

# LBA Youth Camp 2018

More or Less

July 23-27, 2018

## Camper Registration Form

Please turn this form and registration fee in to your sponsoring church by July 1, 2018.  
(make your check payable to your sponsoring church)

Camp Fee \$80.00 Due Upon Registration – Deadline is July 1, 2018

This includes your camp T-shirt and snack shack. Please choose the size shirt you need.

T-Shirt Size: (Adult sizes only) Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ XL \_\_\_\_\_ 2XL \_\_\_\_\_ 3XL \_\_\_\_\_

NAME \_\_\_\_\_ M \_\_\_ F \_\_\_ AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_

ADDRESS \_\_\_\_\_ Grade Completed \_\_\_\_\_

PHONE \_\_\_\_\_

CHURCH NAME & LOCATION \_\_\_\_\_

Who would you like to room with? \_\_\_\_\_ **(We can't guarantee this will happen.)**

### **IN CASE OF EMERGENCY, NOTIFY (Parent/Guardian Information)**

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

WORK PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_ CELL PHONE \_\_\_\_\_

### **IF PARENTS/GUARDIANS CAN'T BE NOTIFIED-Second Party to Notify**

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

\_\_\_\_\_

**MEDICAL FORM ON THE BACK SIDE OF THIS PAGE MUST BE COMPLETED AND SIGNED**

**MEDICAL INFORMATION (COMPLETED BY PARENT OR GUARDIAN: NOT CAMPER)**

NAME \_\_\_\_\_

CHECK AND COMMENT ON ALL THAT APPLY

**ALLERGIES**

\_\_\_\_ Penicillin      \_\_\_\_ Bee/insect sting      \_\_\_\_ Sulfa/other drugs      \_\_\_\_ Poison Ivy  
\_\_\_\_ Sunburn easily      \_\_\_\_ Tetanus shot      \_\_\_\_ Hay fever      \_\_\_\_ Aspirin/Tylenol  
\_\_\_\_ Other (list) \_\_\_\_\_

HAS HISTORY OF/UNDER MEDICAL CARE FOR

\_\_\_\_ Heart trouble      \_\_\_\_ Tonsillitis      \_\_\_\_ Asthma      \_\_\_\_ Epilepsy/seizures  
\_\_\_\_ Appendicitis      \_\_\_\_ Hernia      \_\_\_\_ Bronchitis      \_\_\_\_ Diabetes  
\_\_\_\_ Nervous disorder      \_\_\_\_ Athletes foot      \_\_\_\_ Stomach ulcer      \_\_\_\_ Skin disorder  
\_\_\_\_ Other (explain) \_\_\_\_\_

SUBJECT TO

\_\_\_\_ Homesickness      \_\_\_\_ Cramps      \_\_\_\_ Convulsions      \_\_\_\_ Sore throat  
\_\_\_\_ Headaches      \_\_\_\_ Nosebleeds      \_\_\_\_ Earaches      \_\_\_\_ Sleepwalking  
\_\_\_\_ Exhaustion      \_\_\_\_ Fainting      \_\_\_\_ Toothaches      \_\_\_\_ Swimmer's ear  
\_\_\_\_ Hyperactivity      \_\_\_\_ Bedwetting      \_\_\_\_ Cold/pneumonia      \_\_\_\_ Moody periods  
\_\_\_\_ Stomach/digestive disorders      \_\_\_\_ Afraid of the dark      \_\_\_\_ Other (explain) \_\_\_\_\_

MEDICATIONS REQUIRED WHILE AT CAMP (All medications must be checked in with camp nurse.)

Name of Medication \_\_\_\_\_

Medication taken for \_\_\_\_\_

Instructions \_\_\_\_\_

Any medications that should NOT be given? \_\_\_\_\_

Date of last Tetanus shot \_\_\_\_/\_\_\_\_/\_\_\_\_      Other shots up-to-date? \_\_\_\_

FAMILY PHYSICIAN \_\_\_\_\_ Phone \_\_\_\_\_

NAME OF INSURANCE CARRIER \_\_\_\_\_ POLICY # \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

MEDICAL RELEASE: I (we) have provided complete and accurate information about this camper on both the Registration Form and Medical Information Form 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 sponsor to secure the medical services deemed necessary to provide for this camper's well being. I (we) also understand that the insurance provided by my sponsoring church is a limited supplemental policy covering only injury or accidents occurring during the event at Midland Ministries Camp. Even then it will be used only to supplement the family insurance. I (we) also understand that any or all of this information may be used by the Camp Director, Nurse, or Cabin Leader. I (we) have also read the attached General Information Sheet and Agree to it's contents.

**CUSTODIAL PARENT OR LEGAL GUARDIAN MUST SIGN THIS FORM BELOW**

Signed \_\_\_\_\_ Date \_\_\_\_\_ Relationship \_\_\_\_\_

YES \_\_\_\_\_ NO \_\_\_\_\_ My child has permission to participate on the zipline and "The Blob", a giant inflatable water toy on the lake.

# LIGHTHOUSE ASSOC. 2018 YOUTH CAMP

## More or Less

July 23-27, 2018

### CAMPER, PARENT, AND STAFF GENERAL INFORMATION SHEET

Note: This information sheet is for your use. **Do not** return it with your registration form. If you have additional questions, you may call Lawson Baptist Church toll free - (877) 645-1831 or (816) 296-7002.

#### I. REGISTRATION

- A. The camp fee this year is: Camper-\$80; Cabin Leader-\$0. This fee includes a camp T-shirt and snack shack. Registration and the full camper's fee should be turned into the church before the **deadline date of July 1, 2017**.
- B. If the camper is not able to attend camp, a total refund will be given. (Anyone wishing to register after the deadline should contact Lawson Baptist Church 877- 645-1831 to check availability.) Cabin leaders must be 21 years of age or older. (Assistant Cabin Leaders must be 19 years of age by the beginning of camp.)
- C. Onsite camp registration begins at **9:30 a.m.** on Monday and camp ends at **12:00 PM** on Friday. Parents need to pick up youth at 12:30 PM.
- D. **ONLY** those who have COMPLETED the 6TH THROUGH 12TH GRADES are eligible for enrollment in the Youth Camp.
- E. There will be no refund of camp fees (whole or part) after Monday, the opening day of camp.

#### II. WHAT TO BRING: (AND NOT TO BRING)

- A. Bring adequate changes of clothing for five days (one change per day), sport shoes, shorts for recreation, jacket, raincoat or umbrella, toilet articles (soap, toothbrush, toothpaste, comb, deodorant, etc.), towels, wash cloths, bedding, a pillow, and a backpack or tote bag. Bring a Bible, notebook, pencil, and flashlight. Don't bring things you won't use. Bring dark clothing for Mission Impossible event.
- B. Please mark all items brought to camp.
- C. **Do not bring money, cell phones, radios, TVs, CD players, ipods, or video games.** If they are brought to camp they will be confiscated and then returned at the end of camp. The camp is not responsible for loss or theft of such items.
- D. Fans are permitted.
- E. Do not bring alcohol, fireworks, matches, lighters, tobacco, knives, etc. These items will be confiscated by the staff.
- F. Campers are not to trade clothing. **CLOTHING SHOULD BE MARKED WITH THE CAMPER'S NAME.**
- G. If you take medications, be sure to bring them with proper instructions. **ALL MEDICATIONS WILL BE PLACED IN THE CARE OF THE CAMP NURSE AND DISPENSED BY THE NURSE. NO EXCEPTIONS!**

#### III. DRESS CODE AND SWIMMING REGULATIONS

- A. Clothing (shirts, skirts, caps, etc.) with inappropriate slogans or advertisements (such as alcohol, tobacco, vulgar language, etc.) are not allowed at camp. The camper will be asked to change clothing if he/she wears such an item.
- B. Short shorts, short skirts, or spaghetti strap blouses are inappropriate attire and not allowed.
- C. **SHIRTS AND SHOES ARE TO BE WORN AT ALL TIMES.** (The only exception is IN the pool or lake)
- D. Bring dark clothing for Mission Impossible event.
- E. **Swim wear for both campers and staff shall be modest and appropriate. Swim wear must properly cover the body. String suits, bikinis, two piece swim suits, French cut swim suits, and men's "bikini" briefs are**

**not allowed. Females will wear a cover-up or t-shirt and males will wear t-shirts outside the swimming areas.**

- F. Oversight will be provided for the safety of the campers. Regulations are posted at the pool. Disobedience will result in denial of swimming privileges. This is for the safety and enjoyment of all campers.
- G. Campers will be allowed to participate on “The Blob”, a giant inflatable water toy on the lake, and the zipline WITH PARENT’S PERMISSION ONLY. Parents MUST grant permission on the Camper Registration Form.

## **V. PARENT INFORMATION**

- A. If an emergency arises and it becomes necessary to contact someone attending camp, call **(660) 329-1883**. You can be sure if there is a problem, you will be promptly notified. Campers will be allowed to call home only in an emergency. Please tell your child not to call home. No cell phones, no exceptions.
- B. Campers enjoy receiving mail at camp. When sending letters or packages, use the complete address: Midland Ministries, Attn (Campers name), 3570 SW Antelope Dr., Polo, MO 64671 . Be sure your letters/packages are mailed early enough to arrive by WEDNESDAY. Our mail delivery is mid-afternoon.
- C. You are always welcome at Midland Ministries. When you visit, please let the Camp Director know you are there before seeking out the camper. You must check in at the kitchen and obtain a visitors badge.

## **VI. GENERAL INFORMATION**

- A. Campers are not permitted to leave the camp facility during camp for any reason, except with the **parent** or guardian who took him/her to camp only. If you need to pick-up your child during camp, you will need to get permission from the Camp Director. This is for the safety and welfare of the camper. The Camp Director must give permission for a camper to leave the campus.
- B. If youth drive to camp, their keys must be turned in to the Camp Director at check-in.

**PARENTS, THANK YOU FOR TAKING TIME TO READ THROUGH THESE RULES. PLEASE DISCUSS THEM WITH YOUR YOUTH SO HE/SHE WILL UNDERSTAND THAT OUR RULES ARE FOR THEIR BENEFIT.**

**WE TAKE SPECIAL PRIDE IN MAKING OUR CAMP SAFE AND ENJOYABLE. YOUR COOPERATION IS GREATLY APPRECIATED IN PREPARING YOUR YOUTH FOR THIS WONDERFUL CAMPING EXPERIENCE.**

**REMEMBER! KEEP THIS INFORMATION SHEET FOR YOUR USE. DO NOT RETURN IT WITH THE REGISTRATION FORM.**