comb, toothbrush, toothpaste, deodorant etc.)
- ☺ Flashlight
- ☺ Camera (if you desire)
- ☺ Musical instrument and music (if you desire)
- ☺ Clothes hangers
- ☺ Insect repellent and Suntan lotion
- ☺ Prescription medicines (These must be checked in with the camp nurse)

ALL ITEMS BROUGHT TO CAMP SHOULD BE MARKED WITH THE CAMPERS NAME

Mail at Camp

- Campers, Coaches, ACIT's and staff enjoy receiving mail at camp. When sending letters or packages, use the complete address: Grand Oaks Baptist Assembly, 9463 Hwy 190, Chillicothe, MO 64601. Be sure your letters/packages are mailed early enough to arrive by THURSDAY. Our mail delivery is mid-afternoon and on Friday campers will be home.

If you have a comment, suggestion, or question, please contact:

St. Joseph Baptist Association, 4608 Mitchell Avenue, St. Joseph, MO 64507.

E-mail sjba@stjosephbaptistassociation.org or call 816 233-2504.

Keep this information sheet for your use. Do not return it with the registration form.

Guidelines for Campers, ACITs, and Coaches

The St. Joseph Baptist Association Children's Camp at Grand Oaks is for spiritual enrichment of our young people. It is our desire to help each girl and boy develop higher spiritual standards. For this reason, we feel that the following guidelines are necessary to maintain this standard and provide for the safety of each camper.

1. Clothing with questionable slogans, advertisements or which do not properly cover the body, will not be permitted.
2. Clean slacks, jeans, dress shorts, skirts or dresses will be worn to the evening worship services.
3. Shirts and shoes will be worn at all times.
4. Camp is a group activity. Let's work together as a group.
5. Show Christian spirit at all times. If you have a problem, take it to your coach or camp director.
6. Campers are not to leave the cabin after lights out, or leave the campgrounds at anytime without the consent of the camp director. **To fail to comply with this rule will result in your parents being called to camp to take you home.**
7. If a camper needs to leave camp notify the camp director prior to camp if possible. Parent(s) will need to sign out with the camp director.
8. All sickness should be reported to the camp nurse.
9. Obey the rules at the swimming pool.
10. Keep rooms clean at all times -- leave camp in better shape for the next group.
11. Tobacco, in any form, will not be a part of our camp program.
12. ***No cell phones, ipods, cd players, tape players, radios, or pagers please!***
13. No shaving cream except for shaving purposes.
14. In the case of an emergency you can reach a staff member at 660 646-6477.

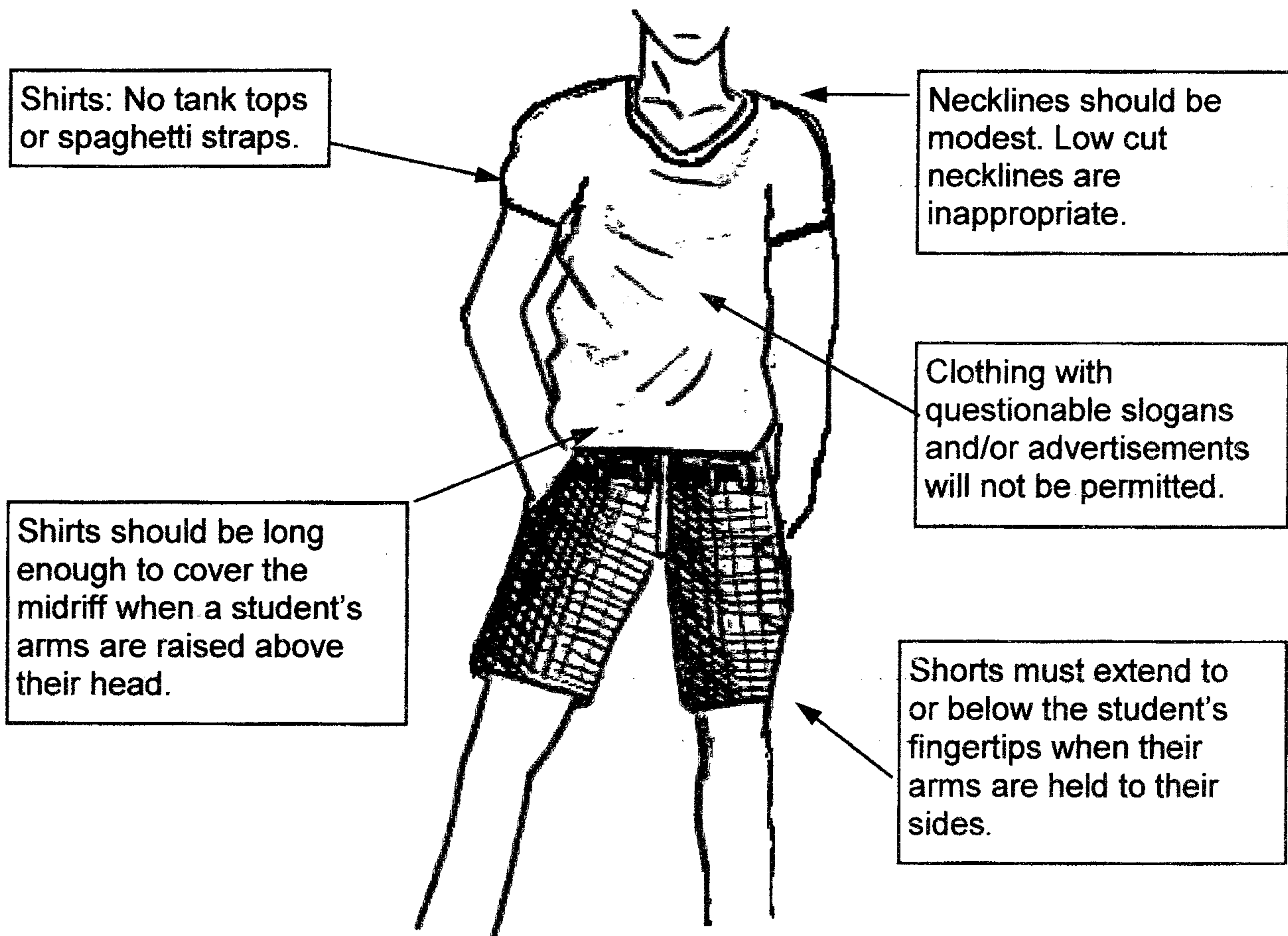
THE CAMP DIRECTOR WILL HAVE THE FINAL DECISION IN INTERPRETING THE ABOVE GUIDELINES.

***St. Joseph Baptist Association Children's Camp
Grand Oaks Baptist Assembly***

Send mail to: Grand Oaks Baptist Assembly
9463 Hwy 190
Chillicothe, MO 64601

DRESS CODE GUIDE

Clothing should be comfortable and casual but modest. The standard dress for camp this year is full t-shirts and shorts. Dress clothes are required for chapel. Girls: skirts or dresses (modest length) or long pants or jeans or dress shorts. Boys: long pants or jeans or dress shorts. Please consult this guide and other written guidelines in the camp registration materials.



Shoes must be worn at all times. Tennis shoes are preferred and required for recreation.



SWIMWEAR

Girls: Two piece swimsuits are not acceptable. One piece suits must be approved at the pool.

Everyone: Shirts must be worn by all traveling to and from the pool. A **dark shirt must** be worn in the pool over an inappropriate suit.

Speedos, spandex suits, or cut-off jeans are not acceptable as swimwear.